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SENATE BILL 570

46TH LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION, 2004

INTRODUCED BY

Ramsay L. Gorham

AN ACT

RELATING TO MEDICAID; REQUIRING THE HUMAN SERVICES DEPARTMENT TO CONDUCT A FEASIBILITY STUDY AND COST-BENEFIT ANALYSIS THAT WOULD TRANSFER CERTAIN POPULATION GROUPS TO THE MEDICARE PROGRAM.

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

Section 1. A new section of the Public Assistance Act is enacted to read:

"[NEW MATERIAL] MEDICAID POPULATION GROUPS TRANSFERRED TO MEDICARE.--The department shall conduct a study and cost-benefit analysis, in collaboration with the federal centers for medicare and medicaid services, to determine the feasibility and cost-benefit analysis of a process that would transfer certain population groups from the New Mexico medicaid program to the federal medicare program. The department's study and

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1 analysis shall include:

2 A. an evaluation of Title 18, Title 19 and Title 21
3 of the federal Social Security Act to determine what medicaid-
4 eligible individuals are eligible for but not enrolled in the
5 medicare program;

6 B. an analysis of the direct and indirect costs
7 that would be incurred by the state and the federal government,
8 respectively, if medicaid were to assume responsibility for the
9 health care of children from birth to age eighteen and who are
10 in households with incomes up to two hundred thirty-five
11 percent of the federal poverty level and if medicare were to
12 assume responsibility for the health care of adults nineteen
13 years to sixty-four years of age who are in households with
14 incomes up to two hundred percent of the poverty level;

15 C. an analysis of the types of service currently
16 provided by medicaid and medicare and what services would be
17 gained or lost if an individual transferred from one program to
18 another;

19 D. ongoing dialogue with the New Mexico
20 congressional delegation to determine what resources and
21 support would be needed for such a study and analysis;

22 E. an analysis of the economic impact of providing
23 compensated health care to all New Mexicans; and

24 F. a report with findings and recommendations to
25 the legislative health and human services committee and the

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legislative finance committee by November 1, 2004."