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HOUSE BILL 865

45TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2001

INTRODUCED BY

James Roger Madalena

AN ACT

RELATING TO PUBLIC ASSISTANCE; ALLOWING NATIVE AMERICANS TO ELECT ENROLLMENT IN MEDICAID MANAGED CARE COVERAGE.

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

Section 1. Section 27-2-12.6 NMSA 1978 (being Laws 1994, Chapter 62, Section 22) is amended to read:

"27-2-12.6. MEDICAID PAYMENTS--MANAGED CARE.--

- A. The department shall provide for a statewide, managed care system to provide cost-efficient, preventive, primary and acute care for medicaid recipients by July 1, 1995.
 - B. The managed care system shall ensure:
- (1) access to medically necessary services, particularly for medicaid recipients with chronic health problems;

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	(2) to t	he extent	practi cabl e,	mai ntenance	of
the rura	l primarv	care de	livery in	frastructure;		

- (3) that the department's approach is consistent with national and state health care reform principles; and
- (4) to the maximum extent possible, that medical deligible individuals are not identified as such except as necessary for billing purposes.
- C. The department may exclude nursing homes, intermediate care facilities for the mentally retarded, medicaid in-home and community-based waiver services and residential and community-based mental health services for children with serious emotional disorders from the provisions of this section.
- D. Any Native American medicaid-eligible individual residing in New Mexico:
- (1) shall be excluded by the department from automatic enrollment in a managed care organization contracting with the state to provide health care services to medicaid-eligible individuals, unless that individual elects to enroll in a medicaid managed care organization, including a managed care organization created specifically to serve Native Americans; and
- (2) may choose to terminate his enrollment in a managed care organization at any time by notifying his
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managed care organization that he is a Native American and chooses to discontinue his enrollment in that managed care organization. Rules limiting the time period when an enrolled individual can opt out of the managed care organization shall not apply to people who are Native American; or

(3) who chooses to remain with the statewide managed care system shall have a choice among all medicaid managed care organizations and if the person does not select any specific medicaid managed care organization, then the department shall automatically enroll the person in a managed care organization that is controlled by the Navajo Nation or a consortium of tribal governments, as geographically appropriate, if such an organization becomes a managed care provider pursuant to a contract or joint powers agreement signed with the department.

E. The department is authorized to enter into a joint powers agreement pursuant to the Joint Powers Agreements

Act with a managed care organization that is developed and controlled by either the Navajo Nation or a consortium of tribal governments."

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