

**NORTH DAKOTA  
DEPARTMENT OF  
HEALTH**

# **Policy Scan for Cancer Prevention Strategy**

Overview of State Legislation Impacting Cancer Risk Factors, Treatment, and Outcomes



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## INTRODUCTION

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The North Dakota Comprehensive Cancer Control Program (NDCCCP) is housed within the Community Health Section of the North Dakota Department of Health and strives to reduce the incidence and impact of cancer for all North Dakotans by:

- \*Reducing cancer risk
- \*Finding cancers earlier
- \*Improving cancer treatments
- \*Increasing the number of people who survive cancer
- \*Improving quality of life for cancer survivors.

The NDCCCP, along with the North Dakota Cancer Coalition, develops and implements the North Dakota Cancer Control Plan, a collection of priorities, objectives, and strategies relating to cancer prevention, detection, treatment, and survivorship care. The plan serves as a guide for collaborative action towards addressing the impact of cancer and is built upon based on progress made and lessons learned from past versions of the plan. The North Dakota Cancer Control Plan has succeeded in engaging discussion among key stakeholders and resulted in implementation of objectives and strategies surrounding key health issues, such as high-quality care options and improved knowledge about cancer prevention and control.

Public health programs should routinely conduct policy scans to understand the current policy climate. This activity enables proper resource allocation, data-informed decision making, utilization-focused evaluation, and selection of strategies that positively impact the health of a community.

The “Policy Scan for Cancer Prevention Strategy” identifies and reports North Dakota statewide policies pertinent to priorities of the North Dakota Cancer Plan. The policies highlighted in this report represent a snapshot of enacted state-level actions affecting topics related to cancer that can be linked to objectives and actionable strategies highlighted in the Cancer Plan. In addition, the scan serves to:

**Establish a baseline for cancer-relevant legislation** in North Dakota by assessing policies at the state level.

**Track the health impact of cancer-relevant legislation** over time following each Legislative Session.

**Facilitate identification of policy successes and/or areas of need** within state– and local-level policy efforts.

**Support and inform the development of policy, systems, and environmental (PSE) changes** to address potential areas of need and to improve health outcomes for all North Dakotans.



# A CASE AGAINST CANCER

*Half of all men and one-third of all women in the U.S. will develop cancer in their lifetime. North Dakota is no exception to this statistic, with cancer sitting as the state's second leading cause of death. Cancer is a disease that brings physical, emotional, and financial challenges with it and its burden is growing.*

## What is Cancer?

Cancer is not a single disease, but a collection of related diseases defined by the uncontrolled growth and spread of cells into surrounding tissue. Cancer cells can spread to other parts of the body through the blood and lymph systems, which may lead to death if not controlled.

Although people of all ages are diagnosed with cancer, it is primarily an older person's disease. Over three-quarters of all cancers are diagnosed in men and women ages 55 and older. Taking steps to prevent cancer, however, can start at any age.

## Risk Factors for Cancer

Research shows that certain risk factors may increase the chance that a person will develop cancer.

The most common risk factors include:

- \*Age
- \*Family history of cancer
- \*Tobacco
- \*Lack of physical activity
- \*Alcohol
- \*Sunlight/UV exposure
- \*Diet
- \*Some viruses and bacteria

## The Burden of Cancer

A cancer diagnosis is a life changing event for every patient, family member, friend, and care-taker. Cancer patients and survivors face a host of short- and long-term challenges that can ultimately impact their quality of life.

## Cancer Priorities

While the NDCCCP and North Dakota Cancer Coalition aim to reduce the burden of cancer for all North Dakotans, the program has identified seven different cancers as priorities for action. These cancers have been given priority based on several factors including incidence, mortality, ability to screen, and controllable risk factors.

The seven priority cancers are:

- \*Breast cancer
- \*Melanoma
- \*Cervical cancer
- \*Oral-pharyngeal cancer
- \*Colorectal cancer
- \*Prostate cancer
- \*Lung cancer



# POLICY, SYSTEMS, and ENVIRONMENTAL (PSE) CHANGE

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In addressing public health issues in communities, interventions historically relied on the idea that informed individuals would make the right choices regarding their health. As a result, public health efforts focused on changing personal behavior through educational programs and events. However, it has become more apparent now that factors beyond personal choice impact peoples' health and may affect health problems that cannot be solved by individual actions alone.

