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HOUSE BILL 589

48TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2007

INTRODUCED BY

Rhonda S. King

AN ACT

RELATING TO INSURANCE; AMENDING AND ENACTING SECTIONS OF THE
NEW MEXICO INSURANCE CODE TO PROVIDE FOR APPROVAL BY THE
PUBLIC REGULATION COMMISSION OF APPOINTMENTS BY THE
SUPERINTENDENT OF INSURANCE; PROVIDING FOR APPEALS OF
DECISIONS BY THE SUPERINTENDENT.

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

Section 1. A new section of Chapter 59A, Article 2 NMSA
1978 is enacted to read:

" NEW MATERIAL SUPERINTENDENT-- APPOINTMENTS APPROVED BY
COMMISSION.-- All appointments made by the superintendent of
any person to a board, commission, committee or similar group
pursuant to any statutory or regulatory authority shall be
subject to the approval of the commission. "

Section 2. Section 59A-4-20 NMSA 1978 (being Laws 1984,

underscored material = new
[bracketed material] = delete

1 Chapter 127, Section 67, as amended) is amended to read:

2 "59A-4-20. APPEAL TO COURT. --

3 A. A party may appeal from an order of the
4 superintendent made after an informal hearing or an
5 administrative hearing only by filing a petition with the
6 commission within thirty days after final disposition of the
7 matter by the superintendent. The commission shall either
8 grant or refuse the petition within twenty days after it is
9 filed. If the commission fails to act on the petition within
10 that time period, it shall be deemed a refusal. If the
11 commission grants the petition, it shall render a final order
12 of disposition within sixty days of the granting of the
13 petition. A refusal of the petition or final order of
14 disposition made by the commission pursuant to this section
15 shall constitute the final order of agency action, and the
16 entire matter may be subject to review by appeal to the
17 district court. The appeal shall be taken to the district
18 court pursuant to the provisions of Section 39-3-1.1 NMSA
19 1978.

20 B. This section shall not apply as to matters
21 arising pursuant to Chapter 59A, Article 17 NMSA 1978. "

22 Section 3. Section 59A-57-4.1 NMSA 1978 (being Laws
23 2003, Chapter 327, Section 2) is amended to read:

24 "59A-57-4.1. EXTERNAL GRIEVANCE APPEALS--APPOINTMENT--
25 COMPENSATION. --

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underscored material = new
[bracketed material] = delete

1 A. Subject to the concurrence of the commission,
2 the superintendent [~~may~~] shall appoint one or more qualified
3 individuals to review external grievance appeals.

4 B. The superintendent shall fix the reasonable
5 compensation of each appointee based upon, but not limited to,
6 compensation amounts suggested by national or state legal or
7 medical professional societies, organizations or associations.

8 C. Upon completion of the external grievance
9 appeal review, the superintendent shall prepare a detailed
10 statement of compensation due each appointee and shall present
11 the statement to the enrollee's health insurer.

12 D. The enrollee's health insurer shall pay the
13 compensation directly to each appointee who participated in
14 the external grievance appeal review.

15 E. The superintendent shall promulgate rules to
16 implement this section. "

17 Section 4. Section 59A-57-5 NMSA 1978 (being Laws 1998,
18 Chapter 107, Section 5) is amended to read:

19 "59A-57-5. CONSUMER ASSISTANCE--CONSUMER ADVISORY BOARDS
20 [~~OMBUDSMAN OFFICE~~]- - REPORTS TO CONSUMERS--SUPERINTENDENT' S
21 ORDERS TO PROTECT CONSUMERS. --

22 A. Each managed health care plan shall establish
23 and adequately staff a consumer assistance office. The
24 purpose of the consumer assistance office is to respond to
25 consumer questions and concerns and assist patients in

underscored material = new
[bracketed material] = delete

1 exercising their rights and protecting their interests as
2 consumers of health care.

3 B. Each managed health care plan shall establish a
4 consumer advisory board. The board shall meet at least
5 quarterly and shall advise the plan about the plan's general
6 operations from the perspective of the enrollee as a consumer
7 of health care. The board shall also review the operations of
8 and be advisory to the plan's consumer assistance office.

9 ~~[D-]~~ C. The department shall prepare an annual
10 report assessing the operations of managed health care plans
11 subject to the department's oversight, including information
12 about consumer complaints.

13 ~~[E-]~~ D. A person adversely affected may file a
14 complaint with the superintendent regarding a violation of the
15 Patient Protection Act. Prior to issuing any remedial order
16 regarding violations of the Patient Protection Act or its
17 regulations, the superintendent shall hold a hearing in
18 accordance with the provisions of Chapter 59A, Article 4 NMSA
19 1978. The superintendent may issue any order ~~[he]~~ the
20 superintendent deems necessary or appropriate, including
21 ordering the delivery of appropriate care, to protect
22 consumers and enforce the provisions of the Patient Protection
23 Act. The superintendent shall adopt special procedures to
24 govern the submission of emergency appeals to ~~[him]~~ the
25 superintendent in health emergencies.

