

1 HOUSE BILL 384

2 **53RD LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2017**

3 INTRODUCED BY

4 James G. Townsend

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10 AN ACT

11 RELATING TO HEALTH COVERAGE; AMENDING A SECTION OF THE NEW  
12 MEXICO HEALTH INSURANCE EXCHANGE ACT TO PROVIDE A MEDICAID  
13 MANAGED-CARE PAYMENT EXEMPTION FROM CARRIER ASSESSMENTS.

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15 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

16 SECTION 1. Section 59A-23F-4 NMSA 1978 (being Laws 2013,  
17 Chapter 54, Section 4) is amended to read:

18 "59A-23F-4. BOARD OF DIRECTORS--POWERS.--

19 A. The board may:

20 [~~A.~~] (1) seek and receive grant funding from  
21 federal, state or local governments or private philanthropic  
22 organizations to defray the costs of operating the exchange;

23 [~~B.~~] (2) generate funding, including charging  
24 assessments or fees, to support its operations in accordance  
25 with provisions of the New Mexico Health Insurance Exchange Act

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1 solely for the reasonable administrative costs of the exchange;  
2 provided that no assessment or user fee shall be imposed upon a  
3 carrier that exclusively offers policies, plans or contracts  
4 outside the exchange intended to supplement major medical  
5 coverage, including medicare supplement, long-term care,  
6 disability income, specified disease, accident-only, hospital  
7 indemnity or other limited-benefit health insurance policy;  
8 provided that revenue from medicaid managed-care payments shall  
9 not be used as a basis for calculating a carrier's assessment;

10 [~~G-~~] (3) establish a Native American service  
11 center to ensure that the exchange:

12 [~~(1)~~] (a) is accessible to Native  
13 Americans;

14 [~~(2)~~] (b) complies with the provisions  
15 of the federal Indian Health Care Improvement Act and  
16 Indian-specific provisions of the federal Patient Protection  
17 and Affordable Care Act; and

18 [~~(3)~~] (c) facilitates meaningful,  
19 ongoing consultation with Native Americans;

20 [~~D-~~] (4) create ad hoc advisory councils;

21 [~~E-~~] (5) request assistance from other boards,  
22 commissions, departments, agencies and organizations as  
23 necessary to provide appropriate expertise to accomplish the  
24 exchange's duties;

25 [~~F-~~] (6) enter into contracts with persons or

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1 other organizations as necessary or proper to carry out the  
2 provisions and purposes of the New Mexico Health Insurance  
3 Exchange Act, including the authority to contract or employ  
4 staff for the performance of administrative, legal, actuarial,  
5 accounting and other functions; provided that no contractor  
6 shall be a health insurance issuer or a producer;

7 ~~[G.]~~ (7) enter into contracts with similar  
8 exchanges of other states for the joint performance of common  
9 administrative functions;

10 ~~[H.]~~ (8) enter into information-sharing  
11 agreements with federal and state agencies and other state  
12 exchanges to carry out its responsibilities; provided that  
13 these agreements include adequate protections of the  
14 confidentiality of the information to be shared and comply with  
15 all state and federal laws and regulations;

16 ~~[I.]~~ (9) sue or be sued or otherwise take any  
17 necessary or proper legal action in the execution of its duties  
18 and powers;

19 ~~[J.]~~ (10) appoint board committees, which may  
20 include non-board members, to provide technical assistance in  
21 the operation of the exchange and any other function within the  
22 authority of the exchange; and

23 ~~[K.]~~ (11) conduct periodic audits to assure  
24 the general accuracy of the financial data submitted to the  
25 exchange.

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B. As used in this section:

(1) "medicaid" means the federal-state program administered by the human services department pursuant to Title 19 or Title 21 of the federal Social Security Act; and

(2) "medicaid managed-care payment" means a per capita payment that the human services department makes to a carrier to provide health care benefits and services through a statewide, managed care system to provide cost-efficient, preventive, primary and acute care to medicaid recipients pursuant to Section 27-2-12.6 NMSA 1978."