

1 SENATE BILL 463

2 **56TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2023**

3 INTRODUCED BY

4 Pete Campos and Stuart Ingle

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10 AN ACT

11 RELATING TO EMERGENCY MEDICAL SERVICES; ESTABLISHING A MEDICAID
12 COST-BASED SUPPLEMENTAL REIMBURSEMENT PROGRAM FOR ELIGIBLE
13 PUBLIC EMERGENCY MEDICAL SERVICES PROVIDERS; CREATING AN
14 ALTERNATIVE MEDICAID UPPER PAYMENT LIMIT REIMBURSEMENT PROGRAM
15 FOR PRIVATE EMERGENCY MEDICAL SERVICES PROVIDERS; MAKING AN
16 APPROPRIATION.

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

19 SECTION 1. [NEW MATERIAL] MEDICAID COST-BASED
20 SUPPLEMENTAL REIMBURSEMENT PROGRAM FOR ELIGIBLE PUBLIC
21 EMERGENCY MEDICAL SERVICES PROVIDERS.--

22 A. An eligible public emergency medical services
23 provider shall receive cost-based supplemental medicaid
24 reimbursement, to the extent provided by law, in addition to
25 the rate of payment that the provider would otherwise receive

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1 from medicaid for ground emergency medical transportation
2 services.

3 B. An eligible public emergency medical services
4 provider's supplemental reimbursement pursuant to this section
5 shall be subject to the following conditions:

6 (1) the supplemental reimbursement shall be
7 equal to the amount of federal financial participation based on
8 claims and emergency medical services costs;

9 (2) eligible public emergency medical services
10 providers shall not be reimbursed for more than one hundred
11 percent of the eligible public emergency medical services
12 provider's actual costs;

13 (3) the supplemental reimbursement shall apply
14 to the emergency medical services transportation costs that are
15 reimbursed by medicaid fee-for-service and medicaid-managed
16 care programs;

17 (4) the supplemental reimbursement shall be
18 distributed to eligible public emergency medical services
19 providers through a federally permissible cost-basis
20 methodology, which includes the per-transport cost-basis;

21 (5) as a condition of receiving supplemental
22 medicaid reimbursement pursuant to this section, each eligible
23 public emergency medical services provider shall enter into an
24 agreement with the human services department to reimburse the
25 department for administrative costs related to providing

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1 supplemental reimbursement pursuant to this section; and
2 (6) each eligible public emergency medical
3 services provider shall reimburse the state for any additional
4 costs incurred due to the provision of supplemental
5 reimbursement to the eligible public emergency medical services
6 provider.

7 C. Participation in the cost-based supplemental
8 medicaid reimbursement program provided for in this section is
9 voluntary for eligible public emergency medical services
10 providers.

11 D. For the purposes of this section, "eligible
12 public emergency medical services provider" means an entity
13 that:

- 14 (1) provides ground emergency medical
15 transportation services to medicaid beneficiaries;
- 16 (2) is enrolled as a medicaid provider for the
17 period for which reimbursement is claimed; and
- 18 (3) is owned or operated by the state or a
19 political subdivision of the state and employs or contracts
20 with persons who are licensed to provide emergency medical
21 services pursuant to the Emergency Medical Services Act.

22 SECTION 2. [NEW MATERIAL] ALTERNATIVE MEDICAID UPPER
23 PAYMENT LIMIT REIMBURSEMENT PROGRAM FOR PRIVATE EMERGENCY
24 MEDICAL SERVICES PROVIDERS.--The human services department
25 shall establish a medicaid upper payment limit reimbursement
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1 program for private emergency medical services providers. The
2 human services department may implement the upper payment limit
3 reimbursement program through any lawful method that enables
4 the department to enhance medicaid reimbursement for private
5 emergency medical services providers.

6 SECTION 3. TEMPORARY PROVISION.--The human services
7 department shall promptly seek necessary federal approvals for
8 the implementation of this act.

9 SECTION 4. APPROPRIATION.--Seventy-five thousand dollars
10 (\$75,000) is appropriated from the general fund to the human
11 services department for expenditure in fiscal year 2024 to
12 carry out the purposes of this act. Any unexpended or
13 unencumbered balance remaining at the end of fiscal year 2024
14 shall revert to the general fund.