1	SENATE BILL 364
2	43rd LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 1997
3	INTRODUCED BY
4	SHANNON ROBINSON
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10	AN ACT
11	RELATING TO RETIREE HEALTH CARE; AMENDING THE RETIREE HEALTH
12	CARE ACT TO CHANGE CERTAIN DEFINITIONS, GIVE THE RETIREE HEALTH
13	CARE BOARD MORE DISCRETION IN SETTING CONTRIBUTION LEVELS AND
14	CHANGE CERTAIN PROVISIONS PERTAINING TO INSTITUTIONS OF HIGHER
15	EDUCATION, MUNICIPALITIES AND COUNTIES; AMENDING SECTIONS OF THE
16	NMSA 1978.
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18	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:
19	Section 1. Section 10-7C-4 NMSA 1978 (being Laws 1990,
20	Chapter 6, Section 4, as amended) is amended to read:
21	"10-7C-4. DEFINITIONSAs used in the Retiree Health Care
22	Act:
23	A. "active employee" means an employee of a public
24	institution or any other public employer participating in either
25	the Educational Retirement Act, the Public Employees Retirement
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1 Act, the Judicial Retirement Act, [or] the Magistrate Retirement Act or the Public Employees Retirement Reciprocity Act or the 2 employee of an independent public employer; 3 **B**. "authority" means the retiree health care 4 authority created pursuant to the Retiree Health Care Act; 5 6 C. "basic plan of benefits" means only those coverages generally associated with a medical plan of benefits; 7 D. "board" means the [governing] board of the 8 9 retiree health care authority; 10 Ε. "current retiree" means an eligible retiree who 11 is receiving a disability or normal retirement benefit under the 12 Educational Retirement Act, the Public Employees Retirement Act, 13 the Judicial Retirement Act, the Magistrate Retirement Act [the 14 Retirement Reciprocity Act, the Judicial Retirement Reciprocity 15 Act] or the Public Employees Retirement Reciprocity Act or the 16 retirement program of an independent public employer on or 17 before July 1, 1990; "eligible dependent" means a person obtaining 18 F. 19 retiree health care coverage based upon that person's relationship to an eligible retiree as follows: 20 21 (1) a spouse; 22 (2) an unmarried child under the age of 23 nineteen who is: (a) a natural child; 24 25 **(b)** a legally adopted child; . 114000. 2

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1 (c) a stepchild living in the same household who is primarily dependent on the eligible retiree for 2 maintenance and support; 3 (d) a child for whom the eligible retiree 4 is the legal guardian and who is primarily dependent on the 5 6 eligible retiree for maintenance and support, as long as evidence of the guardianship is evidenced in a court order or 7 decree: or 8 9 (e) a foster child living in the same 10 household: 11 (3) a child described in Subparagraphs (a) 12 through (e) of Paragraph (2) of this subsection who is between 13 the ages of nineteen and twenty-five and is a full-time student 14 at an accredited educational institution, provided that "fulltime student" shall be a student enrolled in and taking twelve 15 16 or more semester hours or its equivalent contact hours in 17 primary, secondary, undergraduate or vocational school or a 18 student enrolled in and taking nine or more semester hours or 19 its equivalent contact hours in graduate school; 20 a dependent child over nineteen who is (4) 21 wholly dependent on the eligible retiree for maintenance and support and who is incapable of self-sustaining employment by 22 23 reason of mental retardation or physical handicap, provided that proof of incapacity and dependency shall be provided within 24 25 thirty-one days after the child reaches the limiting age and at

