# SENATE PUBLIC AFFAIRS COMMITTEE SUBSTITUTE FOR SENATE BILLS 268 & 314 AND SENATE FINANCE COMMITTEE SUBSTITUTE FOR SENATE BILL 368

51st legislature - STATE OF NEW MEXICO - second session, 2014

#### AN ACT

RELATING TO THE PUBLIC PEACE, HEALTH, SAFETY AND WELFARE;

AMENDING, REPEALING AND ENACTING SECTIONS OF THE NMSA 1978 TO

COMPLY WITH CHANGES IN FEDERAL REGULATIONS REGARDING THE

REPLACEMENT OF SOLE COMMUNITY PROVIDERS WITH QUALIFYING

HOSPITALS; ALLOWING CERTAIN COUNTIES TO IMPOSE AN ADDITIONAL

INCREMENT OF THE COUNTY GROSS RECEIPTS TAX FOR FIVE YEARS TO

SUPPORT CERTAIN HOSPITALS THAT PROVIDE INDIGENT CARE; REQUIRING

CERTAIN COUNTIES TO DEDICATE AND TRANSFER CERTAIN FUNDS TO THE

SAFETY NET CARE POOL FUND FOR FIVE YEARS; DECLARING AN

EMERGENCY.

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

SECTION 1. Section 7-1-6.13 NMSA 1978 (being Laws 1983, Chapter 211, Section 18, as amended) is amended to read:

"7-1-6.13. TRANSFER--REVENUES FROM COUNTY LOCAL OPTION

#### GROSS RECEIPTS TAXES. --

A. Except as provided in [Subsections] Subsection B [and C] of this section, a transfer pursuant to Section 7-1-6.1 NMSA 1978 shall be made to each county for which the department is collecting a local option gross receipts tax imposed by that county in an amount, subject to any increase or decrease made pursuant to Section 7-1-6.15 NMSA 1978, equal to the net receipts attributable to the local option gross receipts tax imposed by that county, less any deduction for administrative cost determined and made by the department pursuant to the provisions of the act authorizing imposition by that county of the local option gross receipts tax and any additional administrative fee withheld pursuant to Subsection C of Section 7-1-6.41 NMSA 1978.

B. A transfer pursuant to this section may be adjusted for a distribution made to a tax increment development district with respect to a portion of a gross receipts tax increment dedicated by a county pursuant to the Tax Increment for Development Act.

[C. Through June 30, 2009, a distribution pursuant to Section 7-1-6.1 NMSA 1978 shall be made to the sole community provider fund from revenue attributable to the county gross receipts tax imposed by a county pursuant to Section 7-20E-9 NMSA 1978, subject to the approval of the board of county commissioners of that county. The distribution shall be

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in an amount equal to one-twelfth of the county's annual
approved contribution for support of sole community provider
payments. Revenue in excess of the amount required for the
contribution shall be transferred to the county pursuant to the
provisions of Subsection A of this section.]"

SECTION 2. Section 7-20E-7 NMSA 1978 (being Laws 1993, Chapter 354, Section 7, as amended) is amended to read:

"7-20E-7. COLLECTION BY DEPARTMENT--TRANSFER OF PROCEEDS -- DEDUCTIONS . --

The department shall collect each tax imposed pursuant to the provisions of the County Local Option Gross Receipts Taxes Act in the same manner and at the same time it collects the state gross receipts tax.

The department shall withhold an administrative fee pursuant to Section 7-1-6.41 NMSA 1978. [Except as provided in Subsection C of this section | The department shall transfer to each county for which it is collecting a tax pursuant to the provisions of the County Local Option Gross Receipts Taxes Act the amount of each tax collected for that county, less the administrative fee withheld and less any disbursements for tax credits, refunds and the payment of interest applicable to the tax. The transfer to the county shall be made within the month following the month in which the tax is collected.

[C. Through June 30, 2009, with respect to revenue

1 attributable to imposition by a county of the county gross 2 receipts tax pursuant to Section 7-20E-9 NMSA 1978, the 3 department shall, subject to the approval of the board of 4 county commissioners of that county, distribute monthly to the 5 sole community provider fund an amount equal to one-twelfth of the county's approved annual contribution for support of sole 6 7 community provider payments. Revenue in excess of the amount 8 required for the contribution shall be transferred to the 9 county pursuant to the provisions of Subsection B of this section.]" 10 11 12

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SECTION 3. Section 7-20E-9 NMSA 1978 (being Laws 1983, Chapter 213, Section 30, as amended) is amended to read:

COUNTY GROSS RECEIPTS TAX--AUTHORITY TO IMPOSE "7-20E-9. RATE--[INDIGENT] COUNTY HEALTH CARE ASSISTANCE FUND REQUIREMENTS -- SAFETY NET CARE POOL FUND. --

Except as provided in Subsection E of this section, a majority of the members of the governing body of a county may enact an ordinance imposing an excise tax not to exceed a rate of seven-sixteenths percent of the gross receipts of any person engaging in business in the county for the privilege of engaging in business in the county. An ordinance imposing an excise tax pursuant to this [section] subsection shall impose the tax in three independent increments of oneeighth percent and one independent increment of one-sixteenth percent, which shall be separately denominated as "the first

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one-eighth increment", "the second one-eighth increment", "the third one-eighth increment" and "the one-sixteenth increment", respectively, not to exceed an aggregate amount of seven-sixteenths percent.

