1	SENATE BILL
2	56TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2023
3	INTRODUCED BY
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6	DISCUSSION DRAFT
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8	FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE
9	
10	AN ACT
11	RELATING TO HEALTH CARE COVERAGE; CALCULATING COST-SHARING
12	CONTRIBUTIONS FOR PRESCRIPTION DRUG COVERAGE.
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14	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:
15	SECTION 1. A new section of the Health Care Purchasing
16	Act is enacted to read:
17	"[<u>NEW MATERIAL</u>] CALCULATING AN ENROLLEE'S COST-SHARING
18	OBLIGATION FOR PRESCRIPTION DRUG COVERAGE
19	A. When calculating an enrollee's cost-sharing
20	obligation for covered prescription drugs, pursuant to group
21	health coverage, including any form of self-insurance, offered,
22	issued or renewed under the Health Care Purchasing Act, the
23	insurer shall credit the enrollee for the full value of any
24	discounts provided or payments made by third parties.
25	B. For purposes of this section, "cost sharing"
	.223388.1

1 means any: 2 (1) copayment; 3 (2) coinsurance; deductible; 4 (3) out-of-pocket maximum amount; 5 (4) other financial obligation, other than a 6 (5) 7 premium or share of a premium; or combination thereof." 8 (6) 9 SECTION 2. A new section of Chapter 59A, Article 22 NMSA 1978 is enacted to read: 10 "[NEW MATERIAL] CALCULATING AN INSURED'S COST-SHARING 11 12 OBLIGATION FOR PRESCRIPTION DRUG COVERAGE .--13 When calculating an insured's cost-sharing Α. 14 obligation for covered prescription drugs, pursuant to an 15 individual or group health insurance policy, health care plan 16 or certificate of health insurance that is delivered, issued for delivery or renewed in this state, the insurer shall credit 17 the insured for the full value of any discounts provided or 18 19 payments made by third parties. 20 B. For purposes of this section, "cost sharing" means any: 21 (1) copayment; 22 (2) coinsurance; 23 (3) deductible; 24 out-of-pocket maximum; 25 (4) .223388.1 - 2 -

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1 other financial obligation, other than a (5) 2 premium or share of a premium; or (6) combination thereof." 3 SECTION 3. A new section of Chapter 59A, Article 23 NMSA 4 5 1978 is enacted to read: "[NEW MATERIAL] CALCULATING AN INSURED'S COST-SHARING 6 7 OBLIGATION FOR PRESCRIPTION DRUG COVERAGE .--8 When calculating an insured's cost-sharing Α. 9 obligation for covered prescription drugs, pursuant to a group health plan other than a small group health plan or a blanket 10 11 health insurance policy or contract that is delivered, issued 12 for delivery or renewed in this state, the insurer shall credit 13 the insured for the full value of any discounts provided or 14 payments made by third parties. For purposes of this section, "cost sharing" 15 Β. 16 means any: 17 (1) copayment; 18 (2) coinsurance; 19 (3) deductible; 20 (4) out-of-pocket maximum; other financial obligation, other than a 21 (5) premium or share of a premium; or 22 combination thereof." (6) 23 SECTION 4. A new section of the Health Maintenance 24 25 Organization Law is enacted to read: .223388.1 - 3 -

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1 "[NEW MATERIAL] CALCULATING AN ENROLLEE'S COST-SHARING OBLIGATION FOR PRESCRIPTION DRUG COVERAGE.--2 When calculating an enrollee's cost-sharing 3 Α. obligation for covered prescription drugs, pursuant to an 4 5 individual or group health maintenance organization contract that is delivered, issued for delivery or renewed in this 6 7 state, the insurer shall credit the enrollee for the full value of any discounts provided or payments made by third parties. 8 9 Β. For purposes of this section, "cost sharing" 10 means any: 11 (1) copayment; 12 (2) coinsurance; deductible; 13 (3) 14 (4) out-of-pocket maximum; other financial obligation, other than a (5) 15 premium or share of a premium; or 16 (6) combination thereof." 17 SECTION 5. A new section of the Nonprofit Health Care 18 19 Plan Law is enacted to read: 20 "[<u>NEW MATERIAL</u>] CALCULATING A SUBSCRIBER'S COST-SHARING OBLIGATION FOR PRESCRIPTION DRUG COVERAGE .--21 When calculating a subscriber's cost-sharing 22 Α. obligation for covered prescription drugs, pursuant to an 23 24 individual or group health insurance policy, health care plan or certificate of health insurance issued for delivery or 25 .223388.1 - 4 -

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1 renewed in this state, the insurer shall credit the subscriber 2 for the full value of any discounts provided or payments made 3 by third parties. 4 Β. For purposes of this section, "cost sharing" 5 means any: copayment; 6 (1) 7 (2) coinsurance; deductible; 8 (3) out-of-pocket maximum; 9 (4) 10 (5) other financial obligation, other than a premium or share of a premium; or 11 combination thereof." 12 (6) SECTION 6. EFFECTIVE DATE.--The effective date of the 13 provisions of this act is January 1, 2024. 14 - 5 -15 16 17 18 19 20 21 22 23 24 25 .223388.1

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