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1	such times thereafter as may be required by the board;
2	(5) a surviving spouse defined as follows:
3	(a) "surviving spouse" means the spouse
4	to whom a retiree was married at the time of death; or
5	(b) "surviving spouse" means the spouse
6	to whom a deceased vested active employee was married at the
7	time of death; or
8	(6) a surviving dependent child who is the
9	dependent child of a deceased eligible retiree whose other
10	parent is also deceased;
11	G. "eligible employer" means either:
12	(1) a "retirement system employer", which means
13	an institution of higher education, a school district or other
14	entity participating in the public school insurance authority, a
15	state agency, state court, magistrate court, municipality or
16	county, each of which is affiliated under or covered by the
17	Educational Retirement Act, the Public Employees Retirement Act,
18	the Judicial Retirement Act, [or] the Magistrate Retirement Act
19	or the Public Employees Retirement Reciprocity Act; or
20	(2) an "independent public employer", which
21	means a municipality or county which is not a retirement system
22	employer;
23	H. "eligible retiree" means:
24	(1) a "nonsalaried eligible participating
25	entity governing authority member" who is a person who is not a
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1 retiree and who: has served without salary as a member 2 (a) of the governing authority of an employer eligible to 3 participate in the benefits of the Retiree Health Care Act and 4 is certified to be such by the executive director of the public 5 6 school insurance authority; 7 (b) has maintained group health insurance coverage through that member's governing authority if such group 8 9 health insurance coverage was available and offered to the 10 member during the member's service as a member of the governing 11 authority; and 12 (c) was participating in the group health 13 insurance program under the Retiree Health Care Act prior to 14 July 1, 1993; or 15 if a person eligible under (d) 16 Subparagraph (a) of this paragraph applies before August 1, 1993 17 to the authority to participate in the program, then he will be 18 eligible to participate notwithstanding the provisions of 19 Subparagraphs (b) and (c) of this paragraph; (2) a "salaried eligible participating entity 20 21 governing authority member" who is a person who is not a retiree and who: 22 23 has served with salary as a member of (a) the governing authority of an employer eligible to participate 24 25 in the benefits of the Retiree Health Care Act;

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(b) has maintained group health insurance
through that member's governing authority, if such group health
insurance was available and offered to the member during the
member's service as a member of the governing authority; and
(c) was participating in the group health
insurance program under the Retiree Health Care Act prior to
July 1, 1993; or
(d) if a person eligible under
Subparagraph (a) of this paragraph applies before August 1, 1993
to the authority to participate in the program, then he will be
eligible to participate notwithstanding the provisions of
Subparagraphs (b) and (c) of this paragraph;
(3) an "eligible participating retiree" who is
a person who:
(a) falls within the definition of a
retiree, has made contributions to the fund for at least five
years prior to retirement and whose eligible employer during
that period of time made contributions as a participant in the
Retiree Health Care Act on the person's behalf, unless that
person retires on or before July 1, 1995, in which event the
time period required for employee and employer contributions
shall become the period of time between July 1, 1990 and the
date of retirement, and who is certified to be a retiree by the
educational retirement director, the executive secretary of the
public employees retirement board or the governing authority of

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(b) falls within the definition of a retiree, retired prior to July 1, 1990 and is certified to be a 3 retiree by the educational retirement director, the executive secretary of the public employees retirement association or the governing authority or of an independent public employer; but this paragraph does not include a retiree who was an employee of an eligible employer who exercised the option not to be a 8 participating employer pursuant to the Retiree Health Care Act and did not after January 1, 1993 elect to become a participating employer; unless the retiree: 1) retired on or 12 before June 30, 1990; and 2) at the time of retirement did not 13 have a retirement health plan or retirement health insurance 14 coverage available from his employer; or

(c) is a retiree who: 1) was at the time of retirement an employee of an eligible employer who exercised the option not to be a participating employer pursuant to the Retiree Health Care Act, but which eligible employer subsequently elected after January 1, 1993 to become a participating employer; 2) has made contributions to the fund for at least five years prior to retirement and whose eligible employer during that period of time made contributions as a participant in the Retiree Health Care Act on the person's behalf, unless that person retires less than five years after the date participation begins, in which event the time period

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required for employee and employer contributions shall become the period of time between the date participation begins and the date of retirement; and 3) is certified to be a retiree by the educational retirement director, the executive secretary of the public employees retirement board or the governing authority of an independent public employer;

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I. "fund" means the retiree health care fund;

J. "group health insurance" means coverage that includes but is not limited to life insurance, accidental death and dismemberment, hospital care and benefits, surgical care and treatment, medical care and treatment, dental care, eye care, obstetrical benefits, prescribed drugs, medicines and prosthetic devices, medicare supplement, medicare carveout, medicare coordination and other benefits, supplies and services through the vehicles of indemnity coverages, health maintenance organizations, preferred provider organizations and other health care delivery systems as provided by the Retiree Health Care Act and other coverages considered by the board to be advisable;

