# SENATE BILL 248

# 48th legislature - STATE OF NEW MEXICO - second session, 2008

## INTRODUCED BY

### Leonard Lee Rawson

## AN ACT

RELATING TO TAXATION; EXPANDING THE DEFINITION OF "PHYSICIAN"
IN CERTAIN PROVISIONS OF THE INCOME TAX ACT TO INCLUDE
PHYSICIANS LICENSED IN ANOTHER STATE.

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

Section 1. Section 7-2-5.9 NMSA 1978 (being Laws 2005, Chapter 104, Section 6) is amended to read:

"7-2-5.9. EXEMPTION--UNREIMBURSED OR UNCOMPENSATED

MEDICAL CARE EXPENSES OF INDIVIDUALS SIXTY-FIVE YEARS OF AGE OR

OLDER.--

A. Any individual sixty-five years of age or older may claim an additional exemption from income includable, except for this exemption, in net income in an amount equal to three thousand dollars (\$3,000) for medical care expenses paid by the individual for that individual or for the individual's .171589.1

spouse or dependent during the taxable year if those medical care expenses exceed twenty-eight thousand dollars (\$28,000) and if the medical care expenses are not reimbursed or compensated for by insurance or otherwise.

#### B. As used in this section:

- (1) "dependent" means "dependent" as defined in Section 152 of the Internal Revenue Code;
- (2) "health care facility" means a hospital, outpatient facility, diagnostic and treatment center, rehabilitation center, freestanding hospice or other similar facility at which medical care is provided;
- (3) "medical care" means the diagnosis, cure, mitigation, treatment or prevention of disease or for the purpose of affecting any structure or function of the body;
- (4) "medical care expenses" means amounts paid
  for:
- (a) the diagnosis, cure, mitigation, treatment or prevention of disease or for the purpose of affecting any structure or function of the body if provided by a physician or in a health care facility;
  - (b) prescribed drugs or insulin;
- (c) qualified long-term care services as defined in Section 7702B(c) of the Internal Revenue Code;
- (d) insurance covering medical care, including amounts paid as premiums under Part B of Title 18 of .171589.1

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the federal Social Security Act or for a qualified long-term care insurance contract defined in Section 7702B(b) of the Internal Revenue Code, if the insurance or other amount is paid from income included in the taxpayer's adjusted gross income for the taxable year;

(e) specialized treatment or the use of special therapeutic devices if the treatment or device is prescribed by a physician and the patient can show that the expense was incurred primarily for the prevention or alleviation of a physical or mental defect or illness; and

(f) care in an institution other than a hospital, such as a sanitarium or rest home, if the principal reason for the presence of the person in the institution is to receive the medical care available; provided that if the meals and lodging are furnished as a necessary part of such care, the cost of the meals and lodging are "medical care expenses";

- "physician" means a medical doctor, (5) osteopathic physician, dentist, podiatrist, chiropractic physician or psychologist licensed or certified to practice in New Mexico or another state; and
- "prescribed drug" means a drug or (6) biological that requires a prescription of a physician for its use by an individual."

Section 2. Section 7-2-18.13 NMSA 1978 (being Laws 2005, Chapter 267, Section 1) is amended to read:

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"7-2-18.13. CREDIT--UNREIMBURSED OR UNCOMPENSATED

MEDICAL CARE EXPENSES OF INDIVIDUALS SIXTY-FIVE YEARS OF AGE

OR OLDER.--

A. A taxpayer who files an individual New Mexico income tax return, who is sixty-five years of age or older and who is not a dependent of another taxpayer may claim a credit in an amount equal to two thousand eight hundred dollars (\$2,800) for medical care expenses paid by the taxpayer for that taxpayer or for the taxpayer's spouse or dependent if those expenses equal twenty-eight thousand dollars (\$28,000) or more within a taxable year and if those expenses are not reimbursed or compensated for by insurance or otherwise.

- B. A husband and wife who file separate returns for a taxable year in which they could have filed a joint return may each claim only one-half of the credit that would have been allowed on a joint return.
- C. The credit provided in this section may be deducted from the taxpayer's income tax liability. If the credit exceeds the income tax liability for the taxable year, the excess shall be refunded to the taxpayer.
  - D. As used in this section:
- (1) "dependent" means "dependent" as defined in Section 152 of the Internal Revenue Code;
- (2) "health care facility" means a hospital,
  outpatient facility, diagnostic and treatment center,
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rehabilitation center, freestanding hospice or other similar facility at which medical care is provided;

- (3) "medical care" means the diagnosis, cure, mitigation, treatment or prevention of disease or for the purpose of affecting any structure or function of the body;
- (4) "medical care expenses" means the amounts paid for:
- (a) the diagnosis, cure, mitigation, treatment or prevention of disease or for the purpose of affecting any structure or function of the body, if provided by a physician or in a health care facility;
  - (b) prescribed drugs or insulin;
- (c) qualified long-term care services as defined in Section 7702B(c) of the Internal Revenue Code;
- (d) insurance covering medical care, including amounts paid as premiums under Part B of Title 18 of the <u>federal</u> Social Security Act or for a qualified long-term care insurance contract defined in Section 7702B(b) of the Internal Revenue Code, if the insurance or other amount is paid from income included in the taxpayer's adjusted gross income for the taxable year;
- (e) specialized treatment or the use of special therapeutic devices if the treatment or device is prescribed by a physician and the patient can show that the expense was incurred primarily for the prevention or .171589.1