## PSE Change

Policies, systems, and environments all play a role in shaping the background of people's lives; they are the laws we abide by, the worksites we function in, the hospitals we visit, and the public spaces we live in. They determine the types of food a student can pick from at lunchtime, the public amenities available in a neighborhood, the interactions a patient goes through within a health care system, and much more.

Compared to efforts that focus on changing individual behaviors, policy, systems, and environmental (PSE) changes focus on modifying environmental factors in order to make healthy choices easy and accessible for all. By tackling health problems at the population level, and addressing them in an ongoing, long term, and sustainable manner, PSE changes can lead to more widespread impacts to prevent disease and improve health outcomes.





**Table 1: PSE Approaches Defined & Put in Practice**

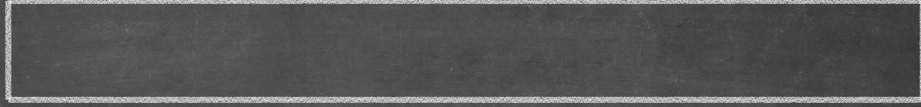
	POLICY	SYSTEMS	ENVIRONMENT
Definition	Laws, regulations, ordinances, contracts, or rules	Process or rules within an organization	Physical environments
Settings	Government bodies Worksites Community organizations Residential facilities Schools	Health care organizations Insurance systems Worksites Schools Community Associations	Worksites Schools Commercial stores Public spaces Neighborhoods
Examples	State adoption of Medicaid Expansion	Add evening operating hours for health clinics	Build sidewalks to make roads pedestrian-friendly
	Establish minimum nutrition standards policy in schools	Add cancer screening reminders to hospital health records systems	Designate a lactation room for nursing moms at work
Overlapping Examples	Establish a worksite-wellness team Form policies to promote healthy options in vending machines Zoning restrictions on fast food restaurants		

**Table 2: Programs & Events vs. PSE Changes**

How do program activities and events factor as PSE changes? In general, they are not one and the same. The following table illustrates differences between typical program activities and PSE changes in a school setting.

PROGRAMS/EVENTS	PSE CHANGES
Celebrate National Nutrition Month	➔ Add fruits and vegetables to a la carte
Host a Family Fitness Night	➔ Make school athletic facilities regularly available to families
Participate in Walk to School Day	➔ Establish a Safe Routes to School Program
Provide healthy snacks or breakfast	➔ Adopt a Healthy Food and Beverage Policy
Participate in Kick Butts Day	➔ Establish a tobacco-free school taskforce
Provide health screenings for staff	➔ Establish a building-sponsored wellness team

Adapted from the [Minnesota Department of Health, "Understanding PSE Change to Improve Health"](#)



# METHODOLOGY

**THE PURPOSE** of the Policy Scan is to identify North Dakota state-level policies relevant to cancer and the North Dakota Cancer Plan, to report the status of these laws, and to track development of cancer-relevant legislation over time.

The information identified in the scan will be used to:

- Provide a baseline of cancer-relevant legislation to allow tracking of changes over time
- Provide information to match linkages between current state policies and North Dakota Cancer Plan priorities, objectives, and strategies
- Facilitate identification of policy successes and/or areas of need
- Encourage implementation of PSE changes to address potential areas of need

The process used to conduct the Policy Scan was adapted from Connecticut Department of Health's "The Policy Scan in 10 Steps," a 10 Step Guide based on the Connecticut Chronic Disease Policy Scan.<sup>1</sup>

## NDCCCP Policy Scan Steps

1. Define the policy scan purpose, objectives, and scope.
2. Identify potential data sources.
3. Design the data collection tool.
4. Design a search flow diagram.
5. Identify search terms.
6. Maintain consistency and document searches.
7. Review policies for appropriateness and accuracy. Include different reviewers.
8. Analyze data based on type of information desired.
9. Refine, review, share, and identify a system for updating.

## SOURCES

Contents of the Policy Scan draw primarily from permanent laws of the North Dakota Century Code and administrative rules of the North Dakota Administrative Code. Additional tobacco-related Century Code and Administrative Code not identified through the search methods were provided by the North Dakota Tobacco Prevention and Control Program.