K. "ineligible dependents" include but are not limited to:

(1) those dependents created by common law relationships;

(2)

service;

(3) parents, aunts, uncles, brothers, sisters,

dependents while in active military

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grandchildren and other family members left in the care of an eligible retiree without evidence of legal guardianship; and

(4) anyone not specifically referred to as an eligible dependent pursuant to the rules and regulations adopted by the board;

L. "participating employee" means an employee of a participating employer, which employee has not been excluded from participation in the Retiree Health Care Act pursuant to [Subsection F of Section 10-7C-9 NMSA 1978 or] Section 10-7C-10 NMSA 1978;

M "participating employer" means an eligible employer who has satisfied the conditions for participating in the benefits of the Retiree Health Care Act, including the requirements of Subsection M of Section 10-7C-7 NMSA 1978 and Subsection D, $[\sigma r] E \ or \ G$ of Section 10-7C-9 NMSA 1978, as applicable; and

N. "retiree" means a person who:

(1) is receiving:

(a) a disability or normal retirementbenefit or survivor's benefit under the Educational RetirementAct;

(b) a disability or normal retirement
benefit or survivor's benefit pursuant to the Public Employees
Retirement Act, the Judicial Retirement Act, the Magistrate
Retirement Act or the [Retirement Reciprocity Act or the

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1 Judicial Retirement Reciprocity Act] Public Employees Retirement 2 <u>Reciprocity Act</u>; or (c) a disability or normal retirement 3 benefit or survivor's benefit pursuant to the retirement program 4 of an independent public employer to which that employer has 5 6 made periodic contributions; or (2) is not receiving a survivor's benefit but 7 is the eligible dependent of a person who received a disability 8 9 or normal retirement benefit pursuant to the Educational 10 Retirement Act, [or] the Public Employees Retirement Act, <u>the</u> 11 Judicial Retirement Act, the Magistrate Retirement Act or the 12 Public Employees Retirement Reciprocity Act." 13 Section 2. Section 10-7C-7 NMSA 1978 (being Laws 1990, 14 Chapter 6, Section 7) is amended to read: "10-7C-7. BOARD--DUTIES.--In order to achieve the purposes 15 16 of the Retiree Health Care Act, the board may take all actions 17 reasonably necessary to implement that act, including but not 18 limited to the following: 19 A. employ or contract for the services of the state 20 fiscal agent or select its own fiscal agent in accordance with 21 the Procurement Code: employ or contract for persons to assist it in 22 **B**. 23 carrying out the Retiree Health Care Act and determine the duties and compensation of these employees; 24 25 С. collect and disburse funds;

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D. collect all current and historical claims and financial information necessary for effective procurement of lines of insurance coverage;

Е. promulgate and adopt necessary rules, regulations and procedures for implementation of the Retiree Health Care 5 Act:

F. negotiate insurance policies covering additional 7 or lesser benefits as determined appropriate by the board, and 8 9 at the board's discretion determine various benefit levels based 10 on retirees' accumulated years of credited service, but the board shall maintain all coverage as required by federal or 11 12 state law for each eligible retiree. In the event it is 13 practical to wholly self-insure part or all of the retiree 14 health care coverages, the board may do so;

procure group health care and other coverages G. authorized by the Retiree Health Care Act in accordance with the **Procurement Code:**

H. establish the procedures for contributions and deductions;

Ι. determine methods and procedures for claims administration:

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administer the fund; J.

