

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25

HOUSE BILL 34

**50TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2011**

INTRODUCED BY

Danice Picraux and Dede Feldman

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO HEALTH INSURANCE; AMENDING THE PUBLIC ASSISTANCE ACT TO PROVIDE THAT MEDICAID, STATE CHILDREN'S HEALTH INSURANCE PROGRAM AND STATE COVERAGE INITIATIVE PROGRAM CONTRACTS WITH MANAGED-CARE ORGANIZATIONS INCLUDE SPECIFICATIONS FOR FUNDING MEDICAL HOMES.

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

SECTION 1. Section 27-2-12.15 NMSA 1978 (being Laws 2009, Chapter 143, Section 1) is amended to read:

"27-2-12.15. MEDICAID, STATE CHILDREN'S HEALTH INSURANCE PROGRAM AND STATE COVERAGE INITIATIVE PROGRAM MEDICAL HOME WAIVER--RULEMAKING--APPLICATION FOR WAIVER OR STATE PLAN AMENDMENT.--

A. Subject to the availability of state funds and consistent with the federal Social Security Act, the department

.182663.3

underscoring material = new  
~~[bracketed material] = delete~~

underscored material = new  
[bracketed material] = delete

1 shall work with its contractors that administer the state's  
2 approved waiver programs to promote and [~~if practicable~~]  
3 develop a program called the "medical home program". The  
4 "medical home" is an integrated care management model that  
5 emphasizes primary medical care that is continuous,  
6 comprehensive, coordinated, accessible, compassionate and  
7 culturally appropriate. Care within the medical home includes  
8 primary care, preventive care and care management services and  
9 uses quality improvement techniques and information technology  
10 for clinical decision support. Components of the medical home  
11 model may include:

12 (1) assignment of recipients to a primary care  
13 provider, clinic or practice that will serve as a medical home;

14 (2) promotion of the health commons model of  
15 service delivery, whereby the medical home tracks recipients'  
16 primary care, specialty, behavioral health, dental health, home  
17 care and social services needs as much as practicable;

18 (3) health education, health promotion, peer  
19 support and other services that may integrate with health care  
20 services to promote overall health;

21 (4) health risk or functional needs  
22 assessments for recipients;

23 (5) a method for reporting on the  
24 effectiveness of the medical home model and its effect upon  
25 recipients' utilization of health care services and the

.182663.3

underscoring material = new  
~~[bracketed material] = delete~~

1 associated cost of utilization of those services;

2 (6) mechanisms to reduce inappropriate  
3 emergency department utilization by recipients;

4 (7) financial incentives for the provision of  
5 after-hours primary care;

6 (8) mechanisms that ensure a robust system of  
7 care coordination for assessing, planning, coordinating and  
8 monitoring recipients with complex, chronic or high-cost health  
9 care or social support needs, including attendant care and  
10 other services needed to remain in the community;

11 (9) implementation of a comprehensive,  
12 community-based initiative to educate recipients about  
13 effective use of the health care delivery system, including the  
14 use of community health workers or promotoras;

15 (10) strategies to prevent or delay  
16 institutionalization of recipients through the effective  
17 utilization of home- and community-based support services;

18 (11) a primary care provider for each  
19 recipient, who advocates for and provides ongoing support,  
20 oversight and guidance to implement an integrated, coherent,  
21 cross-disciplinary plan for ongoing health care developed in  
22 partnership with the recipient and including all other health  
23 care providers furnishing care to the recipient;

24 (12) implementation of evidence-based medicine  
25 and clinical decision support tools to guide decision-making at

.182663.3

underscored material = new  
[bracketed material] = delete

1 the point-of-care based upon recipient-specific factors;

2 (13) use of comparative effectiveness to make  
3 a cost-benefit analysis of health care practices;

4 (14) use of health information technology,  
5 including remote supervision, recipient monitoring and  
6 recipient registries, to monitor and track the health status of  
7 recipients;

8 (15) development and use of safe and secure  
9 health information technology to promote convenient recipient  
10 access to personal health information, health services and web  
11 sites with tools for patient self-management;

12 (16) implementation of training programs for  
13 personnel involved in the coordination of care for recipients;

14 (17) implementation of equitable financial  
15 incentive and compensation systems for primary care providers  
16 and other staff engaged in care management and the medical home  
17 model; and

18 (18) any other components that the secretary  
19 determines will improve a recipient's health outcome and that  
20 are cost-effective.

21 B. Beginning with fiscal year 2012, the department  
22 shall specify in its contracts with each contractor that the  
23 contractor allocate funds to establish and maintain a medical  
24 home program.

25 [~~B.~~] C. For the purposes of this section:

.182663.3

underscored material = new  
[bracketed material] = delete

1                   (1) "contractor" means a person that contracts  
2 with the department to administer the state's coverage programs  
3 for medicaid, the state children's health insurance program or  
4 the state coverage initiative program; and

5                   (2) "primary care provider" means a medical  
6 doctor or physician assistant licensed under the Medical  
7 Practice Act to practice medicine in New Mexico, an osteopathic  
8 physician licensed pursuant to Chapter 61, Article 10 NMSA  
9 1978, an osteopathic physician's assistant licensed pursuant to  
10 the Osteopathic Physicians' Assistant Act, a pharmacist  
11 clinician licensed or certified to prescribe and administer  
12 drugs that are subject to the New Mexico Drug, Device and  
13 Cosmetic Act or a certified nurse practitioner as defined in  
14 the Nursing Practice Act who provides first contact and  
15 continuous care and who has the staff and resources to manage  
16 the comprehensive and coordinated health care of each  
17 individual under the primary care provider's care."