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HOUSE BILL 213

43RD LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION, 1998

INTRODUCED BY

EDWARD C. SANDOVAL

FOR THE HEALTH AND WELFARE REFORM COMMITTEE

AN ACT

RELATING TO HEALTH; ENACTING THE CHILD HEALTH ACT; CREATING A PROGRAM; MAKING AN APPROPRIATION; DECLARING AN EMERGENCY.

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

Section 1. SHORT TITLE. -- This act may be cited as the "Child Health Act".

Section 2. PURPOSE. -- The purpose of the Child Health Act is to enable the state of New Mexico to provide child health assistance to uninsured low-income children and their families in an effective and efficient manner.

Section 3. DEFINITIONS. -- As used in the Child Health Act:

A. "child" means a natural person who has not reached his nineteenth birthday;

B. "department" means the human services

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1 department;

2 C. "low-income children and their families" means
3 a family with a dependent child with income at or below the
4 level specified in Section 6 of the Child Health Act; and

5 D. "secretary" means the secretary of human
6 services.

7 Section 4. PROGRAM CREATED. --After consultation with the
8 secretary of health and the secretary of children, youth and
9 families, the secretary is directed to design and implement a
10 program to provide health services to low-income children and
11 their families in accordance with the provisions of the Child
12 Health Act. The program shall meet the requirements for
13 obtaining allotted federal funds pursuant to the provisions of
14 Title 21 of the federal Social Security Act. In accordance with
15 those requirements and the requirements of the Child Health Act,
16 the secretary shall prepare and submit a child health plan to
17 the federal secretary of health and human services. The
18 department is the designated state agency to administer the
19 program and cooperate with the federal government in its
20 administration.

21 Section 5. PROGRAM OBJECTIVES--DEVELOPMENT OF PLAN AND
22 ADOPTION OF RULES. --

23 A. The child health plan and the program shall be
24 designed to achieve the following objectives:

25 (1) expand access to and coverage for full

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1 or partial payment for a comprehensive array of personal
2 health services for low-income children and their families who
3 do not have those services at present;

4 (2) increase measurably the quality of life
5 and well-being for the state's citizens by ensuring the good
6 health of children and adults in low-income families;

7 (3) reduce substantially the occurrence rates
8 of preventable illness and disease, morbidity and mortality in
9 the state's population;

10 (4) increase positively the benefit-to-cost
11 ratios of health services provided in the state to the
12 population as a whole while at the same time improving the
13 quality of service when measured by both scientifically
14 objective and beneficiary-perceived criteria;

15 (5) retard escalation of health care costs in
16 all segments of the health care industry;

17 (6) provide through demonstration projects,
18 coupled with any necessary and appropriate federal waivers of
19 conditions for expenditure approval, innovative and
20 imaginative methods of providing health care to all eligible
21 segments of the state's population; and

22 (7) comply with the terms and conditions set
23 forth in the state children's health insurance program
24 established pursuant to Title 21 of the federal Social
25 Security Act.

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1 B. Implementation of an approved child health plan
2 shall be in accordance with rules adopted by the secretary
3 after consultation with the department of health and the
4 children, youth and families department. The rules shall be
5 designed to achieve and be consistent with the objectives
6 specified in Subsection A of this section. Those objectives
7 are stated as mandatory standards by which the validity of
8 proposed rules shall be tested. Additionally, the rules must
9 be consistent with those provisions of the Child Health Act
10 that mandate program requirements.

11 Section 6. PLAN CONTENT--REQUIRED ELEMENTS.--The child
12 health plan and the program of services to be provided by it
13 shall include:

14 A. appropriate methods of outreach to increase the
15 enrollment of eligible children;

16 B. a "phase one" that shall include providing
17 health insurance to children living in households at or below
18 two hundred thirty-five percent of the federal poverty level;

19 C. a "phase two" that may consist of those
20 federally approved specialized services included in the child
21 health plan by the secretary, a continuum of prevention and
22 intervention services that may be developed and implemented,
23 including applications for any federal waivers of conditions
24 that are necessary and consisting of at least the following:

25 (1) implementation of a voluntary home

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1 visiting program available statewide for mothers having their
2 first child, beginning during pregnancy and extending for two
3 years, with a frequency of use as indicated by maternal desire
4 and home visiting team recommendations;

5 (2) provision for home- and community-based
6 early intervention developmental services;

7 (3) provision for a behavioral health
8 identification, assessment and management system;

9 (4) provision for school-based health
10 services in the network of health care programs;