K. contract for and make available to all eligible retirees and eligible dependents basic and optional group health insurance plans. The optional coverage may include a lower

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deductible, lower coinsurance or additional categories of benefits permitted under this section and all other applicable sections of the Retiree Health Care Act to provide additional levels of coverages and benefits. Any additional contributions for these optional plans shall be paid for by the eligible retiree or eligible dependent. The coverage provided by the plan or plans shall be secondary to all other benefit coverages to which the eligible retiree or eligible dependent is entitled. In the event a covered eligible retiree becomes employed by an employer offering its employees a basic plan of benefits, the coverage provided by the plan under the Retiree Health Care Act shall be secondary to such coverage regardless of whether the employee enrolls in that employer's plan. In the event the eligible retiree or eligible dependent is entitled to receive medicare hospital insurance benefits at no charge, then the coverage provided by the plan under the Retiree Health Care Act shall be secondary to medicare hospital and medical insurance to the extent permitted by federal law;

L. provide, at its discretion, different plans for eligible retirees and eligible dependents covered by medicare than the plans provided for eligible retirees and eligible dependents who are not covered by medicare; and

M promulgate and adopt rules and regulations governing eligibility, participation, enrollment, length of service and any other conditions or requirements for providing

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substantially equal treatment to participating employers [who are independent public employers and their retirees and participating employees]."

Section 3. Section 10-7C-9 NMSA 1978 (being Laws 1990, Chapter 6, Section 9, as amended) is amended to read: "10-7C-9. PARTICIPATION.--

A. All eligible employers shall participate in the Retiree Health Care Act except as provided in Subsection D or [Subsection] E of this section. Participating employers are required to continue existing group health insurance coverages until such time as similar coverages are offered by the board under the Retiree Health Care Act.

B. Participation in the basic health insurance coverages provided by the authority shall be conditioned upon receipt by the board of a certificate of eligibility from the educational retirement director, the executive secretary of the public employees retirement association, the [executive] director of the public school insurance authority or the governing body of an independent public employer. Once eligibility is established, for each eligible retiree who retires on or after [the effective date of the Retiree Health Care Act] February 13, 1990, the board shall contribute from money in the fund the authority's portion of the premium for the basic plan of benefits commencing no earlier than January 1, 1991, plus the balance of the premium which shall be collected

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from the retiree.

C. Each eligible retiree shall accept or reject 2 enrollment in the basic plan of benefits on an enrollment form 3 provided by the board. An eligible retiree who rejects 4 enrollment or fails to return a properly executed enrollment 5 6 form within the open enrollment period as established by the board forfeits all entitlement and eligibility for benefits 7 under the Retiree Health Care Act until the next open enrollment 8 9 period as established by the board.

D. On or before January 1, 1991, municipalities, counties and institutions of higher education that are retirement system employers may at their option determine by ordinance, or for institutions of higher education, by resolution, to be excluded from coverage under the Retiree Health Care Act; that determination shall be subject to the following conditions:

(1) any contributions paid into the fund by a municipality, county or institution of higher education that exercises timely an irrevocable option not to participate in the Retiree Health Care Act under this subsection shall be returned without interest to that municipality, county or institution of higher education for return of the employee contributions to the employees and for crediting of the employer contributions to the appropriate fund of the municipality, county or institution of higher education. If the determination to be excluded from

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coverage is exercised by a municipality, county or institution of higher education prior to July 1, 1990, then that municipality, county or institution of higher education shall not be required to make the contributions that would otherwise be required by Section 10-7C-15 NMSA 1978;

(2) any municipality, county or institution of higher education, in addition to complying with all other required notice and public hearing or meeting requirements, shall, no less than thirty days prior to the public hearing or public meeting on a proposed ordinance or proposed resolution, notify the authority of the public hearing or public meeting by certified mail; and

(3) in the event that:

(a) the number of active employees employed by municipalities contributing to the fund reaches a number equaling sixty percent or more of all active employees employed by all municipalities that are retirement system employers, the municipal position on the board of the authority shall be restored within sixty days of the date that percentage is reached; provided, however, that if a municipality with a population greater than one hundred thousand that is located in a class "A" county exercises this option, then the sixty-percent requirement shall be applied to the remaining municipalities only;

(b) the number of active employees

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employed by counties contributing to the fund reaches a number equaling sixty percent or more of all active employees employed by all counties that are retirement system employers, the county position on the board of the authority shall be restored within sixty days of the date that percentage is reached; provided, however, that if a class "A" county exercises this option, then the eighty-percent requirement shall be applied to the remaining counties only; or

(c) the number of active employees employed by institutions of higher learning contributing to the fund reaches a number equaling seventy percent or more of all active employees employed by an institution of higher education contributing to the educational retirement fund, the institution of higher education position on the board shall be restored within sixty days of the date that percentage is reached.

