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SENATE BILL 179

47TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2005

INTRODUCED BY

John Arthur Smith

AN ACT

RELATING TO TAXATION; PROVIDING FOR AND PHASING IN A GROSS RECEIPTS TAX DEDUCTION FOR RECEIPTS FROM FEE-FOR-SERVICE PAYMENTS BY HEALTH CARE INSURERS.

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

Section 1. Section 7-9-93 NMSA 1978 (being Laws 2004, Chapter 116, Section 6) is amended to read:

"7-9-93. [DEDUCTIONS -- GROSS RECEIPTS -- [CERTAIN] RECEIPTS FOR SERVICES PROVIDED BY HEALTH CARE PRACTITIONER. --

A. Receipts from payments by a managed health care provider or health care insurer for commercial contract services or medicare part C services provided by a health care practitioner that are not otherwise deductible pursuant to another provision of the Gross Receipts and Compensating Tax

. 152498. 1

2	services are within the scope of practice of the person
3	providing the service. [Receipts from fee-for-service payments
4	by a health care insurer may not be deducted from gross
5	receipts. The deduction provided by this section shall be
6	separately stated by the taxpayer.]
7	B. Receipts from fee-for-service payments by a
8	health care insurer may not be deducted from gross receipts
9	before January 1, 2006. On or after January 1, 2006, the
10	following fraction of receipts from fee-for-service payments by
11	a health care insurer may be deducted pursuant to this
12	subsection:
13	(1) for calendar year 2006, one-fourth of the
14	<u>receipts;</u>
15	(2) for calendar year 2007, one-half of the
16	<u>receipts;</u>
17	(3) for calendar year 2008, three-fourths of
18	the receipts; and
19	(4) on and after January 1, 2009, all of the
20	receipts may be deducted.
21	C. A deduction provided by this section shall be
22	separately stated by the taxpayer.
23	[B.] D. For the purposes of this section:
24	(1) "commercial contract services" means
25	health care services performed by a health care practitioner
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Act may be deducted from gross receipts, provided that the

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pursuant to a contract with a managed health care provider or health care insurer other than those health care services provided for medicare patients pursuant to Title 18 of the federal Social Security Act or for medicaid patients pursuant to Title 19 or Title 21 of the federal Social Security Act;

- (2) "health care insurer" means a person that:
- (a) has a valid certificate of authority in good standing pursuant to the New Mexico Insurance Code to act as an insurer, health maintenance organization or nonprofit health care plan or prepaid dental plan; and
- (b) contracts to reimburse licensed health care practitioners for providing basic health services to enrollees at negotiated fee rates;
 - (3) "health care practitioner" means:
- (a) a chiropractic physician licensed pursuant to the provisions of the Chiropractic Physician Practice Act;
- (b) a dentist or dental hygienist licensed pursuant to the Dental Health Care Act;
- (c) a doctor of oriental medicine licensed pursuant to the provisions of the Acupuncture and Oriental Medicine Practice Act;
- (d) an optometrist licensed pursuant to the provisions of the Optometry Act;
 - (e) an osteopathic physician licensed

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1	pursuant to the provisions of Chapter 61, Article 10 NMSA 1978					
2	or an osteopathic physician's assistant licensed pursuant to					
3	the provisions of the Osteopathic Physicians' Assistants Act;					
4	(f) a physical therapist licensed					
5	pursuant to the provisions of the Physical Therapy Act;					
6	(g) a physician or physician assistant					
7	licensed pursuant to the provisions of Chapter 61, Article 6					
8	NMSA 1978;					
9	(h) a podiatrist licensed pursuant to					
10	the provisions of the Podiatry Act;					
11	(i) a psychologist licensed pursuant to					
12	the provisions of the Professional Psychologist Act;					
13	(j) a registered lay midwife registered					
14	by the department of health;					
15	(k) a registered nurse or licensed					
16	practical nurse licensed pursuant to the provisions of the					
17	Nursing Practice Act;					
18	(l) a registered occupational therapist					
19	licensed pursuant to the provisions of the Occupational Therapy					
20	Act;					
21	(m) a respiratory care practitioner					
22	licensed pursuant to the provisions of the Respiratory Care					
23	Act; and					
24	(n) a speech-language pathologist or					
25	audiologist licensed pursuant to the Speech-Language Pathology,					
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Audiology and Hearing Aid Dispensing Practices Act;

"managed health care provider" means a person that provides for the delivery of comprehensive basic health care services and medically necessary services to individuals enrolled in a plan through its own employed health care providers or by contracting with selected or participating health care providers. "Managed health care provider" includes only those persons that provide comprehensive basic health care services to enrollees on a contract basis, including the following:

- (a) health maintenance organizations;
- (b) preferred provider organizations;
- (c) individual practice associations;
- (d) competitive medical plans;
- exclusive provider organizations; (e)
- (f) integrated delivery systems;
- i ndependent physici an-provi der (g)

organi zati ons;

(h) physician hospital-provider

organizations; and

(i) managed care services organizations;

and

(5) "medicare part C services" means services performed pursuant to a contract with a managed health care provider for medicare patients pursuant to Title 18 of the . 152498. 1

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federal Social Security Act."	federal	Soci al	Securi ty	Act.	"
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Section 2. EFFECTIVE DATE. -- The effective date of the provisions of this act is January 1, 2006.

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