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alleviation of a physical or mental defect or illness; and
(f) care in an institution other than a
hospital, such as a sanitarium or rest home, if the principal
reason for the presence of the person in the institution is to
receive the medical care available; provided that if the meals
and lodging are furnished as a necessary part of such care,
the cost of meals and lodging are "medical care expenses":

- (5) "physician" means a medical doctor, osteopathic physician, dentist, podiatrist, chiropractic physician or psychologist licensed or certified to practice in New Mexico or another state; and
- (6) "prescribed drug" means a drug or biological that requires a prescription of a physician for its use by an individual."
- Section 3. Section 7-2-35 NMSA 1978 (being Laws 2000 (2nd S.S.), Chapter 7, Section 1) is amended to read:
- "7-2-35. DEDUCTION--UNREIMBURSED OR UNCOMPENSATED MEDICAL CARE EXPENSES.--

A. A taxpayer may claim a deduction from net income in an amount determined pursuant to Subsection B of this section for medical care expenses paid during the taxable year for medical care of the taxpayer, the taxpayer's spouse or a dependent if the expenses are not reimbursed or compensated for by insurance or otherwise and have not been included in the taxpayer's itemized deductions, as defined in .171589.1

1	Section 63 of the Internal Revenue Code, for the taxable year.			
2	B. The deduction provided in Subsection A of this			
3	section may be claimed in an amount equal to the following			
4	percentage of medical care expenses paid during the taxable			
5	year based on the taxpayer's filing status and adjusted gross			
6	income as follows:			
7	(1) for surviving spouses and married			
8	individuals filing joint returns:			
9	If adjusted gross income is: The following percent of			
10	medical care expenses			
11	paid may be deducted:			
12	Not over \$30,000 25 percent			
13	More than \$30,000 but not more than \$70,000 15 percent			
14	Over \$70,000 10 percent;			
15	(2) for single individuals and married			
16	individuals filing separate returns:			
17	If adjusted gross income is: The following percent of			
18	medical care expenses			
19	paid may be deducted:			
20	Not over \$15,000 25 percent			
21	More than \$15,000 but not more than \$35,000 15 percent			
22	Over \$35,000 10 percent;			
23	and			
24	(3) for heads of household:			
25	If adjusted gross income is: The following percent of			
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1	medical care expenses
2	paid may be deducted:
3	Not over \$20,000 25 percent
4	More than \$20,000 but not more than \$50,000 15 percent
5	Over \$50,000 10 percent.
6	C. As used in this section:
7	(1) "dependent" means dependent as defined in
8	Section 152 of the Internal Revenue Code;
9	(2) "health care facility" means a hospital,
10	outpatient facility, diagnostic and treatment center,
11	rehabilitation center, [free-standing] freestanding hospice or
12	other similar facility at which medical care is provided;
13	(3) "medical care" means the diagnosis, cure,
14	mitigation, treatment or prevention of disease or for the
15	purpose of affecting any structure or function of the body;
16	(4) "medical care expenses" means amounts
17	paid for:
18	(a) the diagnosis, cure, mitigation,
19	treatment or prevention of disease or for the purpose of
20	affecting any structure or function of the body, excluding
21	cosmetic surgery, if provided by a physician or in a health
22	care facility;
23	(b) prescribed drugs or insulin;
24	(c) qualified long-term care services
25	as defined in Section 7702B(c) of the Internal Revenue Code;
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(d) insurance covering medical care,
including amounts paid as premiums under Part B of Title
[XVIII] 18 of the <u>federal</u> Social Security Act or for a
qualified long-term care insurance contract defined in Section
7702B(b) of the Internal Revenue Code, if the insurance or
other amount is paid from income included in the taxpayer's
adjusted gross income for the taxable year:

(e) nursing services, regardless of where the services are rendered, if provided by a practical nurse or a professional nurse licensed to practice in the state pursuant to the Nursing Practice Act;

(f) specialized treatment or the use of special therapeutic devices if the treatment or device is prescribed by a physician and the patient can show that the expense was incurred primarily for the prevention or alleviation of a physical or mental defect or illness; and

(g) care in an institution other than a hospital, such as a sanitarium or rest home, if the principal reason for the presence of the person in the institution is to receive the medical care available; provided that if the meals and lodging are furnished as a necessary part of such care, the cost of the meals and lodging are "medical care expenses";

"physician" means a medical doctor, (5) osteopathic physician, dentist, podiatrist, chiropractic physician or psychologist licensed or certified to practice in .171589.1

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(6) "prescribed drug" means a drug or biological that requires a prescription of a physician for its use by an individual."

Section 4. EFFECTIVE DATE.--The effective date of the provisions of this act is July 1, 2008.

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