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RELATING TO HEALTH; CREATING A HEALTH CARE PROVIDER LICENSING AND
CREDENTIALING TASK FORCE UNDER THE NEW MEXICO HEALTH POLICY
COMMISSION; PROVIDING FOR DUTIES AND MEMBERSHIP; PROVIDING FOR AN
INFORMATION TECHNOLOGY PROJECT MANAGER; AUTHORIZING THE USE OF
CERTAIN FUNDS.

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

Section 1. TEMPORARY PROVISION--FINDINGS.--The legislature finds that licensed professionals in New Mexico, particularly those in the health care field, are severely burdened by multiple layers of mandatory credentialing obligations, costing them, their patients and third-party payers needless expense and wasted time. Further, the legislature notes that New Mexico's health care licensure provisions may be contributing to harmful delays in access to health care throughout the state, particularly in areas with acute professional shortages. The legislature believes that efforts begun pursuant to House Joint Memorial 61 of the second session of the forty-fifth legislature and the continued cooperation among respective licensing boards, the regulation and licensing department, various statewide professional associations and societies, insurers and national accrediting and standard setting organizations will produce a system satisfactory to all concerned while maintaining the primary goal of ensuring the health and safety of New Mexico residents.

Section 2. TASK FORCE CREATED--RESPONSIBILITIES--PARTICIPANTS--
FUNDING.--

A. The "health care providers licensing and credentialing task force" is

created under the direction of the New Mexico health policy commission to study and make recommendations for the consolidation and simplification of the health care licensure processes. The task force shall make recommendations for the establishment of a web site portal for licensure to facilitate and complement or replace the present system conducted by individual health care provider boards and for a central database for credentialing information to simplify and eliminate duplication of effort.

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B. The task force shall study and make recommendations to the superintendent of insurance on health care provider credentialing issues and obstacles to one-time efforts by providers to meet all necessary requirements to practice independently or as a provider for any appropriately licensed health care organization or facility. The task force shall study and recommend, if practicable, use of credentialing expertise developed by a statewide association of hospitals.

C. The task force shall include participation by the New Mexico health policy commission; the department of health; the New Mexico board of medical examiners; the board of nursing; other health care provider boards; the regulation and licensing department; the insurance division of the public regulation commission; the human services department; the office of the attorney general; other affected state agencies; members of the health care industry, including statewide associations and societies representing providers, hospitals and other affected facilities; insurers; and other third-party payers as well as health care advocates and members of the public.

D. The New Mexico health policy commission, together with the New Mexico board of medical examiners and the board of nursing, shall hire an information technology project manager to work under the commission to design, implement and

maintain a web site portal for licensure and a central database for credentialing of health care providers.

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Section 3. SUPERINTENDENT OF INSURANCE--DUTIES.--The superintendent of insurance shall adopt rules pursuant to the health care providers licensing and credentialing task force recommendations to ensure that third-party payer credentialing requirements facilitate New Mexico providers' ability to satisfy all credentialing requirements, including those by a national committee on quality assurance, as efficiently as possible. Rules adopted shall require primary credential verification no more frequently than every three years and shall be scheduled to coincide with national accrediting organizations and hospital and managed care organizations' credentialing requirements.

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Section 4. HUMAN SERVICES DEPARTMENT --MANAGED CARE CONTRACT CREDENTIALING PROVISIONS.--The human services department shall negotiate with medicaid contractors to ensure that the contractors' credentialing requirements are coordinated with other credentialing processes required of individual providers.

Section 5. A new Section 61-3-27.1 NMSA 1978 is enacted to read:

"61-3-27.1. BOARD OF NURSING FUND--AUTHORIZED USE.--Pursuant to Subsection D of Section 61-3-27 NMSA 1978, the board shall authorize expenditures from unexpended and unencumbered cash balances in the board of nursing fund to support an information technology project manager to develop, implement and maintain a web site portal for licensure and a central database for credentialing of health care providers."

Section 6. A new Section 61-6-31.1 NMSA 1978 is enacted to read:

"61-6-31.1. BOARD OF MEDICAL EXAMINERS FUND--AUTHORIZED USE.--

Pursuant to Subsection D of Section 61-6-31 NMSA 1978, the board shall authorize expenditures from unexpended and unencumbered cash balances in the board of medical examiners fund to support an information technology project manager to develop, implement and maintain a web site portal for licensure and a central database for credentialing of health care providers."