11 (5) provision for the existing healthier kids
12 fund administered by the department of health to enable
13 children to have effective access to health care;

14 (6) development of ways to increase
15 children's dental services, including such prevention services
16 as periodic examinations, radiographs, prophylactic cleanings,
17 fluoride treatments and sealants; and

18 (7) development of ways to increase
19 children's vision services including periodic professional eye
20 examinations and prescription eyewear;

21 D. provision for inhibiting or preventing both
22 employer crowd-out and employee crowd-in;

23 E. requirements that in the development and
24 implementation of the plan the interests of Native American
25 children are identified, and that appropriate provisions for

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1 their enrollment are made with recognition that the
2 application process and the delivery of services with respect
3 to those children present special cultural and other
4 considerations;

5 F. provision for coordination of the
6 administration of the program with other public and private
7 health programs;

8 G. identification and implementation of methods,
9 including monitoring used to ensure the quality and
10 appropriateness of care, particularly with respect to well
11 baby care, well child care and immunizations provided pursuant
12 to the plan and to ensure access to covered services,
13 including emergency services;

14 H. methods by which the state will collect data,
15 maintain the records and furnish required reports to the
16 secretary or his designees;

17 I. specific requirements for and description of
18 the means to be used to ensure that members of the public will
19 be involved in the design and implementation of the plan and a
20 description of a method to ensure ongoing public involvement;
21 and

22 J. operation and management of the program by the
23 department in the most fiscally responsible manner, subject to
24 all available legislative appropriations and federal
25 contributions for the program, so that low-income children and

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1 their families receive the optimum health care possible.

2 Section 7. CREATION OF LEGISLATIVE OVERSIGHT COMMITTEE--
3 AUTHORITY AND DUTIES. --

4 A. There is created a joint interim legislative
5 committee, which shall be known as the "program oversight
6 committee".

7 B. The committee shall be composed of eight
8 members. Four members of the house of representatives shall
9 be appointed by the speaker of the house of representatives
10 and four members of the senate shall be appointed by the
11 committees' committee of the senate or, if the senate
12 appointments are made in the interim, by the president pro
13 tempore of the senate after consultation with and agreement of
14 a majority of the members of the committees' committee.
15 Members shall be appointed so that there is a member from each
16 of the major political parties from each house. No member who
17 has a financial interest in an insurance company or health
18 care provider shall be appointed to the committee.

19 C. The program oversight committee shall oversee
20 the development and operations of the program created pursuant
21 to the Child Health Act. It shall fulfill any
22 responsibilities delegated to it pursuant to that act.

23 D. The committee shall report annually its
24 findings and recommendations regarding the program to each
25 regular session of the legislature and shall include in that

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1 report any recommendations for changes in the laws pertaining
2 to the program.

3 Section 8. APPROPRIATION. -- Two million nine hundred
4 thousand dollars (\$2,900,000) is appropriated from the general
5 fund to the human services department for expenditure in fiscal
6 years 1998 through 2000 for the purpose of providing the state
7 match to establish a new state children's health insurance
8 program authorized in the federal Budget Reconciliation Act of
9 1997. In addition, the human services department, the
10 department of health and the children, youth and families
11 department are authorized to expend in fiscal years 1998, 1999
12 and 2000, in contributions toward a higher state match, up to a
13 total of three million six hundred thousand dollars (\$3,600,000)
14 from department balances, toward the establishment of the state
15 children's health insurance program. Pursuant to Sections
16 6-3-23 through 6-3-25 NMSA 1978, the departments are
17 specifically authorized to request any budget adjustments
18 necessary to make the contributions. Any unexpended or
19 unencumbered balance remaining at the end of fiscal year 2008
20 shall revert to the general fund.

21 Section 9. DELAYED REPEAL. -- Effective July 1, 2007, the
22 Child Health Act is repealed.

23 Section 10. EMERGENCY. -- It is necessary for the public
24 peace, health and safety that this act take effect immediately.

1 FORTY-THIRD LEGISLATURE
2 SECOND SESSION, 1998
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6 February 3, 1998
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8 Mr. Speaker:
9

10 Your LABOR AND HUMAN RESOURCES COMMITTEE, to whom
11 has been referred
12

13 HOUSE BILL 213
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15 has had it under consideration and reports same with
16 recommendation that it DO PASS, amended as follows:

17 1. On page 5, line 22, after "crowd-in" insert ?, including
18 the exclusion of children of public employees and other children
19 with health insurance coverage when household income is over one
20 hundred eighty-five percent of the federal poverty level from the
21 phase one basic health insurance portion of the plan, authorized
22 in Subsection C of Section 5 of the Child Health Act".