- B. The tax authorized [in Subsection A of] by this section is to be referred to as the "county gross receipts tax".
- A class A county with a county hospital operated and maintained pursuant to a lease or operating agreement with a state educational institution named in Article 12, Section 11 of the constitution of New Mexico enacting the second oneeighth increment of county gross receipts tax shall provide, each year that the tax is in effect, not less than one million dollars (\$1,000,000) in funds, and that amount shall be dedicated to the support of indigent patients who are residents of that county. Funds for indigent care shall be made available each month of each year the tax is in effect in an amount not less than eighty-three thousand three hundred thirty-three dollars thirty-three cents (\$83,333.33). The interest from the investment of county funds for indigent care may be used for other assistance to indigent persons, not to exceed twenty thousand dollars (\$20,000) for all other assistance in any year.
- D. A county, except a class A county with a county hospital operated and maintained pursuant to a lease  $\underline{\text{or}}$

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operating agreement with a state educational institution named in Article 12, Section 11 of the constitution of New Mexico, imposing the second one-eighth increment of county gross receipts tax shall be required to dedicate the entire amount of revenue produced by the imposition of the second one-eighth increment for the support of indigent patients who are residents of that county. The revenue produced by the imposition of the third one-eighth increment and the onesixteenth increment may be used for general purposes. county that has imposed the second one-eighth increment or the third one-eighth increment, or both, on January 1, 1996 for support of indigent patients in the county or, after January 1, 1996, imposes the second one-eighth increment or imposes the third one-eighth increment and dedicates one-half of that increment for county indigent patient purposes shall deposit the revenue dedicated for county indigent purposes that is transferred to the county [after the distribution pursuant to Subsection C of Section 7-1-6.13 and Subsection C of Section 7-20E-7 NMSA 1978] in the county [indigent hospital claims] health care assistance fund, and such revenues shall be expended pursuant to the Indigent Hospital and County Health Care Act.

E. Until June 30, 2019, in addition to the increments authorized pursuant to Subsection A of this section, the majority of the members of the governing body of a county,

except a class A county with a hospital that is operated and maintained pursuant to a lease or operating agreement with a state educational institution named in Article 12, Section 11 of the constitution of New Mexico, may enact an ordinance imposing an excise tax of one-sixteenth percent or one-twelfth percent of the gross receipts of any person engaging in business in the county for the privilege of engaging in business in the county."

SECTION 4. Section 27-5-2 NMSA 1978 (being Laws 1965, Chapter 234, Section 2, as amended) is amended to read:

"27-5-2. PURPOSE OF INDIGENT HOSPITAL AND COUNTY HEALTH
CARE ACT.--The purpose of the Indigent Hospital and County
Health Care Act is:

A. to recognize that [the] each individual county of this state is the responsible agency for ambulance transportation, [or the] hospital care or the provision of health care to indigent patients domiciled in that county [for at least three months or for such period of time, not in excess of three months], as determined by resolution of the board of county commissioners, [and to provide a means whereby each county can discharge this responsibility through a system of payments to ambulance providers, hospitals or health care providers for the care and treatment of, or the provision of health care services to, indigent patients] in addition to providing support for the state's medicaid program;

1	B. to recognize that the counties of the state are
2	[also] responsible for supporting indigent patients by
3	providing local revenues to match federal funds for the state
4	medicaid program [including the provision of matching funds for
5	payments to sole community provider hospitals] pursuant to
6	Section 7-20E-9 NMSA 1978 and the transfer of funds to the
7	county-supported medicaid fund pursuant to the Statewide Health
8	Care Act; and
9	C. to recognize that the counties of the state can
10	improve the provision of health care to indigent patients by

improve the provision of health care to indigent patients by providing local revenues for countywide or multicounty health planning."

SECTION 5. Section 27-5-3 NMSA 1978 (being Laws 1965, Chapter 234, Section 3, as amended) is amended to read:

### "27-5-3. PUBLIC ASSISTANCE PROVISIONS.--

A. A hospital shall not be paid from the fund under the Indigent Hospital and County Health Care Act for costs of an indigent patient for services that have been determined by the department to be eligible for medicaid reimbursement.

[However, nothing in the Indigent Hospital and County Health Care Act shall be construed to prevent the board from transferring money from the fund to the sole community provider fund or the county-supported medicaid fund for support of the state medicaid program.]