## DATA COLLECTION TOOL

The data tool structures the materials to be collected and aggregated during the search. Defining the parameters to be included helps focus the search so that the most relevant information can be extracted. For this Policy Scan, the data collection tool fields and descriptions are detailed in "Table 3."

<sup>1</sup> Cox, Tiffany (2014) The Policy Scan in 10 Steps, A 10 Step Guide Based on the Connecticut Chronic Disease Policy Scan. Hartford, CT: Connecticut Department of Public Health.

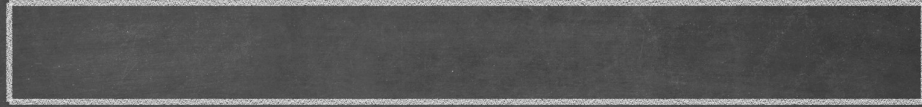


Table 3: NDCCCP Scan Data Tool

Field	Description
Source	Abbreviation for the source of data. Data either originated from the North Dakota Century Code (NDCC) or the North Dakota Administrative Code (NDAC).
Number	Complete numerical code for a specified title, chapter, and section for NDCC or title, article, chapter, and section for NDAC. Titles, articles, chapters, and sections are separated by a hyphen.  NDCC: title—chapter—section NDAC: title—article—chapter—section
Title	Title name to which a policy belongs. For NDAC, titles are captioned for the agency who adopted the rule.
<sup>2</sup> Article	Article name to which a policy belongs.
Chapter	Chapter name to which a policy belongs.
Section	Section name to which a policy belongs.
Language	Exact text found under the section in the NDCC or NDAC.
URL	Link to the chapter in which a policy is found.
Search date	Date (Month/Day/Year) when the policy was identified in a search.
<sup>1</sup> Enacting Bill	Denotes information about the bill in which a current Century Code was enacted on. Includes whether the bill originated in the House or Senate, the bill number, the legislative year it was passed, and a link to the bill.
<sup>1</sup> Amending Bills	Denotes information about the bill(s) in which a current Century Code was amended. Includes whether the bill originated in the House or Senate, the bill number, the legislative year it was passed, and a link to the bill.
<sup>2</sup> Effective Date	Date in which an Administrative Code went into effect.
<sup>2</sup> Amendments	Date in which an Administrative Code was amended.
<sup>2</sup> General Authority	Refers to the NDCC statute that authorizes an agency to adopt a given rule/Administrative Code. Recorded as the source (abbreviated) and number of the respective NDCC statute.
<sup>2</sup> Implementing Authority	Refers to the NDCC statute that is implemented by a particular agency rule/Administrative Code. Recorded as the source (abbreviated) and number of the respective NDCC statute.

<sup>1</sup>Applies only to Century Code

<sup>2</sup>Applies only to Administrative Code

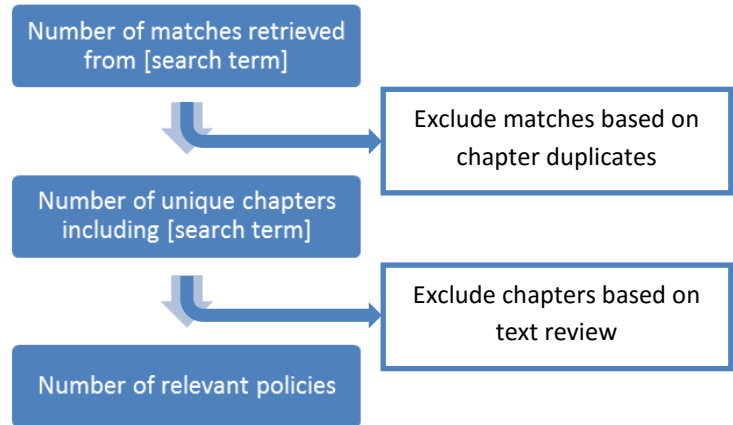




## SEARCH FLOW DIAGRAM

A search flow diagram is a way to track the search process, maintain consistency between searches, and ensure validity of the scan.

For this Policy scan, the search flow diagram reflects specificities and attributes of the scan’s specific data sources. When using the North Dakota legislative council search engine, searches are first filtered by source: Century Code or Administrative Rules. Once a source is specified and a search term entered, the search engine returns chapter numbers for all text matches to the search term. Duplicate chapter numbers are then excluded. With the remaining unique chapters, a full text review is performed to identify sections relevant to cancer topics. Sections deemed relevant are then reported in this policy scan.



