LFC Requester: Eric Chenier

AGENCY BILL ANALYSIS - 2025 REGULAR SESSION

WITHIN 24 HOURS OF BILL POSTING, UPLOAD ANALYSIS TO

AgencyAnalysis.nmlegis.gov and email to billanalysis@dfa.nm.gov

(Analysis must be uploaded as a PDF)

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Check all that apply: 2.20.25 **Bill Number:** HB461 Original X Correction Amendment Substitute

Agency Name

Doreen Y. Gallegos, Meredith A.

and Code New Mexico Retiree Health Care

Sponsor: Dixon, Linda Serrato

Number: Authority 34300

Short Prior Authorization Process

Person Writing Mark Hayden

Exemptions Title:

Phone: 505-377-9012 Email mark.hayden@rhca.nm.gov

SECTION II: FISCAL IMPACT

APPROPRIATION (dollars in thousands)

Appropr	iation	Recurring	Fund Affected	
FY25	FY26	or Nonrecurring		

(Parenthesis () indicate expenditure decreases)

REVENUE (dollars in thousands)

	Recurring	Fund			
FY25	FY26	FY27	or Nonrecurring	Affected	

(Parenthesis () indicate revenue decreases)

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY25	FY26	FY27	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total						

(Parenthesis () Indicate Expenditure Decreases)

SECTION III: NARRATIVE

BILL SUMMARY

Synopsis: The Bill enacts a new section to the Prior Authorization Act to require health insurers to establish procedures to grant exemptions from their prior authorization process for health care professionals that meet certain criteria. The new procedures for health care professionals to receive an exemption are applying no sooner than 30 days after an evaluation period with a 90% approval of their prior authorization requests during that time frame. Health insurers shall provide a written approval or denial with explanation of the prior authorization exemption request no later than ten business days after receipt of the request. A prior exemption recission is allowed as outlined in the legislation including an independent review. The effective date for the provisions of this act is January 1, 2026.

FISCAL IMPLICATIONS

HB461 is expected to have minimal to no impact on New Mexico Retiree Health Care Authority (NMRHCA) as long as cost containment efforts that the insurers use like clinical guidelines, medical necessity determinations and utilization management are not completely bypassed. If a higher percentage of requests are approved without prior authorization, it may lead to increased utilization of certain services, which could raise overall healthcare costs. Currently, there are certain insurers who have already established "gold card" programs for health care professionals which already grant the "exemption process."

SIGNIFICANT ISSUES

It is critical to continue authorization standards and guidelines that help determine the appropriateness of a specific treatment or service to protect the patients. In addition, the bill does not speak to contracted versus non-contracted providers, as this mandate should clarify if the intent is to be made available for contracted in-network providers.

PERFORMANCE IMPLICATIONS

With an increase to the exemption process close monitoring will be critical with set standards and measures to evaluate the positive and negative impacts to patient care. The ability to exempt health care professionals from prior authorizations might expedite patient care and potentially improve outcomes or it could also lead to inappropriate service utilization.

ADMINISTRATIVE IMPLICATIONS

The criteria used to administer this program should be "universal" to assist the providers from additional barriers in getting authorizations and to avoid confusion of different processes or potential inequities in access to care for patients.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

SB263, SB207 and SB39 – are all requesting amendments to removing prior authorizations

TECHNICAL ISSUES

None.

OTHER SUBSTANTIVE ISSUES

None.

ALTERNATIVES

None.

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL The current processes would stay in place.

AMENDMENTS

None.