AN ACT

RELATING TO HEALTH CARE COVERAGE; ADJUSTING ELIGIBILITY REQUIREMENTS FOR PARTICIPATING IN THE NEW MEXICO HEALTH INSURANCE EXCHANGE; DECLARING AN EMERGENCY.

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

SECTION 1. Section 59A-23F-11 NMSA 1978 (being Laws 2021, Chapter 136, Section 4, as amended) is amended to read:
"59A-23F-11. HEALTH CARE AFFORDABILITY FUND.--

A. The "health care affordability fund" is created in the state treasury. The fund consists of distributions, appropriations, gifts, grants and donations. Money in the fund at the end of a fiscal year shall not revert to any other fund. The health care authority shall administer the fund, and money in the fund is subject to appropriation by the legislature for purposes provided by this section. Disbursements from the fund shall be made by warrant of the secretary of finance and administration pursuant to vouchers signed by the secretary of health care authority or the secretary's authorized representative.

- B. The purpose of the fund is to:
- (1) reduce health care premiums and cost sharing for New Mexico residents who purchase health care coverage on the New Mexico health insurance exchange;
 - (2) reduce premiums for small businesses and $$\,{\rm HB}\ 2/ec$$ Page 1

2	insured small group market;
3	(3) provide resources for planning, design
4	and implementation of health care coverage initiatives for
5	uninsured New Mexico residents;
6	(4) provide resources for administration of
7	state health care coverage initiatives for uninsured New
8	Mexico residents;
9	(5) cover a portion or all of the net
10	premium health benefit contributions for state employees
11	enrolled in health benefit plans covered by the Health Care
12	Purchasing Act who do not qualify for medicaid and:
13	(a) have a modified adjusted gross
14	income up to two hundred fifty percent of the federal poverty
15	level; or
16	(b) purchase employee-only coverage and
17	receive an annual salary from the state of fifty thousand
18	dollars (\$50,000) or less; and
19	(6) cover a portion or all of the net
20	premiums for members of the New Mexico national guard who
21	qualify for a federal TRICARE reserve select policy.
22	C. If the federal Patient Protection and
23	Affordable Care Act or other federal coverage programs that
24	enable New Mexico residents to secure affordable
25	comprehensive health care coverage are repealed in full or in HB 2/ec

their employees purchasing health care coverage in the fully

part by an act of congress, invalidated by the United States supreme court or administered by the United States department of health and human services in a way that eliminates or reduces access to comprehensive health care coverage for New Mexico residents through medicaid or the New Mexico health insurance exchange, the fund may be used to maintain coverage through the New Mexico health insurance exchange, medical assistance programs or other programs established or administered by the health care authority; provided that coverage is prioritized for New Mexico residents with incomes below two hundred percent of the federal poverty level.

- D. Prior to July 1, 2025, the staff of the legislative finance committee shall conduct a program evaluation to measure the impact of changes to the health insurance premium surtax and the creation of the health care affordability fund as it relates to the purpose of the fund.
- E. Prior to July 1 of each year, the health care authority shall provide actuarial data from the health care affordability fund to the legislative finance committee.
- F. Prior to July 1 of each year, the secretary of health care authority, in consultation with the superintendent, the secretary of taxation and revenue and the chief executive officer of the New Mexico health insurance exchange, shall work with the legislative finance committee and the department of finance and administration to develop

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and report on performance measures relating to the health care affordability fund and any programs or initiatives funded by the fund."

SECTION 2. Section 59A-23F-12 NMSA 1978 (being Laws 2021, Chapter 136, Section 5, as amended) is amended to read:
"59A-23F-12. HEALTH CARE AFFORDABILITY PLAN-RULEMAKING--REPORTING REQUIREMENTS.--

A. Rules covering the following provisions may be amended as the health care authority determines:

- sharing assistance to individuals and families for the purchase of qualified health plans on the New Mexico health insurance exchange. In providing this assistance, the health care authority shall develop health care affordability criteria designed to reduce the amount that individuals pay in premiums and out-of-pocket medical expenses for qualified health plans offered on the New Mexico health insurance exchange; and
- (2) establishing income eligibility parameters for the health care affordability criteria for plan year 2023 and each subsequent calendar year based on available funds. New Mexico residents who qualify shall:
- (a) have a household income below four hundred percent of the federal poverty level and qualify for the advanced premium tax credit under the federal Patient

Protection and Affordable Care Act; or

(b) meet all eligibility criteria for the advanced premium tax credit under the federal Patient Protection and Affordable Care Act except for household income requirements.

- B. If the federal Patient Protection and Affordable Care Act is repealed in full or in part by an act of congress, invalidated by the United States supreme court or administered by the United States department of health and human services in a way that alters eligibility criteria for the advanced premium tax credit in a manner that would cause significant coverage loss for New Mexico residents, the health care authority may promulgate rules to minimize loss of coverage by expanding eligibility to cover individuals at risk of losing coverage due to such changes, subject to available funds.
- C. The health care authority, in consultation with the superintendent, the New Mexico medical insurance pool, the department of health and stakeholder groups, including health care providers that serve uninsured residents, health insurance carriers and consumer advocacy groups, may update the plan for extending health care coverage access to uninsured New Mexico residents who do not qualify for federal premium assistance or, except by reason of incarceration, qualified health plans, through the New Mexico health

1	insurance exchange. The plan shall include:	
2	(1) details about health care benefits;	
3	(2) health care affordability criteria	
4	designed to reduce the amount that individuals pay in	
5	premiums and out-of-pocket medical expenses under the plan	
6	and that result in, to the greatest extent possible, health	
7	care costs comparable to costs for New Mexico residents for	
8	whom assistance is provided under Subsection A of this	
9	section; and	
10	(3) income eligibility parameters that	
11	prioritize eligibility for New Mexico residents with incomes	
12	under two hundred percent of the federal poverty level.	
13	D. On or before October 31, 2024 and each October	
14	31 thereafter, the health care authority shall submit a	
15	report to the legislative finance committee and the	
16	legislative health and human services committee that	
17	includes:	
18	(l) a summary of the affordability criteria	
19	implemented pursuant to Subsections A, B and C of this	
20	section;	
21	(2) the estimated number of uninsured New	
22	Mexico residents who enrolled in coverage following	
23	implementation of the affordability criteria pursuant to	
24	Subsections A, B and C of this section; and	
25	(3) the amount in reduced costs and coverage	HB 2/ec Page 6

1	assistance the initiatives provided in the current and	
2	previous calendar years by income level, county and coverage	
3	source."	
4	SECTION 3. EMERGENCYIt is necessary for the public	
5	peace, health and safety that this act take effect	
6	immediately	HB 2/ec
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