## IDENTIFYING SEARCH TERMS

When conducting the search, it is important to note how search syntax is handled with the particular search engine. The North Dakota Legislative Branch search engine, which performs text searches through the North Dakota Century Code and Administrative Code, will return content that includes all search terms by default. To search for phrases where words should appear together, the phrase must either be entered within quotation marks or connected using a hyphen. Words not connected using quotations or hyphens will be searched for as separate entities.

Ex. physical-education OR “physical education” yields articles containing the phrase together.  
physical education yields articles containing both words “physical” and “education,” but not necessarily together as a phrase.

The following search terms were used for the Policy Scan:

### CANCER

- Cancer
- Colorectal cancer
- Breast cancer
- HPV/human papilloma virus
- Cervical cancer
- Skin cancer/melanoma
- Prostate cancer
- Lung cancer
- Cancer screening
- Colonoscopy
- Mammogram/mammography
- Pap test/pap smear

### RISK FACTORS

- Tobacco
- Smoking
- Nicotine
- Cigarette
- Nutrition/nutritious
- School-health
- School meal
- Child-nutrition
- Physical-activity
- Physical-education
- “Supplemental nutrition assistance program”
- UV/ultraviolet

### RISK FACTORS (cont.)

- Tanning
- Sunscreen

### ACCESS TO CARE

- Cancer insurance

### ENVIRONMENTAL FACTORS

- Carcinogen
- Radon

**Table 4: Selected North Dakota Policies**

The following table contains summaries of a selected number of policies identified through the Policy Scan, which were chosen based on their direct relevance to North Dakota Cancer Plan objectives and strategies. For a complete list and summary of all policies identified in the scan, please visit [www.ndhealth.gov/cancer/PolicySearch/](http://www.ndhealth.gov/cancer/PolicySearch/)

Policy No.	Summary Title	Description	Introduced
<b>Breast &amp; Cervical Cancer</b>			
<a href="#">NDCC</a> <a href="#">23-01-43</a>	Mammography - dense breast notification	Requires facilities providing mammography exam to send a written notice if the patient is found to have heterogeneously dense breasts or extremely dense breasts. The notice shall state that the patient has dense breast tissue, that dense breast tissue may make it more difficult to detect cancer on a mammogram, and that dense breast tissue may increase the patient's risk of breast cancer.	HB 1370 (2015)
<a href="#">NDCC</a> <a href="#">26.1-36-09.1</a>	Mammogram examination coverage	Requires health insurance policies to cover one baseline mammogram exam for women between 35-40 and one mammogram exam every year, or more frequently if ordered by a physician, for women older than 40.	*HB 1166 (1993)
<a href="#">NDCC</a> <a href="#">50-24.1-17</a>	Medical assistance for breast or cervical cancer	Allows women to receive medical assistance if found to have breast or cervical cancer. Income eligible applies and eligibility limit is defined as two hundred percent of the poverty line.	*Unknown
<a href="#">NDAC</a> <a href="#">75-02-02.1-24.1</a>	Breast and cervical cancer early detection program	The breast and cervical detection group consists of women under age sixty-five who are uninsured and not otherwise eligible for Medicaid, have screened for breast and cervical cancer through Women's Way under the Centers for Disease Control and Prevention's breast and cervical cancer early detection program and are found to require treatment for breast cancer, cervical cancer, or a precancerous condition relating to breast or cervical cancer, meet requirements of 75-02-02.1-16, 75-02-02.1-18, and 75-02-02.1-19, and maintain eligibility until treatment is no longer required.	July 1, 2003
<b>Human Papilloma Virus (HPV)</b>			
<a href="#">NDCC</a> <a href="#">23-01-33</a>	State Department of Health responsibilities regarding HPV	The state department will educate the public about human papilloma virus (HPV) and availability of HPV vaccine, promote immunization against the virus, and distribute information about the virus and vaccine through relevant programs. Materials distributed must contain recommendations of the Centers for Disease Control and Prevention immunization practices advisory committee, information relevant to target populations, and information on vaccine availability through vaccines for children programs or medical assistance programs.	HB 1471 (2007)
<b>Prostate Cancer</b>			
<a href="#">NDCC</a> <a href="#">26.1-36-09.6</a>	Insurance coverage for prostate cancer screening	Requires health insurance policies cover an annual digital rectal examination and a prostate-specific antigen test for asymptomatic males older than 50, black males older than 40, and males older than 40 with a family history of prostate cancer.	*Unknown

