## FIFTY-SIXTH LEGISLATURE SECOND SESSION

February 10, 2024

SENATE	FLOOR	AMENDMENT	number		SENATE TA				
					TRANSPORT				
					SUBSTITUT	CE E	OR	SENATE	BILL
					146				

Amendment sponsored by Senator Jeff Steinborn

- 1. On page 1, line 24, before "county", strike "A" and insert in lieu thereof "For purposes of billing patients enrolled in qualified health plans, a".
- 2. On page 2, strike lines 2 through 16 in their entirety and insert in lieu thereof:
- "(1) contract with health insurance carriers contracting with the health care authority department as managed care organizations and offering qualified health plans that are offered on the New Mexico health insurance exchange; or
- (2) accept patients enrolled in non-contracted qualified health plans at the medicaid fee-for-service reimbursement rate subject to the following requirements:
- (a) the patient shall be informed prior to receiving non-emergency services that the county hospital or contracting hospital is not contracted with the patient's qualified health plan;
- (b) the patient shall not be subject to balance
- (c) when receiving out-of-network services pursuant to this section, the patient shall be responsible for the same cost-sharing terms as the in-network cost-sharing terms under the patient's qualified health plan; and

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- (d) all other terms and conditions of the patient's qualified health plan shall continue to apply.".
- 3. On page 2, line 18, after "plan", strike the remainder of the line, strike line 19 and on line 20, strike "(1)" and insert in lieu thereof "if".
  - 4. On page 2, line 22, after "a", insert "life-threatening".
- 5. On page 2, line 25, strike the semicolon and insert in lieu thereof "under the following circumstances:".
  - 6. Renumber the succeeding paragraphs accordingly.
- 7. On page 3, strike lines 4 through 6 and insert in lieu thereof:
- "C. The total payment owed by an uninsured patient shall be calculated by applying the medicaid or medicare fee schedule in effect for the service provided, whichever is greater. A monthly payment pursuant to an affordable payment plan shall not exceed five percent of a patient's monthly household adjusted gross income.".
- 8. On page 3, line 7, strike the comma and insert in lieu thereof a colon and:
- "(1) "balance billing" means a nonparticipating provider's practice of issuing a bill to a covered person for the difference between the nonparticipating provider's billed charges on a claim and any amount paid by the health insurance carrier;
- (2) "emergency services" means a health care procedure, treatment or service, excluding ambulance transportation service, which procedure, treatment or service is delivered to a person after the sudden onset of what reasonably appears to be a medical or behavioral health condition that manifests itself by

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symptoms of sufficient severity, including severe pain, that the absence of immediate medical attention, regardless of eventual diagnosis, could be expected by a reasonable layperson to result in jeopardy to a person's physical or mental health or to the health or safety of a fetus or pregnant person, serious impairment of bodily function, serious dysfunction of a bodily organ or part or disfigurement to a person; and".

9. On page 3, line 7, before ""qualified", insert the paragraph designation "(3)".

		Jeff Steinborn					
Adopted _	(Chief Clerk)	Not Adopted(Chief Clerk)					
	Date						