Ε. An independent public employer may become a participating employer if that employer satisfies the requirements imposed pursuant to Subsection M of Section 10-7C-7 NMSA 1978 and if that employer also files with the authority on or prior to January 1, 1991 or prior to July 1, 1993 or July 1 of any year a written irrevocable election by the governing body of that employer to participate in the Retiree Health Care Act. Any such independent public employer that chooses to become a participating employer after January 1, 1993 shall begin making the appropriate preliminary employer and employee contributions

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to the fund on the July 1 immediately following the adoption of the ordinance or resolution. On the following January 1, eligible retirees of those participating employers and their eligible dependents shall be eligible to receive group health insurance coverage pursuant to the provisions of the Retiree Health Care Act.

F. Any other provisions of the Retiree Health Care Act notwithstanding, retirees [or active employees] of institutions of higher education participating in the Retiree Health Care Act for whom those institutions of higher education have existing plans, programs, policies or contracts for health care benefits shall not be required to participate in the Retiree Health Care Act [nor shall employer or employee contributions be made to the authority on their behalf].

G. A municipality or county that enacted an ordinance or an institution of higher education that enacted a resolution prior to January 1, 1991 pursuant to Subsection D of this section to be excluded from coverage under the Retiree Health Care Act may [enact] become a participating employer if that employer satisfies the requirements imposed pursuant to Subsection M of Section 10-7C-7 NMSA 1978 and if that employer also enacts an ordinance or resolution, as applicable, after a public hearing and published notice of the hearing, prior to July 1, 1993 or July 1 of any year to choose to become a participating employer under the Retiree Health Care Act. Any

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such municipality, county or institution of higher education that chooses to become a participating employer after January 1, 1993 shall begin making the appropriate preliminary employer and employee contributions to the fund on the July 1 immediately following the adoption of the ordinance or resolution. 5 On the following January 1, eligible retirees of those participating employers and their eligible dependents shall be eligible to receive group health insurance coverage pursuant to the 8 provisions of the Retiree Health Care Act."

Section 4. Section 10-7C-13 NMSA 1978 (being Laws 1990, Chapter 6, Section 13, as amended) is amended to read:

> "10-7C-13. PAYMENT OF PREMIUMS ON HEALTH CARE PLANS. --

Each eligible retiree shall pay a monthly premium A. for the basic plan in an amount set by the board not to exceed the sum of fifty dollars (\$50.00) plus the amount, if any, of the compounded annual increases authorized by the board [which increases shall not exceed three percent in any fiscal year]. In addition to the monthly premium for the basic plan, each current retiree and nonsalaried eligible participating entity governing authority member who becomes an eligible retiree shall also pay monthly an additional participation fee set by the That fee shall be five dollars (\$5.00) plus the amount, board. if any, of the compounded annual increases authorized by the board [which increases shall not exceed three percent in any fiscal year]. The additional monthly participation fee paid by

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the current retirees and nonsalaried eligible participating entity governing authority members who become eligible retirees shall be a consideration and a condition for being permitted to participate in the Retiree Health Care Act. Eligible dependents shall pay monthly premiums in amounts that with other money appropriated to the fund shall cover the cost of the basic plan for the eligible dependents.

B. Eligible retirees and eligible dependents shall pay monthly premiums to cover the cost of the optional plans that they elect to receive, and the board shall adopt rules for the collection of additional premiums from eligible retirees and eligible dependents participating in the optional plans. An eligible retiree or eligible dependent may authorize the authority in writing to deduct the amount of these premiums from the monthly annuity payments, if applicable.

C. The participating employers, active employees and retirees are responsible for the financial viability of the program. The overall financial viability is not an additional financial obligation of the state."

Section 5. Section 10-7C-15 NMSA 1978 (being Laws 1990, Chapter 6, Section 15) is amended to read:

"10-7C-15. RETIREE HEALTH CARE FUND CONTRIBUTIONS. --

A. <u>Following completion of the preliminary</u> <u>contribution period</u>, each participating employer for the fiscal year beginning July 1, 1990 and thereafter shall make

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contributions to the fund in the amount of one percent of each
 participating employee's annual salary.