\*Earliest known amending bill; Enacting bill is unknown

**Table 4: Selected North Dakota Policies (cont.)**

Policy No.	Summary Title	Description	Introduced
<b>Skin Cancer</b>			
<a href="#">NDCC 23-39-03</a>	Warning signs in tanning facilities	Requires tanning facilities to give customers written notice that overexposure to a tanning device causes burns, repeat exposure may cause premature aging of the skin, and repeat exposure may cause skin cancer. Requires display of prominent warning signs where tanning devices are used.	HB 1154 (2007)
<a href="#">NDCC 23-39-05</a>	Tanning facility customer age restrictions	Customers under eighteen years of age are not permitted to use the tanning facility unless the customer provides written consent of a parent or legal guardian. The consent form is prescribed by the state department of health and must be notarized by the parent or guardian in the presence of the tanning facility owner or employee. Customers under the age of fourteen may not use a tanning device without a written order from a physician and without being accompanied by a parent or legal guardian.	HB 1154 (2007)
<b>Cancer (General)</b>			
<a href="#">NDCC 26.1-36-09.14</a>	Cancer treatment medication coverage	If an insurer provides coverage for patient-administered cancer treatment medications, the insurer may not also provide coverage for cancer treatment medications that are injected or intravenously administered by a health care provider unless the costs of patient-administered cancer treatment medications do not exceed the amounts for cancer treatment medications that are injected or intravenously administered by a health care provider.  <i>The public employees retirement board shall provide coverage of cancer treatment medications for public employees in the same manner (<a href="#">NDCC 54-52.1-04.14</a>).</i>	*HB 1072 (2015)
<a href="#">NDCC 65-01-15.1</a>	Presumption of compensability for certain conditions of full-time paid firefighters and law enforcement officers	Full-time paid firefighters or law enforcement officers may be compensated for health impairments suffered in the line of duty. Occupational cancer, respiratory disease, hypertension, and heart disease are presumed to be suffered in the line of duty.	SB 2343 (1997)
<b>Physical Activity</b>			
<a href="#">NDCC 15.1-21-02</a>	High schools - Required units	Requires public and nonpublic high schools to provide each student one-half unit of health and one-half unit of physical education per school year. Once every four years, the physical education unit must be a fitness class with instruction on personal fitness.	HB 1045 (2001)
<a href="#">NDCC 15.1-21-02.2</a>	High school graduation - Minimum requirements	Establishes minimum requirements for high school graduation. Requirements include one unit of physical education or one-half unit of physical education with one-half unit of health.  <i>Similar graduation requirements apply to students pursuing an optional high school curriculum (<a href="#">NDCC 15.1-21-02.3</a>).</i>	SB 2309 (2007)