B. No action for collection of claims under the .196731.3

Indigent Hospital and County Health Care Act shall be allowed
against an indigent patient who is medicaid eligible for
medicaid covered services, nor shall action be allowed against
the person who is legally responsible for the care of the
indigent patient during the time that person is medicaid
eligible."

SECTION 6. Section 27-5-4 NMSA 1978 (being Laws 1965, Chapter 234, Section 4, as amended) is amended to read:

"27-5-4. DEFINITIONS.--As used in the Indigent Hospital and County Health Care Act:

[A. "alcohol rehabilitation center" means an agency of local government, a state agency, a private nonprofit entity or combination thereof that operates alcohol abuse rehabilitation programs that meet the standards set by the department of health;

means a specialized carrier based within the state authorized under provisions and subject to limitations as provided in individual carrier certificates issued by the public regulation commission to transport persons alive, dead or dying en route by means of ambulance service. The rates and charges established by public regulation commission tariff shall govern as to allowable cost. Also included are air ambulance services approved by the [board] county. The air ambulance service charges shall be filed and approved pursuant to Subsection D of

T	Section 27-5-6 NMSA 1978 and Section 27-5-11 NMSA 1978;
2	[C. "board" means a county indigent hospital and
3	county health care board;
4	D. "commission" means the New Mexico health policy
5	commission or the commission's successor agency;
6	$E_{\bullet}$ ] $B_{\bullet}$ "cost" means all allowable costs of
7	providing health care services, to the extent determined by
8	resolution of a [board] county, for an indigent patient.
9	Allowable costs shall be based on medicaid fee-for-service
10	reimbursement rates for hospitals, licensed medical doctors and
11	osteopathic physicians;
12	$[F_{ullet}]$ C. "county" means a county except a class A
13	county with a county hospital operated and maintained pursuant
14	to a lease or operating agreement with a state educational
15	institution named in Article 12, Section 11 of the constitution
16	of New Mexico;
17	[G.] D. "department" means the human services
18	department;
19	[H. "drug rehabilitation center" means an agency of
20	local government, a state agency, a private nonprofit entity or
21	combination thereof that operates drug abuse rehabilitation
22	programs that meet the standards and requirements set by the
23	department of health;
24	I.] E. "fund" means a county [indigent hospital
25	claims] health care assistance fund;

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2	(1) a nursing home;
3	(2) an in-state home health agency;
4	(3) an in-state licensed hospice;
5	(4) a community-based health program operated
6	by a political subdivision of the state or other nonprofit
7	health organization that provides prenatal care delivered by
8	New Mexico licensed, certified or registered health care
9	<del>practitioners;</del>
10	(5) a community-based health program operated
11	by a political subdivision of the state or other nonprofit
12	health care organization that provides primary care delivered
13	by New Mexico licensed, certified or registered health care
14	<del>practitioners;</del>
15	(6) a drug rehabilitation center;
16	(7) an alcohol rehabilitation center;
17	(8) a mental health center;
18	(9) a licensed medical doctor, osteopathic
19	physician, dentist, optometrist or expanded practice nurse when
20	providing emergency services, as determined by the board, in a
21	hospital to an indigent patient; or
22	(10) a licensed medical doctor or osteopathic
23	physician, dentist, optometrist or expanded practice nurse when
24	providing services in an outpatient setting, as determined by
25	the board, to an indigent patient with a life-threatening
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## illness or disability;

K.] F. "health care services" means treatment and services designed to promote improved health in the county indigent population, including primary care, prenatal care, dental care, behavioral health care, alcohol or drug detoxification and rehabilitation, hospital care, provision of prescription drugs, preventive care or health outreach services, to the extent determined by resolution of the [board] county;

[L. "hospital" means a general or limited hospital licensed by the department of health, whether nonprofit or owned by a political subdivision, and may include by resolution of a board the following health facilities if licensed or, in the case of out-of-state hospitals, approved by the department of health:

- (1) for-profit hospitals;
- (2) state-owned hospitals; or
- (3) licensed out-of-state hospitals where treatment provided is necessary for the proper care of an indigent patient when that care is not available in an in-state hospital;

M.] G. "indigent patient" means a person to whom an ambulance service, a hospital or a health care provider has provided medical care, ambulance transportation or health care services and who can normally support the person's self and the .196731.3

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person's dependents on present income and liquid assets available to the person but, taking into consideration the person's income, assets and requirements for other necessities of life for the person and the person's dependents, is unable to pay the cost of the ambulance transportation or medical care administered or both; provided that if [the] a definition of "indigent patient" is adopted by a [board] county in a resolution, the definition shall not include any person whose annual income together with that person's spouse's annual income totals an amount that is fifty percent greater than the per capita personal income for New Mexico as shown for the most recent year available in the survey of current business published by the United States department of commerce. [Every board that has a balance remaining in the fund at the end of a given fiscal year shall consider and may adopt at the first meeting of the succeeding fiscal year a resolution increasing the standard for indigence] "Indigent patient" includes a minor who has received ambulance transportation or medical care or both and whose parent or the person having custody of that minor would qualify as an indigent patient if transported by ambulance, admitted to a hospital for care or treated by a health care provider;

