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AGENCY BILL ANALYSIS 2024 REGULAR SESSION

WITHIN 24 HOURS OF BILL POSTING, UPLOAD ANALYSIS TO:

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{Analysis must be uploaded as a PDF}

SECTION I: GENERAL INFORMATION

<i>Ch</i> Priginal Correctio	neck all that apply X Amendm Substitut	ent	Date 1.25.24 Bill No: HB234			
ponsor: Dayan Hochman-Vigil		Agency Name and Code Number:	New Mexico Medical Board - 446			
	Medical Malpractice Premium		Person Writing Analysis:	Amanda	Quintana	
hort itle:	Assistance		Phone: 505-670-		Email AmandaL.Quintana@nmmb.nm.gov	
SECTION	N II: FISCAL IMI	APPROPRIA'	ΓΙΟΝ (dollars in th	ousands)	Fund	
	FY24	FY	or No	onrecurring	Affected	
Parenthesis	s () Indicate Expenditur	e Decreases)				

REVENUE (dollars in thousands)

	Recurring	Fund		
FY24	FY25	FY26	or Nonrecurring	Affected

(Parenthesis () Indicate Expenditure Decreases)

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

		FY24	FY25	FY26	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
To	tal						

(Parenthesis () Indicate Expenditure Decreases)

Duplicates/Conflicts with/Companion to/Relates to: Duplicates/Relates to Appropriation in the General Appropriation Act

SECTION III: NARRATIVE BILL SUMMARY

Synopsis:

SB234 Proposes to Create the Medical Malpractice Premium Assistance Fund as a nonreverting fund to be administered by the Office of Superintendent of Insurance to establish a program to provide medical malpractice premium reimbursement to certain health care providers. Appropriates \$70 million (GF, nonreverting) to the Office of Superintendent of Insurance for use in FY2025 and subsequent fiscal years to reimburse healthcare providers for medical malpractice premiums.

Subject to available funding, the Medical Malpractice Premium Assistance Fund shall reimburse independent health care providers or independent health care provider groups (not employed by a hospital or health system) a percentage of the cost of their annual medical malpractice premium, depending on years practicing in the state, as follows:

- Zero to three years, 25%;
- Four to seven years, 50%;
- Eight to 11 years, 75%; or
- 12 Years or more, 100%

HB234 Specifies criteria for administration of the Fund by the OSI:

- develop priority criteria for disbursements;
- provide forms, standards, procedures and information about the program;
- maintain the privacy and security of information in accord with state and federal law; and
- adopt rules as necessary to implement the act.

HB234 Establishes a reimbursement application process, through the OSI, that includes:

- proof of licensure in the state as certified registered nurse anesthetist, certified nursemidwife certified nurse practitioner, chiropractic physician, physician, physician assistant, or podiatrist;
- the number of years of practice in the state;
- participation in the Patient's Compensation Fund and payment of the associated surcharge;
- payment of professional liability insurance coverage, obtained from a medical liability insurer authorized to provide such insurance, for coverage at \$250,000 per occurrence, for

not more than three occurrences in one calendar year; and

• completion of a full year of practice corresponding to the period of medical malpractice coverage for which reimbursement is being sought.

FISCAL IMPLICATIONS

None for the New Mexico Medical Board

SIGNIFICANT ISSUES

None for the New Mexico Medical Board

PERFORMANCE IMPLICATIONS

None for the New Mexico Medical Board

ADMINISTRATIVE IMPLICATIONS

None for the New Mexico Medical Board

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

None found

TECHNICAL ISSUES

None for the New Mexico Medical Board

OTHER SUBSTANTIVE ISSUES

None for the New Mexico Medical Board

ALTERNATIVES

None for the New Mexico Medical Board

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

None for the New Mexico Medical Board

AMENDMENTS

None for the New Mexico Medical Board