\*Earliest known amending bill; Enacting bill is unknown

**Table 4: Selected North Dakota Policies (cont.)**

Policy No.	Summary Title	Description	Introduced
<a href="#">NDAC 67-19-01-34</a>	Instructional program - Enrollments in grades seven and eight	Public school students grades seven and eight are required to enroll in physical education for a minimum of 80 minutes and health for a minimum of 50 minutes per week.	January 1, 2000
<a href="#">NDAC 67-19-01-35</a>	Instructional program - Enrollments in prekindergarten through grade six.	Students grades one through three are required to receive health instruction for a minimum of 40 minutes and physical education for a minimum of 90 minutes per week. Thirty minutes of supervised recess may count as part of the ninety minutes of physical education for grades one through three. Students grades four through six are required to receive health instruction for a minimum of 80 minutes and physical education for a minimum of 90 minutes per week.	January 1, 2000
<a href="#">NDAC 75-03-08-14</a>	Minimum requirements of the facility	A family child care facility must have a minimum of thirty-five square feet of indoor recreation space and seventy-five square feet of outdoor recreation space per child. Alternatively, a facility may provide seventy-five square feet of additional indoor recreation space in lieu of the outdoor space requirement. The child care and play area must be free of clutter, accumulation of refuse, standing water, unprotected wells, debris, and other health and safety hazards.	January 1, 1999
<b>Nutrition</b>			
<a href="#">NDCC 50-01.2-03.2</a>	County duties - Financing in exceptional circumstances	The department of human services will reimburse county social service boards for expenses from locally administered economic assistance programs if ten percent or more of the county's supplemental nutrition assistance program caseload resides on federally recognized Indian reservations.	*SB 2012 (1999)
<a href="#">NDCC 50-06-05.8</a>	Department to assume certain costs of certain social service programs	The North Dakota department of human services will pay for a county's share of costs relating to electronic benefits transfers for the supplemental nutrition assistance program.	Effective taxable years after December 31, 2015
<a href="#">NDCC 57-39.2-04.1</a>	Sales tax exemption for food and food ingredients	Food and ingredients are exempt from sales tax imposed by chapter 57-39.2. Food and ingredients do not include alcoholic beverages, candy, chewing gum, dietary supplements, prepared food, soft drinks with fifty percent or less fruit juice, and tobacco.	*HB 1327 (1985)
<a href="#">NDAC 33-33-04-04.3</a>	Food labels	Stipulates labeling guidelines for packaged food. Bulk, unpackaged foods such as bakery products need not be labeled if a health, nutrient content, or other claim is not made or if there are no state or local laws requiring labeling.	August 1, 2003
<a href="#">NDAC 67-21-01-09</a>	School Lunch Program menus	All lunch served under the school lunch program must meet the dietary guidelines for Americans as established by the federal regulations in 7 CFR 210.	January 1, 2000

\*Earliest known amending bill; Enacting bill is unknown

**Table 4: Selected North Dakota Policies (cont.)**

Policy No.	Summary Title	Description	Introduced
<a href="#">NDAC 67-21-03-05</a>	Special Milk Program	The special milk program, initiated at the federal level and in partnership with the states, is designed to encourage the consumption of fluid milk by children. Adoption of the special milk program requires local agencies to serve milk free to all children who are determined eligible for such meals and to serve milk that meets the minimum requirements.	January 1, 2000
<a href="#">NDAC 67-21-05-08</a>	Summer Food Service Program	All meals served under the Summer Food Service program must meet the guidelines as stipulated in the federal regulations.	January 1, 2000
<a href="#">NDAC 75-03-11.1-21</a>	School-age Child Care Program Early Childhood Services - Minimum standards for food and nutrition	When operators of a school-age child care program are responsible for providing food to children, food must meet United States department of agriculture standards and be properly prepared, nutritious, varied, and served at appropriate hours. When parents bring sack lunches for their children, the operator will supplement lunches, as necessary, to provide nutritious and sufficient amounts of food for children.  <i>Similar standards apply for Family Child Care Early Childhood Services (<a href="#">NDAC 75-03-08-21</a>) and Child Care Center Early Childhood Services (<a href="#">NDAC 75-03-10-21</a>).</i>	June 1, 1995
<b>Wellness</b>			
<a href="#">NDCC 65-05-07</a>	Workforce Safety and Insurance - Compensable injuries	The workforce safety and insurance fund may provide support for an employee to treat a compensable injury. The workforce safety and insurance organization may not pay for aids or programs to help the employee lose weight or stop smoking unless ordered by the workforce safety and insurance organization.	HB 1119 (1989)
<a href="#">NDAC 92-01-02-29.1</a>	North Dakota Workers' Compensation Act - Medical necessity	Treatments to improve general health, such as nutritional supplements, diet and weight loss programs, and programs to quit smoking, do not qualify as a medical necessity and will not be paid for by workforce safety and insurance.	January 1, 1994
<a href="#">NDCC 54-52.1-14</a>	Uniform Group Insurance Program - Wellness Program	The uniform insurance board shall develop an employer-based wellness program. The program must encourage employers to adopt a board-developed wellness program either by charging extra health insurance premium to nonparticipating employers or reducing premium for participating employers.	SB 2060 (2003)
<a href="#">NDAC 45-06-12-02</a>	Prohibiting discrimination against participants and beneficiaries based on health status-related factors	Insurers offering group health insurance may not establish rules for eligibility or require an individual as a condition of enrollment to pay a greater premium based on a health status-related factor. This section shall not be construed to prevent the insurer from establishing premium discounts or rebates in return for adherence for a bona fide wellness program that provides health promotion and disease prevention.	December 1, 1997