B. Following completion of the preliminary contribution period, each participating employee as a condition of employment for the fiscal year commencing July 1, 1990 and thereafter shall contribute to the fund an employee contribution in an amount equal to one-half of one percent of the employee's salary. Each month, participating employers shall deduct the contribution from the participating employee's salary and shall remit it to the board as provided by any procedures that the board may require.

C. A participating employer that fails to remit before the tenth day after the last day of the month all employer and employee deposits required by the Retiree Health Care Act to be remitted by the employer for the month shall pay to the fund, in addition to the deposits, interest on the unpaid amounts at the rate of six percent per [annum] year compounded monthly.

D. The employer and employee contributions shall be paid in monthly installments based on the percent of payroll certified by the employer.

E. Except in the case of erroneously made contributions or as may be otherwise provided in Subsection D of Section [9 of the Retiree Health Care Act] <u>10-7C-9 NMSA 1978</u>, contributions from participating employers and participating

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employees shall become the property of the fund on receipt by the board and shall not be refunded under any circumstances, including termination of employment or termination of the participating employer's operation or participation in the Retiree Health Care Act.

F. Notwithstanding any other provision in the Retiree Health Care Act and at the first session of the legislature following July 1, 1995, the legislature shall review and adjust the distribution pursuant to Section 7-1-6.1 <u>NMSA</u> <u>1978</u> and the employer and employee contributions to the authority in order to [insure] ensure the actuarial soundness of the benefits provided under the Retiree Health Care Act."

Section 6. Section 10-7C-16 NMSA 1978 (being Laws 1990, Chapter 6, Section 16, as amended) is amended to read:

RETIREE HEALTH CARE FUND--BUDGET.--

Expenditures for the administration of the Retiree Health Care Act shall be made as provided by an operating budget adopted by the board and approved by the state budget division of the department of finance and administration as provided by law and pursuant to appropriation by the legislature. [For the development and administration of the program, up to ten fulltime equivalents are hereby authorized by the legislature.]"

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"10-7C-16.