[N.]  $\underline{\text{H.}}$  "medicaid eligible" means a person who is eligible for medical assistance from the department;

local health planning efforts;

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$\frac{P_{\bullet}}{I_{\bullet}}$ "planning" means the development of a						
countywide or multicounty health plan to improve and fund						
health services in the county based on the county's needs						
assessment and inventory of existing services and resources and						
that demonstrates coordination between the county and state and						

center that provides outpatient mental health services that

meet the standards set by the department of health;

 $[Q_{\bullet}]$  <u>J.</u> "public entity" means a state, local or tribal government or other political subdivision or agency of that government; <u>and</u>

 $[R. \ \ "sole\ community\ provider}]\ \underline{K.}\ \ "qualifying"$  hospital" means

[(1) a hospital that is a sole community
provider hospital under the provisions of the federal medicare
guidelines; or

(2) an acute care general hospital licensed by the department of health that is qualified [pursuant to rules adopted by the state agency primarily responsible for the medicaid program, to receive distributions from the sole community provider fund; and

S. "tribal" means of or pertaining to a federally recognized Indian nation, tribe or pueblo] to receive payments from the safety net care pool pursuant to an agreement with the federal centers for medicare and medicaid services."

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SE	CTION	7.	Sec	tion	1 2	7-5-6	NMSA	19	978	(bei	ng 1	Laws	1965,
Chapter	234,	Sect	ion	6,	as	amend	ed) i	Ĺs	amen	ded	to	read	:

"27-5-6. POWERS AND DUTIES OF [THE BOARD] COUNTIES RELATING TO INDIGENT CARE. -- [The board] A county:

[A. shall administer claims pursuant to the provisions of the Indigent Hospital and County Health Care Act;

B. shall prepare and submit a budget to the board of county commissioners for the amount needed to defray claims made upon the fund and to pay costs of administration of the Indigent Hospital and County Health Care Act and]

A. may budget for expenditure on ambulance services, burial expenses, hospital or medical expenses for indigent residents of that county and for costs of development of a countywide or multi county health plan. The combined costs of administration and planning shall not exceed the following percentages of revenues based on the previous fiscal year revenues for a fund that has existed for at least one fiscal year or based on projected revenues for the year being budgeted for a fund that has existed for less than one fiscal year. The percentage of the revenues in the fund that may be used for such combined administrative and planning costs is equal to the sum of the following:

- ten percent of the amount of the revenues in the fund not over five hundred thousand dollars (\$500,000);
  - eight percent of the amount of the

1	revenues in the fund over five hundred thousand dollars
2	( $\$500,000$ ) but not over one million dollars ( $\$1,000,000$ ); and
3	(3) four and one-half percent of the amount of
4	the revenues in the fund over one million dollars (\$1,000,000);
5	[C. shall make rules necessary to carry out the
6	provisions of the Indigent Hospital and County Health Care Act;
7	provided that the standards for eligibility and allowable costs
8	for county indigent patients shall be no more restrictive than
9	the standards for eligibility and allowable costs prior to
10	December 31, 1992;
11	D. shall set criteria and cost limitations for
12	medical care furnished by licensed out-of-state hospitals,
13	ambulance services or health care providers;
14	E. shall cooperate with appropriate state agencies
15	to use available funds efficiently and to make health care more
16	<del>available;</del>
17	F. shall cooperate with the department in making an
18	investigation to determine the validity of claims made upon the
19	fund for an indigent patient;
20	G.] B. may accept contributions [or other county
21	revenues] of public funds for county health care services,
22	which shall be deposited in the fund;
23	[ $H$ .] $C$ . may hire personnel to carry out the
24	provisions of the Indigent Hospital and County Health Care Act;
25	[ <del>I. shall review all claims presented by a</del>
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hospital, ambulance service or health care provider to

determine compliance with the rules adopted by the board or

with the provisions of the Indigent Hospital and County Health

Care Act; determine whether the patient for whom the claim is

made is an indigent patient; and determine the allowable

medical, ambulance service or health care services costs;

provided that the burden of proof of any claim shall be upon

the hospital, ambulance service or health care provider;

J. shall state in writing the reason for rejecting or disapproving any claim and shall notify the submitting hospital, ambulance service or health care provider of the decision within sixty days after eligibility for claim payment has been determined;

K. shall pay all claims that are not matched with federal funds under the state medicaid program and that have been approved by the board from the fund and shall make payment within thirty days after approval of a claim by the board;

L. shall determine by county ordinance the types of health care providers that will be eligible to submit claims under the Indigent Hospital and County Health Care Act;