23 2. On page 8, line 19, strike "2008" and insert in lieu
24 thereof "2003".
25

1 FORTY-THIRD LEGISLATURE
2 SECOND SESSION, 1998

3 HLC/HB 213

Page 10

4 3. On page 8, line 21, strike "2007" and insert in lieu
5 thereof "2002".,
6
7 and thence referred to the APPROPRIATIONS AND FINANCE
8 COMMITTEE.

9
10 Respectfully submitted,

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13 _____
14 Sheryl M. Williams, Chairman

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17 Adopted _____
18 (Chief Clerk)

Not Adopted _____
(Chief Clerk)

19 Date _____
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FORTY-THIRD LEGISLATURE
SECOND SESSION, 1998

3 HLC/HB 213

Page 11

4 The roll call vote was 5 For 2 Against

5 Yes: 5

6 No: Macko, Roberts

7 Excused: None

8 Absent: Marquardt

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2 **FORTY-THIRD LEGISLATURE**
3 **SECOND SESSION, 1998**
4

5 **February 10, 1998**
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8 **Mr. Speaker:**
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10 **Your APPROPRIATIONS AND FINANCE COMMITTEE, to whom**
11 **has been referred**

12 **HOUSE BILL 213, as amended**
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14 **has had it under consideration and reports same with**
15 **recommendation that it DO PASS.**
16

17 **Respectfully submitted,**
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20 _____
21 **Max Coll, Chairman**
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1 FORTY-THIRD LEGISLATURE
2 SECOND SESSION, 1998

3 Page 13

4 Adopted _____ Not Adopted _____
5 (Chief Clerk) (Chief Clerk)

6
7 Date _____

8
9 The roll call vote was 10 For 5 Against

10 Yes: 10

11 No: Bird, Buffett, Pearce, Townsend, Wallace

12 Excused: Garcia, MH, Knowles, Varela

13 Absent: None

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FORTY-THIRD LEGISLATURE
SECOND SESSION

February 11, 1998

HOUSE FLOOR AMENDMENT number _____ to HOUSE BILL 213, as amended

Amendment sponsored by Representative

1. On page 4, line 18, after "level" insert ", including provision for cost sharing when household income is over one hundred eighty-five percent of the federal poverty level".

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FORTY-THIRD LEGISLATURE
SECOND SESSION

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2 HB 213, aa

Page 15

3 Adopted _____ Not Adopted _____

4 (Chief Clerk)

(Chief Clerk)

5

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7 Date _____

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FORTY-THIRD LEGISLATURE
SECOND SESSION

1 HB 213, aa

Page 16

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4 FORTY-THIRD LEGISLATURE
5 SECOND SESSION, 1998

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February 16, 1998

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Mr. President:

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Your PUBLIC AFFAIRS COMMITTEE, to whom has been referred

11

12 HOUSE BILL 213, as amended

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14 has had it under consideration and reports same with recommendation
15 that it DO PASS, and thence referred to the FINANCE COMMITTEE.

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17 Respectfully submitted,

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21 _____
Shannon Robinson, Chairman

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25 Adopted _____ Not Adopted _____

(Chief Clerk)

(Chief Clerk)

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FORTY-THIRD LEGISLATURE
SECOND SESSION

1 HB 213, aa

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3 Date _____

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5 The roll call vote was 5 For 0 Against

6 Yes: 5

7 No: 0

8 Excused: Adair, Boitano, Ingle, Vernon

9 Absent: None

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FORTY-THIRD LEGISLATURE
SECOND SESSION

1 HB 213, aa

Page 18

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4 FORTY-THIRD LEGISLATURE
5 SECOND SESSION, 1998

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February 19, 1998

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Mr. President:

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Your FINANCE COMMITTEE, to whom has been referred

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HOUSE BILL 213, as amended

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has had it under consideration and reports same with recommendation
that it DO PASS.

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Respectfully submitted,

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Ben D. Altamirano, Chairman

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Adopted _____ Not Adopted _____

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(Chief Clerk)

(Chief Clerk)

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FORTY-THIRD LEGISLATURE
SECOND SESSION

1 HB 213, aa

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Date _____

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6 The roll call vote was 6 For 0 Against

7 Yes: 6

8 No: None

9 Excused: Carraro, Eisenstadt, Ingle, Lyons, McKibben

10 Absent: None

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