\*Earliest known amending bill; Enacting bill is unknown

**Table 4: Selected North Dakota Policies (cont.)**

Policy No.	Summary Title	Description	Introduced
<b>Tobacco</b>			
<a href="#">NDCC 12.1-31-03</a>	Sale of tobacco, electronic smoking devices, or alternative nicotine products to minors and use by minors prohibited	Prohibits sale and procurement of tobacco products, including electronic smoking devices, to minors. Restricts sale of tobacco products through self-service displays. Allows local jurisdictions to adopt policies on tobacco product sale to minors. Minors fourteen years of age or older who violate subsection 2 or 3 must appear before a court and pay a fee of \$25.	*SB 2125 (1999)
<a href="#">NDCC 12.1-31-03.1</a>	Vending machines prohibited	Prohibits tobacco product sale through vending machines, unless a salesperson controls product dispensation or the vending machine is located where minors are not permitted access. Tobacco products may not be placed with any nontobacco product, other than matches, in a vending machine.	HB 1358
<a href="#">NDCC 12.1-31-03.2</a>	Child-resistant packaging for liquid nicotine containers	Any nicotine liquid containers sold must meet child-resistant effectiveness standards set forth in title 16, CFR, part 1700, section 15. Violation of this section is punishable by a civil penalty of no more than \$500.	HB 1186 (2015)
<a href="#">NDCC 15.1-21-01</a>	Elementary and middle schools - Required instruction	Elementary and middle schools must provide instruction in physical education, health, hygiene, disease control, and the nature and effects of alcohol, tobacco, and narcotics in order to be approved by the superintendent of public instruction.	HB 1045 (2001)
<a href="#">NDCC 23-12-10.2</a>	Complaints and enforcement - City and county ordinances and home rule charters	State agencies will enforce section 23-12-10 smoking restrictions. This act will not displace any other state or local tobacco control laws that provide more stringent protection from secondhand smoke hazards.	*SB 2245 (1991)
<a href="#">NDCC 23-12-10.4</a>	Responsibility of proprietors - Reimbursement of costs of compliance	Requires owners of public places or places of employment where smoking is prohibited to post no smoking signs, remove ashtrays from smoke-free areas, communicate to all employees that smoking is prohibited, and direct noncompliant smokers to cease smoking activity.	*HB 1253 (2013)
<a href="#">NDCC 23-12-11</a>	Smoke-free Violation Penalty	Smoking in a smoking-prohibited area is punishable by a fine not exceeding \$50. Owners of a public place or place of employment who fail to comply with smoke-free laws are also subject to a fine and possible suspension of permits or license.	*HB 1272 (1987)
<a href="#">NDCC 23-38-01</a>	Community health grant program	Establishes a community health grant program to prevent and reduce tobacco use by strengthening community-based public health programs and assisting public health units statewide.	SB 2380 (2001)
<a href="#">NDCC 23-42-04</a>	Tobacco Prevention And Control Program: Powers and duties of the executive committee	Establishes powers of the tobacco prevention and control executive committee. Requires the executive committee to provide no smoking signage for public places or places of employment as requested.	HB 1339 (2009)