M. shall review, verify and approve all medicaid sole community provider hospital payment requests in accordance with rules adopted by the board prior to their submittal by the hospital to the department for payment but no later than January 1 of each year;

Accountability Act of 1996;

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1	N.] D. shall transfer to the state by the last day
2	of March, June, September and December of each year an amount
3	equal to one-fourth of the county's payment [for support of
4	sole community provider payments as calculated by the
5	department for that county for the current fiscal year]
6	pursuant to Section 16 of this 2014 act. This money shall be
7	deposited in the [sole community provider] safety net care pool
8	fund;
9	[0.] E. shall, in carrying out the provisions of
10	the Indigent Hospital and County Health Care Act, comply with
11	the standards of the federal Health Insurance Portability and

 $[P_{ullet}]$   $\underline{F}_{ullet}$  may provide for the transfer of money from the fund to the county-supported medicaid fund to meet the requirements of the Statewide Health Care Act; and

[Q.] G. may contract with ambulance providers, hospitals or health care providers for the provision of [health care] services for indigent patients domiciled within the county."

SECTION 8. Section 27-5-6.1 NMSA 1978 (being Laws 1993, Chapter 321, Section 18, as amended) is amended to read:

"27-5-6.1. [SOLE COMMUNITY PROVIDER] SAFETY NET CARE POOL
FUND CREATED.--

A. The "[sole community provider] safety net care pool fund" is created in the state treasury. The [sole .196731.3

community provider] safety net care pool fund, which shall be administered by the department, shall consist of <u>public</u> funds provided [by counties] through intergovernmental transfers from counties <u>or</u> other public entities [or other public funds or expenditures determined by the department and the federal government as allowable to match federal funds for medicaid sole community provider hospital payments] and transferred from counties pursuant to Section 16 of this 2014 act. Money in the fund shall be invested by the state treasurer as other state funds are invested. Any unexpended or unencumbered balance remaining in the fund at the end of any fiscal year shall not revert.

B. Money in the [sole community provider] safety
net care pool fund is appropriated to the department to make
[sole community provider hospital] payments [pursuant to the
state medicaid program] to qualifying hospitals. No [sole
community provider hospital] safety net care pool fund payments
or money in the [sole community provider] safety net care pool
fund shall be used to supplant any general fund support for the
state medicaid program.

[C. Money in the sole community provider fund shall be remitted back to the individual counties from which it came if federal medicaid matching funds are not received for medicaid sole community provider hospital payments.]"

SECTION 9. Section 27-5-7 NMSA 1978 (being Laws 1965,

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Chapter 234, Section 7, as amended) is amended to read:

"27-5-7. [COUNTY INDIGENT HOSPITAL CLAIMS] HEALTH CARE
ASSISTANCE FUND.--

- A. There is created in the county treasury of each county a "[county indigent hospital claims] health care assistance fund".
- B. Collections under the levy made pursuant to the Indigent Hospital and County Health Care Act and all payments shall be placed into the fund, and the amount placed in the fund shall be budgeted and expended only for the purposes specified in the Indigent Hospital and County Health Care Act, by warrant upon vouchers approved by [a majority of the board and signed by the chairman of the board] the county. Payments for indigent hospitalizations shall not be made from any other county fund.
- C. The fund shall be audited in the manner that other state and county funds are audited, and all records of payments and verified statements of qualification upon which payments were made from the fund shall be open to the public.
- D. Any balance remaining in the fund at the end of the fiscal year shall carry over into the ensuing year, and that balance shall be taken into consideration in the determination of the ensuing year's budget and certification of need for purposes of making a tax levy.
- E. Money may be transferred to the fund from other .196731.3

-	sources, but no transfers may be made from the fund for any
2	purpose other than those specified in the Indigent Hospital and
3	County Health Care Act."
4	SECTION 10. Section 27-5-7.1 NMSA 1978 (being Laws 1993,
5	Chapter 321, Section 16, as amended) is amended to read:
6	"27-5-7.1. COUNTY [INDIGENT HOSPITAL CLAIMS] HEALTH CARE
7	ASSISTANCE FUNDAUTHORIZED USES OF THE FUND
8	A. The fund [shall] may be used
9	[ <del>(1) to meet the county's contribution for</del>
10	support of sole community provider payments as calculated by
11	the department for that county;
12	<del>(2)</del> ] to pay for:
13	(1) expenses of burial or cremation of an
14	indigent person;
15	[ <del>(3) to pay all claims that have been approved</del>
16	by the board that are not matched with federal funds under the
17	state medicaid program]
18	(2) ambulance transportation, hospital care
19	and health care for indigent patients;
20	(3) all or a portion of the monthly premiums
21	of health insurance policies for indigent patients;
22	(4) all or a portion of the out-of-pocket
23	costs, including copayments and deductibles, incurred by
24	indigent patient insureds pursuant to the terms of a health
25	insurance policy; or

L	(5) county administrative expenses associated
2	with fund expenditures authorized in Paragraphs (1) through (4)
3	of this subsection.
4	B. The fund may be used to meet [the] <u>a</u> county's

obligation under Section 27-10-4 NMSA 1978."

