AN ACT

RELATING TO INSURANCE; PROVIDING COVERAGE FOR PRESCRIPTION CONTRACEPTIVE DRUGS OR DEVICES APPROVED BY THE FOOD AND DRUG ADMINISTRATION.

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

Section 1. A new section of the New Mexico Insurance Code, Section 59A-22-42 NMSA 1978, is enacted to read:

"59A-22-42. COVERAGE FOR PRESCRIPTION CONTRACEPTIVE DRUGS OR DEVICES.--

A. Each individual and group health insurance policy, health care plan and certificate of health insurance delivered or issued for delivery in this state, and which offers a prescription drug benefit, shall offer coverage for prescription contraceptive drugs or devices approved by the food and drug administration.

B. Coverage for food and drug administration-approved prescription contraceptive drugs or devices may be subject to deductibles and coinsurance consistent with those imposed on other benefits under the same policy, plan or certificate.

C. The provisions of this section shall not apply to short-term travel, accident-only or limited or specified-disease policies.

D. A religious entity purchasing individual or group health insurance under the policies and plans described in this section is not required to cover services or items based on religious belief or moral conviction.
group health insurance coverage may elect to exclude prescription contraceptive drugs or devices from the health coverage purchased.”

Section 2. Section 59A-23-4 NMSA 1978 (being Laws 1984, Chapter 127, Section 463, as amended by Laws 1997, Chapter 7, Section 2 and by Laws 1997, Chapter 249, Section 2 and by Laws 1997, Chapter 250, Section 2 and also by Laws 1997, Chapter 255, Section 2) is amended to read:

"59A-23-4. OTHER PROVISIONS APPLICABLE. --

A. No blanket or group health insurance policy or contract shall contain any provision relative to notice or proof of loss or the time for paying benefits or the time within which suit may be brought upon the policy that in the superintendent's opinion is less favorable to the insured than would be permitted in the required or optional provisions for individual health insurance policies as set forth in Chapter 59A, Article 22 NMSA 1978.

B. The following provisions of Chapter 59A, Article 22 NMSA 1978 shall also apply as to Chapter 59A, Article 23 NMSA 1978 and blanket and group health insurance contracts:

(1) Section 59A-22-1 NMSA 1978, except Subsection C of that section; and

(2) Section 59A-22-32 NMSA 1978.

C. The following provisions of Chapter 59A,
Article 22 NMSA 1978 shall also apply as to group health insurance contracts:

(1) Section 59A-22-33 NMSA 1978;
(2) Section 59A-22-34 NMSA 1978;
(3) Section 59A-22-34.1 NMSA 1978;
(4) Section 59A-22-34.3 NMSA 1978;
(5) Section 59A-22-35 NMSA 1978;
(6) Section 59A-22-36 NMSA 1978;
(7) Section 59A-22-39 NMSA 1978;
(8) Section 59A-22-39.1 NMSA 1978;
(9) Section 59A-22-40 NMSA 1978;
(10) Section 59A-22-41 NMSA 1978; and
(11) Section 59A-22-42 NMSA 1978."

Section 3. A new section of the Health Maintenance Organization Law is enacted to read:

"COVERAGE FOR PRESCRIPTION CONTRACEPTIVE DRUGS OR DEVICES.--

A. Each individual and group health maintenance organization contract delivered or issued for delivery in this state, and which offers a prescription drug benefit, shall offer coverage for prescription contraceptive drugs or devices approved by the food and drug administration.

B. Coverage for food and drug administration-approved prescription contraceptive drugs or devices may be subject to deductibles and coinsurance consistent with those..."
imposed on other benefits under the same contract.

C. A religious entity purchasing individual or group health maintenance organization coverage may elect to exclude prescription contraceptive drugs or devices from the health coverage purchased.”

Section 4. Section 59A-47-33 NMSA 1978 (being Laws 1984, Chapter 127, Section 879.32, as amended) is amended to read:

"59A-47-33. OTHER PROVISIONS APPLICABLE.---The provisions of the Insurance Code other than Chapter 59A, Article 47 NMSA 1978 shall not apply to health care plans except as expressly provided in the Insurance Code and that article. To the extent reasonable and not inconsistent with the provisions of that article, the following articles and provisions of the Insurance Code shall also apply to health care plans, their promoters, sponsors, directors, officers, employees, agents, solicitors and other representatives; and, for the purposes of such applicability, a health care plan may therein be referred to as an "insurer":

A. Chapter 59A, Article 1 NMSA 1978;
B. Chapter 59A, Article 2 NMSA 1978;
C. Chapter 59A, Article 4 NMSA 1978;
D. Subsection C of Section 59A-5-22 NMSA 1978;
E. Sections 59A-6-2 through 59A-6-4 and 59A-6-6 NMSA 1978;
F. Section 59A-7-11 NMSA 1978;
G. Chapter 59A, Article 8 NMSA 1978;
H. Chapter 59A, Article 10 NMSA 1978;
I. Section 59A-12-22 NMSA 1978;
J. Chapter 59A, Article 16 NMSA 1978;
K. Chapter 59A, Article 18 NMSA 1978;
L. the Policy Language Simplification Law,
M Subsections B through E of Section 59A-22-5
NMSA 1978;
N. Section 59A-22-14 NMSA 1978;
O. Section 59A-22-34.1 NMSA 1978;
P. Section 59A-22-39 NMSA 1978;
Q. Section 59A-22-40 NMSA 1978;
R. Section 59A-22-41 NMSA 1978;
S. Section 59A-22-42 NMSA 1978;
T. Sections 59A-34-7 through 59A-34-13, 59A-34-
17, 59A-34-23, 59A-34-33, 59A-34-40 through 59A-34-42 and
59A-34-44 through 59A-34-46 NMSA 1978;
U. The Insurance Holding Company Law, except
Section 59A-37-7 NMSA 1978;
V. Section 59A-46-15 NMSA 1978; and
W. the Patient Protection Act."

Section 5. APPLICABILITY.--The provisions of this act
apply to policies, plans, contracts and certificates
delivered or issued for delivery or renewed, extended or
amended in this state on or after July 1, 2001.