1	FORTY- THIRD LEGISLATURE
2	FIRST SESSION, 1997 SB 364/a
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5	March 5, 1997
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7	Mr. President:
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9	Your PUBLIC AFFAIRS COMMITTEE , to whom has been
10	referred
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12	SENATE BILL 364
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14	has had it under consideration and reports same with
15	recommendation that it DO PASS , amended as follows:
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17	1. On page 1, line 15, after the semicolon insert "PROVIDING
18	FOR HEALTH CARE COVERAGE FOR DELAYED RETIREES; ".
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20	2. On page 2, between lines 17 and 18, insert the following
21	new subsection:
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23	"F. "delayed retiree" means a retiree who is receiving a
24	disability or normal retirement benefit from an eligible
25	participating employer and who, at the time of leaving the
	employment of the eligible employer, was fully vested in that
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	FORTY-THIRD LEGISLATURE
1	FIRST SESSION, 1997
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3	SPAC/SB 364 Page 23
4	employer's retirement program but was not yet eligible to receive
5	retirement benefits from that program;".
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7	3. Reletter the succeeding subsections accordingly.
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9	4. On page 7, line 7, strike "paragraph" and insert in lieu
10	thereof "subparagraph".
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12	5. On page 7, line 14, strike "or".
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14	6. On page 8, line 6, after the semicolon insert "or".
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16	7. On page 8, between lines 6 and 7, insert the following new
17	subparagraph:
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19	"(d) is a delayed retiree;".
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			RD LEGISLATURE					
	1	FIRST SI	ESSION, 1997					
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	3	SPAC/SB 364	Page 24					
	4		re the comma, insert "for delayed					
	5	retirees effective July 1, 1997 ar	d for eligible retirees retiring					
	6	on or after July 1, 1998".,						
	7							
	8	and thence referred to the FINAN	CE COMMITTEE.					
	9							
	10	R	espectfully submitted,					
	11							
	12							
	13							
	14	-						
	15	S	hannon Robinson, Chairnan					
	16							
	e 17							
	e 18 18							
	" 19 T	Adopted No	ot Adopted					
eri	e 20	(Chief Clerk)	(Chief Clerk)					
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	23 2	Date						
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		The roll call vote was <u>4</u> For <u>1</u>	_ Agai nst					
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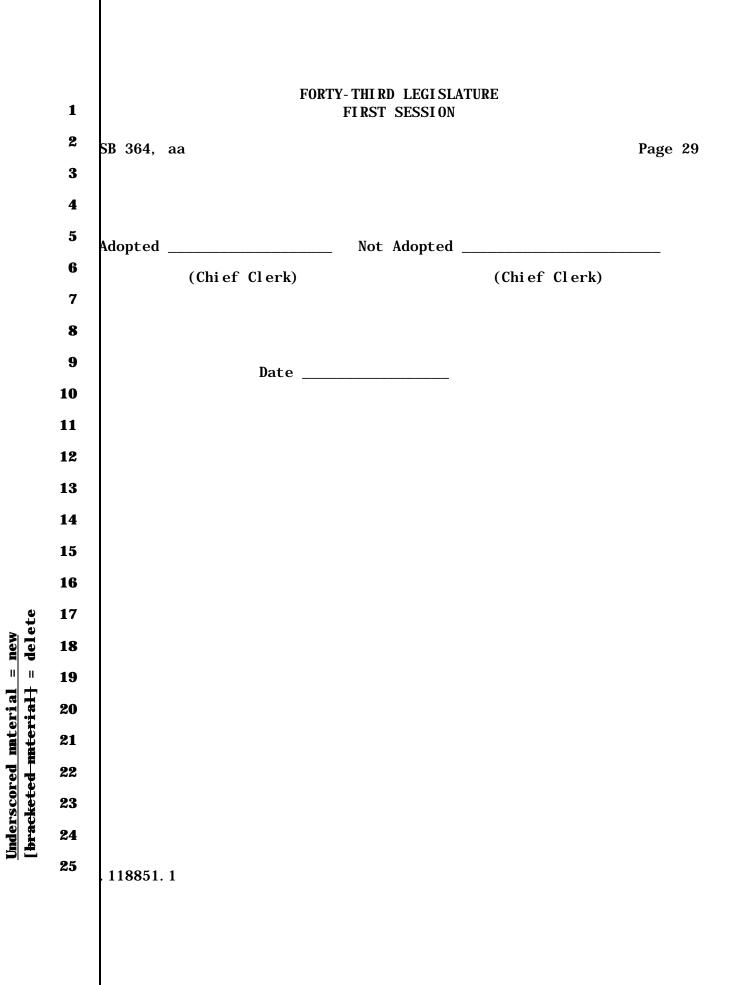
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			SPAC/SB 3	364					Page	25
			Yes:	4					0	
			No:	Smi th						
		6	Excused:		Garci a,	Ingle,	Vernon			
			Absent:	None		-				
		8								
		9								
		10								
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		12								
		13	S0364PA1						. 118041. 1	
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	1	FORTY-THIRD LEGISLATURE FIRST SESSION, 1997
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	3	SPAC/SB 364 Page 26
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	5	
	6	FORTY-THIRD LEGISLATURE
	7	FIRST SESSION, 1997
	8	
	9	
	10	March 12, 1997
	11	
	12	Mr. President:
	13	
	14	Your FINANCE COMMITTEE , to whom has been referred
	15	
	16	SENATE BILL 364, as anended
2	e 17 e 17 18	
		has had it under consideration and reports same with
	" 19 -	recommendation that it DO PASS .
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mat	ž 21	Respectfully submitted,
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		Ben D. Altamirano, Chairman
		. 114000. 2