SECTION 11. Section 27-5-9 NMSA 1978 (being Laws 1965, Chapter 234, Section 9, as amended) is amended to read:

## "27-5-9. TAX LEVIES AUTHORIZED.--

A. Subject to the provisions of Subsection B of this section, the board of county commissioners, upon the certification of the [board] county as to the amount needed [in the fund] to provide health care to indigent residents of the county or to support the state's medicaid program, shall impose a levy against the net taxable value, as that term is defined in the Property Tax Code, of the property in the county sufficient to raise the amount certified by the [board] county.

- B. The question of imposing an indigent [hospital] and medicaid health care levy for the purpose of the Indigent Hospital and County Health Care Act shall be submitted to the electors and voted upon as a separate question at the next subsequent general election or any special election called prior thereto for such purpose.
- C. Upon finding by the board of county commissioners that an election will be necessary, the board of county commissioners shall meet and order an election to be

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held at a designated time in the county upon the question of imposing an indigent [hospital] and medicaid health care levy for the purpose of the Indigent Hospital and County Health Care Act in the county. If the question is to be voted upon at a special election, the election shall be held not less than thirty nor more than fifty days after the finding, but in no event shall the election be held within five days preceding or succeeding any general election held in the county. The order for the election shall be made a part of the official minutes of the board of county commissioners. A copy of the order shall be published in a newspaper of general circulation in the county at least fifteen days before the date set for the election, and an affidavit of publication shall be obtained. At least five days prior to the date for holding the election, the board of county commissioners shall publish in a newspaper of general circulation in the county and post in five conspicuous places in the county a notice of election, which shall be in substantially the following form:

## "NOTICE OF ELECTION ON SPECIAL INDIGENT [HOSPITAL]

# AND MEDICAID HEALTH CARE LEVY

Notice is given on the	day of
, [ <del>19</del> ] <u>20</u> ,	there will be held in
county	y of New Mexico an election on
the question of imposing an indige	ent [ <del>hospital</del> ] <u>and medicaid</u>
health care levy [for the purpose:	s of the Indigent Hospital and

residents of the county or to support the state's medicaid program, such levy to be made annually against the taxable value of the property in the county and limited to an amount sufficient to provide funds necessary to [pay claims pursuant to such act] support the state's medicaid program or to provide health care to indigent residents of the county who do not qualify for medicaid.

Official Title of the Authority".

The election shall be held on the date specified in the notice and shall be, if a special election, conducted and canvassed in substantially the same manner as general elections are conducted and canvassed in the county; provided that the ballot used in any election shall be a special and separate ballot and shall be in substantially the following form:

## "BALLOT

On the question of imposing an indigent [hospital]

and medicaid health care levy for the purposes of the Indigent

Hospital and County Health Care Act, such levy to be made

annually against the taxable value of the property in

\_\_\_\_\_\_\_ county of New Mexico, and limited to an

amount sufficient to provide funds budgeted and certified as

necessary [to pay claims pursuant to such act] for health care

for indigent residents of the county in addition to those

bracketed material] = delete

services provided by the state or to support the state's
medicaid program:

FOR	THE	LEVY	Ϋ	• • •	• •	• •	• •	• •	 • •	• •	• •	• • •	
AGAT	INST	THE	I.EVY						 				11

- D. If the electors vote in favor of an indigent [hospital] and medicaid health care levy, the levy shall become effective in the same manner prescribed by law for all levies upon property within that county, and a levy for those purposes in such an amount as will provide sufficient money for the fund shall be made for each year thereafter.
- E. Any board of county commissioners that has, prior to the effective date of this section, made a valid imposition of a property tax for the purpose of the Indigent Hospital and County Health Care Act shall not be required to hold an election on the existing tax, and that tax may be imposed and continue to be imposed in accordance with the provisions of law existing at the time of its imposition. However, if any such tax is not imposed in a given property tax year or if the authorization for its imposition terminates or expires, the election requirements of Subsections B and C of this section shall apply to any subsequent proposed imposition of a property tax for [the purpose of the Indigent Hospital and County Health Care Act] indigent health care for county residents or to support the state's medicaid program."

**SECTION 12.** Section 27-5-11 NMSA 1978 (being Laws 1965,

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"27-5-11. [HOSPITALS AND AMBULANCE SERVICESHEALTH	CARE
PROVIDERSREQUIRED TO FILE DATASOLE COMMUNITY PROVIDER]	
OUALIFYING HOSPITAL DUTIES AND REPORTING	

Chapter 234, Section 12, as amended) is amended to read:

[A. An ambulance service, hospital or health care provider in New Mexico or licensed out-of-state hospital, prior to the filing of a claim with the board, shall have placed on file with the board:

(1) current data, statistics, schedules and information deemed necessary by the board to determine the cost for all patients in that hospital or cared for by that health care provider or tariff rates or charges of an ambulance service:

(2) proof that the hospital, ambulance service or health care provider is licensed under the laws of this state or the state in which the hospital operates; and

(3) other information or data deemed necessary by the board.