\*Earliest known amending bill; Enacting bill is unknown

**Table 4: Selected North Dakota Policies (cont.)**

Policy No.	Summary Title	Description	Introduced
<a href="#">NDCC</a> <a href="#">50-11.1-02.2</a>	Early Childhood Service Facilities: Smoking Prohibition	Prohibits smoking on premises where early childhood services are provided.	*SB 2085 (2013)
<a href="#">NDCC</a> <a href="#">51-25-02</a>	Tobacco Product Manufacturer Sales: Requirements	Mandates all tobacco product manufacturers participate in the master settlement agreement of 1998 and commit to financial obligations of the settlement. Noncompliance is punishable by civil penalty and prohibition from cigarette sales.	*HB 1153 (1999)
<a href="#">NDCC</a> <a href="#">54-27-25</a>	State Government: Tobacco settlement trust fund	Establishes the tobacco settlement trust fund in the state treasury, which consists of funds obtained from the tobacco settlement agreement of 1998. The tobacco prevention and control executive committee will administer moneys from the fund to create and implement a comprehensive plan. If there is not adequate dollars to fund a plan, money may be transferred from the water development trust fund.	*HB 1126 (1997)
<a href="#">NDCC</a> <a href="#">57-36-06</a>	Cigarettes - Amount of excise tax	The following excise taxes apply to all cigarettes sold in this state:  *Five mills [0.5 cents] on each cigarette weighing no more than three pounds per one thousand units. *Five and one-half mills [0.505 cents] on each cigarette weighing over three pounds per one thousand units.	*Unknown
<a href="#">NDCC</a> <a href="#">57-36-25</a>	Cigars and pipe tobacco - Excise tax on wholesale purchase price.  Other tobacco products - Excise tax on weight	For all cigars and pipe tobacco sold in this state, an excise tax equal to 28 percent of the distributor's wholesale purchase price applies. For each package of snuff, an excise tax of 60 cents per ounce applies. For chewing tobacco, an excise tax of 16 cents per ounce applies.  Moneys received from these taxes is deposited in the state treasury general fund. Failure to file tax is punishable by a fine equal to five percent of the amount tax due or \$5, whichever is greater.	*SB 2209 (1985)
<a href="#">NDCC</a> <a href="#">57-36-26</a>	Cigars, pipe tobacco, and other tobacco products - Excise tax payable by dealers	For all cigars and pipe tobacco purchased in another state to be sold in North Dakota by a dealer, an excise tax equal to 28 percent of the wholesale price applies. Tobacco products already subjected to a tax by another state amounting to less than the tax imposed by this section then the difference between the rate in this section and the previously applied tax rate shall be paid. Moneys received under this section will be deposited into the state treasury general fund.	*SB 2103 (1987)
<a href="#">NDCC</a> <a href="#">57-36-27</a>	Consumer's use tax - Cigarettes	Consumers shall pay the following tax for the use or storage of cigarettes in this state, unless excise taxes imposed by section 57-36-06 have been paid:  *Five mills [0.5 cents] on each cigarette weighing no more than three pounds per one thousand units. *Five and one-half mills [0.505 cents] on each cigarette weighing over three pounds per one thousand units.	*HB 1522 (2005)

\*Earliest known amending bill; Enacting bill is unknown

**Table 4: Selected North Dakota Policies (cont.)**

Policy No.	Summary Title	Description	Introduced
<a href="#">NDCC 57-36-32</a>	Separate and additional tax on the sale of cigarettes	For all cigarettes sold in this state, a separate and additional tax of 17 mills [1.7 cents] on each cigarette applies. Proceeds will be deposited into the state general fund.	*SB 2216 (1987)
<a href="#">NDCC 57-39.2-03.9</a>	Sales tax on tobacco products	Enforces sales tax imposed by Chapter 57-39.2 on all retail sales of cigarettes, cigars, and other tobacco products.	HB 1043 (2005)
<a href="#">NDCC 61-02.1-05</a>	Water development trust fund	Moneys received from the tobacco settlement agreement of 1998 will be deposited into the water development trust fund of the state treasury.	SB 2188 (1999)
<b>Radon</b>			
<a href="#">NDAC 33-10-23-05</a>	Standards for radiation protection for members of the public for TENORM licensees	Parties licensed to conduct operations with TENORM must conduct activities such that individual members of the public are not exposed to more than one millisievert total effective dose equivalent (TEDE) in a year. Dosage is calculated based on the dose contributions from all licensed sources of radiation and doses released from licensed operations involving handling and processing of TENORM. Dose contributions from background radiation and inhalation of indoor radon are excluded from this calculation.  <i>TENORM (Technologically Enhanced Naturally Occurring Radioactive Materials) are naturally occurring radioactive materials that have been concentrated or exposed to the accessible environment as a result of human activities such as manufacturing, mineral extraction, or water processing<sup>1</sup>.</i>	January 1, 2016

For a complete list of all policies identified in the scan, please visit [www.ndhealth.gov/cancer/PolicySearch/](http://www.ndhealth.gov/cancer/PolicySearch/)

<sup>1</sup> US Environmental Protection Agency (2015). Technologically Enhanced Naturally Occurring Radioactive Materials. Retrieved from <https://www.epa.gov/radiation/technologically-enhanced-naturally-occurring-radioactive-materials-tenorm>

\*Earliest known amending bill; Enacting bill is unknown