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1			FIRST	SESSION, 19	97	
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3	SPAC/SB	364				Page 27
4						
5						
6	Adopted_			Not Adopted		
7		(Chief Clo	erk)		(Chief Clerk)	
8						
9						
10						
11		Da	ate		_	
12						
13						
14	The roll	call vote	was <u>6</u> For	<u>0</u> Agai nst		
15	Yes:	6				
16	No:	None				
17	Excused:	Carraro, I	ngle, Lyons,	, McKibben, Fide	1	
18	Absent:	None				
19						
20						
21	S0364FC1					
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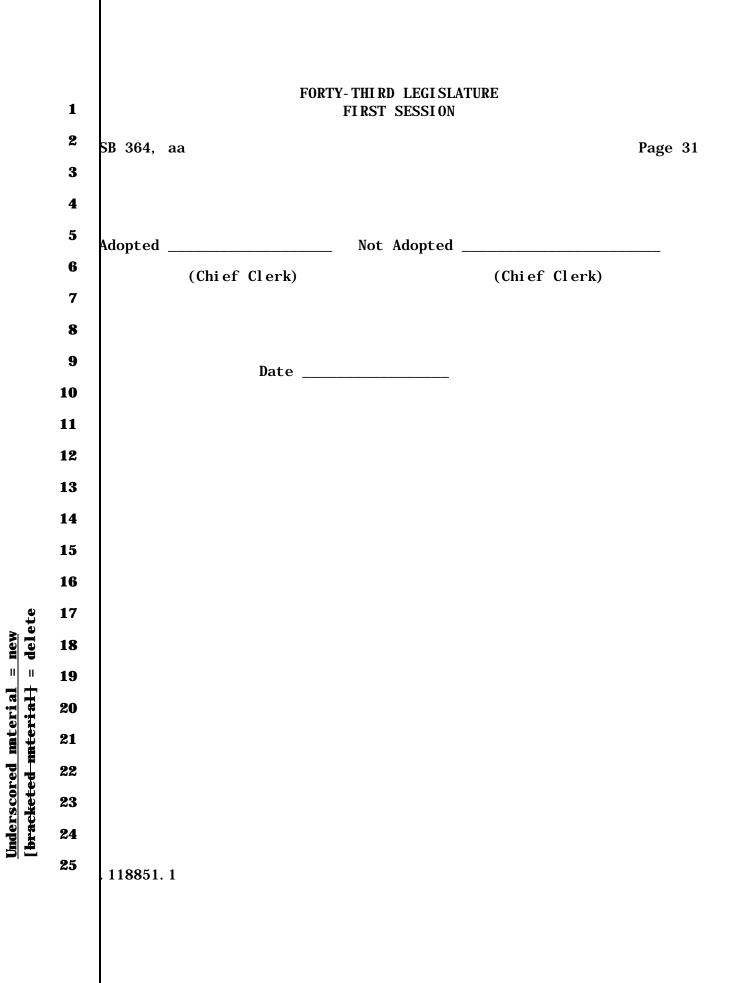
1	FORTY- THI RD LEGI SLATURE
2	FIRST SESSION
3	
4	March 13, 1997
5	
6	
7	SENATE FLOOR AMENDMENT number to SENATE BILL 364, as
8	amended
9	
10	Amendment sponsored by Senator Shannon Robinson
11	
12	
13	1. On page 18, line 17, before the period insert ", which
14	increases shall not exceed the group's projected medical trend for
15	the fiscal year".
16	
17	
18	
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21	
22	
23	Shannon Robi nson
24	
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1	FORTY- THI RD LEGI SLATURE
2	FIRST SESSION
3	
4	March 13, 1997
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6	
7	SENATE FLOOR AMENDMENT number to SENATE BILL 364, as
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13	1. On page 18, line 17, before the period insert ", which
14	increases shall not exceed the group's projected medical trend for
15	the fiscal year".
16	
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23	Shannon Robi nson
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			State of New Mexico House of Representatives
		1	FORTY-THI RD LEGI SLATURE
		2	FIRST SESSION, 1997
		3	
		4	
		5	March 18, 1997
		6	
		7	Mr. Speeker
		8	Mr. Speaker:
		9	Your GOVERNMENT AND URBAN AFFAIRS COMMITTEE, to
		10	whom has been referred
		11	
		12	SENATE BILL 364, as anended
		13	
			has had it under consideration and reports same with recommendation that it DO PASS , and thence referred to the
		15	APPROPRIATIONS AND FINANCE COMMITTEE.
		16	
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	Adopted Not Adopted (Chief Clerk)		
	(Chief Clerk)		
	Date		
	The roll call vote was <u>5</u> For <u>0</u> Against		
	Yes: 5		
	Excused: Hobbs, Pederson, Taylor, JG		
	Absent: None		
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