B.] A. A [sole community provider] qualifying hospital [requesting or receiving medicaid sole community provider hospital payments] shall [(1)] accept every indigent [patients and request reimbursement for those patients through the appropriate county indigent fund. The responsible county shall approve requests meeting its eligibility standards and notify the hospital of such approval;

2	<del>by each county for ind</del>
3	<del>previous fiscal year,</del>
4	<del>(3) r</del>
5	<del>indigent hospital paym</del>
6	<del>year by December 31 of</del>
7	<del>(4) </del>
8	15 of each year the am
9	<del>payments anticipated f</del>
10	<del>agreement has been rea</del>
11	county and such other
12	request] patient who s
13	qualifying hospital.
14	B. Qualify
15	<u>(1) r</u>
16	about their hospital b
17	<u>(2) 1</u>
18	consistent with this s
19	consistently applied;
20	<u>(3)</u> n
21	whether patients are e
22	initiating collections
23	<u>C. No acti</u>
24	allowed against an ind
25	under two hundred perc
	.196731.3

(2) confirm the amount of payment authorized
by each county for indigent patients, to that county for the
previous fiscal year, by September 30 of each calendar year;

- (3) negotiate with each county the amount of indigent hospital payments anticipated for the following fiscal year by December 31 of each year; and
- (4) provide to the department prior to January

  15 of each year the amount of the authorized indigent hospital

  payments anticipated for the following fiscal year after an

  agreement has been reached on the amount with each responsible

  county and such other related information as the department may

  request] patient who seeks health care services from the

  qualifying hospital.

## B. Qualifying hospitals shall:

- (1) provide financial counseling to patients about their hospital bills;
- (2) have written financial assistance policies consistent with this section that are publicized and consistently applied; and
- (3) make reasonable efforts to determine whether patients are eligible for financial assistance before initiating collections actions.
- C. No action for collection of claims shall be allowed against an indigent patient with a household income under two hundred percent of the federal poverty level.

	<u>D.</u>	Wit	hin	thi1	<u>cty</u>	days	of	rece	eiving	a paymei	nt fron	<u>n</u>
the safety	net	car	ер	0001 :	Euno	d, a	qua.	lify	ing hos	pital s	<u>hall</u>	
report the	amoı	ınt_	of	such	pay	yment	to	the	county	within	which	<u>it</u>
is located	<u>•</u>											

- E. In addition to the report required in Subsection

  D of this section, a qualifying hospital shall annually report

  to the county within which it is located the total costs of

  health care services provided in the previous calendar year."
- SECTION 13. Section 27-5-12 NMSA 1978 (being Laws 1965, Chapter 234, Section 13, as amended) is amended to read:

## "27-5-12. PAYMENT OF CLAIMS.--

- A. A hospital, ambulance service or health care provider filing a claim with the [board] county shall:
- (1) file the claim with the [board of the] county in which the indigent patient is domiciled;
- (2) file <u>the</u> claim for each patient separately, with an itemized detail of the total cost; and
- of qualification for ambulance service, indigent hospital care or care from a health care provider signed by the patient or by the parent or person having [his] custody of the patient to the effect that [he] the patient qualifies under the provisions of the Indigent Hospital and County Health Care Act as an indigent patient and is unable to pay the cost for the care administered and listing all assets owned by the patient or any person

legally responsible for [his] the patient's care. The statement shall constitute an oath of the person signing it, and any false statements in the statement made knowingly constitute a felony.

B. A hospital, ambulance service or health care provider that has contracted with a [board] county for provision of health care services shall provide evidence of health care services rendered for payment for services in accordance with the procedures specified in the contract."

SECTION 14. Section 27-5-12.1 NMSA 1978 (being Laws 1979, Chapter 146, Section 3, as amended) is amended to read:

"27-5-12.1. APPEAL.--Any hospital or ambulance service aggrieved by any decision of the [board] county may appeal to the district court pursuant to the provisions of Section 39-3-1.1 NMSA 1978."

SECTION 15. Section 27-5-16 NMSA 1978 (being Laws 1965, Chapter 234, Section 16, as amended) is amended to read:

"27-5-16. DEPARTMENT--PAYMENTS--COOPERATION--REPORTING.--

A. The department shall not decrease the amount of any assistance payments made to the hospitals or health care providers of this state pursuant to law because of any financial reimbursement made to ambulance services, hospitals or health care providers for indigent or medicaid eligible patients as provided in the Indigent Hospital and County Health Care Act.

