1	SENATE BILL 175
2	54TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2019
3	INTRODUCED BY
4	Cisco McSorley
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10	AN ACT
11	RELATING TO HEALTH CARE; BANNING THE COMPULSION OF HEALTH CARE
12	PRACTITIONERS.
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14	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:
15	SECTION 1. [NEW MATERIAL] COMPULSION OF HEALTH CARE
16	PRACTITIONERSPROHIBITION
17	A. Neither the state nor any political subdivision
18	of the state shall:
19	(1) require a licensed health care
20	practitioner to provide a patient with:
21	(a) information that is not: 1)
22	medically accurate information; or 2) medically appropriate for
23	the patient; or
24	(b) a medical service that is: 1) not
25	an evidence-based medical service; or 2) delivered in a manner
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2	(2) prohibit a licensed health care
3	practitioner from providing a patient with:
4	(a) information that is medically
5	accurate and that is medically appropriate for the patient; or
6	(b) an evidence-based medical service in
7	a manner that is appropriate for the patient.
8	B. Nothing in this section shall be construed to
9	alter existing professional standards of care or to abrogate
10	the duty of a licensed health care practitioner to meet the
11	applicable standard of care.
12	C. As used in this section:
13	(1) "evidence-based medical service" means
14	health care that is informed by the current best evidence in
15	making decisions regarding the care of an individual patient
16	and that integrates individual clinical expertise with the best
17	available external clinical evidence from systematic research;
18	(2) "health care practitioner" means an
19	individual who is licensed or otherwise authorized to provide
20	health care in the ordinary course of business;
21	(3) "medically accurate information" means
22	information that is:
23	(a) verified or supported by the weight
24	of peer-reviewed medical research, conducted in compliance with

that is not appropriate for the patient; or

accepted scientific methods;

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(b) recognized as correct and objective	re			
by leading medical organizations with relevant expertise; or				
(c) recommended by or affirmed in the				
medical practice guidelines of a nationally recognized				
accrediting organization; and				
(4) "medically appropriate" means consisten	t			

with applicable legal, health care and professional standards, a patient's circumstances or the patient's reasonably known wishes and beliefs.

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