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SENATE BILL 359

52ND LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2015

INTRODUCED BY

Bill B. O'Neill

AN ACT

RELATING TO HEALTH COVERAGE; ENACTING SECTIONS OF THE HEALTH CARE PURCHASING ACT, THE NEW MEXICO INSURANCE CODE, THE HEALTH MAINTENANCE ORGANIZATION LAW AND THE NONPROFIT HEALTH CARE PLAN LAW TO ESTABLISH LIMITS ON COST SHARING FOR PHYSICAL REHABILITATION SERVICES.

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

SECTION 1. A new section of the Health Care Purchasing Act is enacted to read:

"[NEW MATERIAL] PHYSICAL REHABILITATION SERVICES--LIMITS ON COST SHARING.--

A. Group health coverage, including any form of self-insurance, offered, issued or renewed under the Health Care Purchasing Act that offers coverage of physical rehabilitation services shall not impose a copayment or

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1 coinsurance on those physical rehabilitation services that
2 exceeds the lesser of:

3 (1) the copayment or coinsurance imposed for
4 specialist services; or

5 (2) one hundred twenty percent of the
6 copayment or coinsurance amount imposed for primary care
7 services.

8 B. As used in this section:

9 (1) "physical rehabilitation services" means
10 services aimed at maximizing an individual's level of function
11 or returning to a prior level of function that are provided by
12 a licensed physical therapist, occupational therapist or
13 chiropractic physician or other person licensed to provide the
14 services; and

15 (2) "primary care services" means the first
16 level of basic or general health care for a person's health
17 needs, including diagnostic and treatment services, initiation
18 of referrals for other health care services and maintenance of
19 the continuity of care when appropriate."

20 SECTION 2. A new section of Chapter 59A, Article 22 NMSA
21 1978 is enacted to read:

22 "[NEW MATERIAL] PHYSICAL REHABILITATION SERVICES--LIMITS
23 ON COST SHARING.--

24 A. An individual or group health insurance policy,
25 health care plan or certificate of health insurance that is

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1 delivered, issued for delivery or renewed in this state that
2 offers coverage of physical rehabilitation services shall not
3 impose a copayment or coinsurance on those physical
4 rehabilitation services that exceeds the lesser of:

5 (1) the copayment or coinsurance imposed for
6 specialist services; or

7 (2) one hundred twenty percent of the
8 copayment or coinsurance amount imposed for primary care
9 services.

10 B. As used in this section:

11 (1) "physical rehabilitation services" means
12 services aimed at maximizing an individual's level of function
13 or returning to a prior level of function that are provided by
14 a licensed physical therapist, occupational therapist or
15 chiropractic physician or other person licensed to provide the
16 services; and

17 (2) "primary care services" means the first
18 level of basic or general health care for a person's health
19 needs, including diagnostic and treatment services, initiation
20 of referrals for other health care services and maintenance of
21 the continuity of care when appropriate."

22 SECTION 3. A new section of Chapter 59A, Article 23 NMSA
23 1978 is enacted to read:

24 "[NEW MATERIAL] PHYSICAL REHABILITATION SERVICES--LIMITS
25 ON COST SHARING.--

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1 A. A group or blanket health insurance policy,
2 health care plan or certificate of health insurance that is
3 delivered, issued for delivery or renewed in this state that
4 offers coverage of physical rehabilitation services shall not
5 impose a copayment or coinsurance on those physical
6 rehabilitation services that exceeds the lesser of:

7 (1) the copayment or coinsurance imposed for
8 specialist services; or

9 (2) one hundred twenty percent of the
10 copayment or coinsurance amount imposed for primary care
11 services.

12 B. As used in this section:

13 (1) "physical rehabilitation services" means
14 services aimed at maximizing an individual's level of function
15 or returning to a prior level of function that are provided by
16 a licensed physical therapist, occupational therapist or
17 chiropractic physician or other person licensed to provide the
18 services; and

19 (2) "primary care services" means the first
20 level of basic or general health care for a person's health
21 needs, including diagnostic and treatment services, initiation
22 of referrals for other health care services and maintenance of
23 the continuity of care when appropriate."

24 **SECTION 4.** A new section of the Health Maintenance
25 Organization Law is enacted to read:

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1 "[NEW MATERIAL] PHYSICAL REHABILITATION SERVICES--LIMITS
2 ON COST SHARING.--

3 A. An individual or group health maintenance
4 contract that is delivered, issued for delivery or renewed in
5 this state that offers coverage of physical rehabilitation
6 services shall not impose a copayment or coinsurance on those
7 physical rehabilitation services that exceeds the lesser of:

8 (1) the copayment or coinsurance imposed for
9 specialist services; or

10 (2) one hundred twenty percent of the
11 copayment or coinsurance amount imposed for primary care
12 services.

13 B. As used in this section:

14 (1) "physical rehabilitation services" means
15 services aimed at maximizing an individual's level of function
16 or returning to a prior level of function that are provided by
17 a licensed physical therapist, occupational therapist or
18 chiropractic physician or other person licensed to provide the
19 services; and

20 (2) "primary care services" means the first
21 level of basic or general health care for a person's health
22 needs, including diagnostic and treatment services, initiation
23 of referrals for other health care services and maintenance of
24 the continuity of care when appropriate."

25 SECTION 5. A new section of the Nonprofit Health Care
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1 Plan Law is enacted to read:

2 "[NEW MATERIAL] PHYSICAL REHABILITATION SERVICES--LIMITS
3 ON COST SHARING.--

4 A. An individual or group health care plan that is
5 delivered, issued for delivery or renewed in this state that
6 offers coverage of physical rehabilitation services shall not
7 impose a copayment or coinsurance on those physical
8 rehabilitation services that exceeds the lesser of:

9 (1) the copayment or coinsurance imposed for
10 specialist services; or

11 (2) one hundred twenty percent of the
12 copayment or coinsurance amount imposed for primary care
13 services.

14 B. As used in this section:

15 (1) "physical rehabilitation services" means
16 services aimed at maximizing an individual's level of function
17 or returning to a prior level of function that are provided by
18 a licensed physical therapist, occupational therapist or
19 chiropractic physician or other person licensed to provide the
20 services; and

21 (2) "primary care services" means the first
22 level of basic or general health care for a person's health
23 needs, including diagnostic and treatment services, initiation
24 of referrals for other health care services and maintenance of
25 the continuity of care when appropriate."

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