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- B. The department shall cooperate with each [board] county in furnishing information or assisting in the investigation of any person to determine whether the person meets the qualifications of an indigent patient as defined in the Indigent Hospital and County Health Care Act.
- C. [The department shall ensure that the sole community provider payment and the reimbursement to hospitals made under the state medicaid program do not exceed what would have been paid for under medicare payment principles. In the event the sole community provider payment and medicaid reimbursement to hospitals would exceed medicare payment principles, the department shall reduce the sole community provider payment prior to making any reduction in reimbursement to hospitals made under the state medicaid program; provided, however, that additional payments may be made pursuant to waiver agreement, rule, law or state plan amendment providing for supplemental medicaid payments to hospitals] The department shall provide an annual report to each county and each qualifying hospital on the previous calendar year's payments from the safety net care pool fund for uncompensated care to qualifying hospitals and estimated payments of enhanced medicaid base rates. The annual report for the previous year shall be provided by July 1 of the succeeding year."

SECTION 16. A new section of the Indigent Hospital and .196731.3

County Health Care Act is enacted to read:

"[NEW MATERIAL] TRANSFER TO SAFETY NET CARE POOL FUND.--

A. A county shall, by ordinance to be effective July 1, 2014 through June 30, 2019, dedicate to the safety net care pool fund an amount equal to a gross receipts tax rate of one-twelfth percent applied to the taxable gross receipts reported during the prior fiscal year by persons engaging in business in the county. For purposes of this subsection, a county may use public funds from any existing authorized revenue source of the county.

B. A county enacting an ordinance pursuant to Subsection A of this section shall transfer to the safety net care pool fund by the last day of March, June, September and December of each year an amount equal to one-fourth of the county's payment to the safety net care pool fund."

SECTION 17. Section 27-10-3 NMSA 1978 (being Laws 1991, Chapter 212, Section 3, as amended) is amended to read:

"27-10-3. COUNTY-SUPPORTED MEDICAID FUND CREATED--USE-APPROPRIATION BY THE LEGISLATURE.--

A. There is created in the state treasury the "county-supported medicaid fund". The fund shall be invested by the state treasurer as other state funds are invested. Income earned from investment of the fund shall be credited to the county-supported medicaid fund. The fund shall not revert in any fiscal year.

- B. Money in the county-supported medicaid fund is subject to appropriation by the legislature to support the state medicaid program and to institute or support primary care health care services pursuant to Subsections D and E of Section 24-1A-3.1 NMSA 1978. Of the amount appropriated each year, nine percent shall be appropriated to the department of health to institute or support primary care health care services pursuant to Subsections D and E of Section 24-1A-3.1 NMSA 1978.
- C. Up to three percent of the county-supported medicaid fund each year may be expended for administrative costs related to medicaid or developing new primary care health care centers or facilities.
- D. In the event federal funds for medicaid are not received by New Mexico for any eighteen-month period, the unencumbered balance remaining in the county-supported medicaid fund and the [sole community provider] safety net care pool fund at the end of the fiscal year following the end of any eighteen-month period shall be paid within a reasonable time to each county for deposit in the county [indigent hospital claims] health care assistance fund in proportion to the payments made by each county through tax revenues or transfers in the previous fiscal year as certified by the local government division of the department of finance and administration. The department will provide

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for budgeting and accounting of payments to the fund."

SECTION 18. TEMPORARY PROVISION--TRANSFER OF REFERENCES
OF LAW.--

- A. On and after July 1, 2014, references in law to a sole community provider hospital shall be deemed to be references to a qualifying hospital pursuant to the Indigent Hospital and County Health Care Act.
- B. On or after July 1, 2014, references in law to a county indigent hospital claims fund shall be deemed to be references to a county health care assistance fund.

## SECTION 19. TEMPORARY PROVISION--TRANSFER OF MONEY .--

- A. On the effective date of this act, all money in the sole community provider fund shall be transferred to the safety net care pool fund.
- B. On the effective date of this act, all money in a county's indigent hospital claims fund shall be transferred to the county's health care assistance fund.
- SECTION 20. TEMPORARY PROVISION--TAX LEVIED PURSUANT TO SECTION 27-5-9 NMSA 1978 PRIOR TO EFFECTIVE DATE OF ACT.--A tax levied pursuant to Section 27-5-9 NMSA 1978 prior to January 1, 2014 shall remain in effect until the tax expires or is terminated.
- SECTION 21. REPEAL.--Sections 27-5-5, 27-5-8, 27-5-10, 27-5-12.2, 27-5-13, 27-5-14, 27-5-15 and 27-5-18 NMSA 1978 (being Laws 1965, Chapter 234, Sections 5, 8 and 11, Laws .196731.3

1993, Chapter 321, Section 15,	Laws 1965, Chapter 234,
Sections 14 and 15, Laws 1971,	Chapter 72, Section 2 and Laws
1965, Chapter 234, Section 20,	as amended) are repealed.

SECTION 22. EMERGENCY.--It is necessary for the public peace, health and safety that this act take effect immediately.

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