

AN ACT

RELATING TO INSURANCE; PROVIDING FOR PARITY FOR MENTAL
HEALTH INSURANCE; AMENDING AND ENACTING SECTIONS OF THE NMSA
1978.

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

Section 1. A new Section 59A-22-2.1 NMSA 1978 is
enacted to read:

"59A-22-2.1. PARITY FOR MENTAL HEALTH INSURANCE. --

A. An insurer, including a health maintenance organization, nonprofit health care plan or fraternal benefit society that offers a group health plan or an individual health plan, shall not impose treatment limitations or financial requirements on the coverage of mental health services if similar limitations or requirements are not imposed on coverage of services for other conditions.

B. An insurer, including a health maintenance organization, nonprofit health care plan or fraternal benefit society that offers a group health care plan or an individual health care plan, may:

(1) require pre-admission screening prior to the authorization of mental health services if covered under a plan;

(2) apply other limitations that restrict coverage for mental health services to those that are

medically necessary; and

(3) exclude mental health services from the plan.

C. For purposes of this section, "mental health services" means mental health services as defined under the terms of the plan or coverage but does not include services with respect to treatment of substance abuse, chemical dependency or gambling addiction. "

Section 2. Section 59A-23-4 NMSA 1978 (being Laws 1984, Chapter 127, Section 463, as amended by Laws 1997, Chapter 7, Section 2 and by Laws 1997, Chapter 249, Section 2 and by Laws 1997, Chapter 250, Section 2 and also by Laws 1997, Chapter 255, Section 2) is amended to read:

"59A-23-4. OTHER PROVISIONS APPLICABLE. --

A. No blanket or group health insurance policy or contract shall contain any provision relative to notice or proof of loss or the time for paying benefits or the time within which suit may be brought upon the policy that in the superintendent's opinion is less favorable to the insured than would be permitted in the required or optional provisions for individual health insurance policies as set forth in Chapter 59A, Article 22 NMSA 1978.

B. The following provisions of Chapter 59A, Article 22 NMSA 1978 shall also apply as to Chapter 59A, Article 23 NMSA 1978 and blanket and group health insurance contracts:

(1) Section 59A-22-1 NMSA 1978, except Subsection C of that section;

(2) Section 59A-22-2.1 NMSA 1978; and

(3) Section 59A-22-32 NMSA 1978.

C. The following provisions of Chapter 59A, Article 22 NMSA 1978 shall also apply as to group health insurance contracts:

(1) Section 59A-22-33 NMSA 1978;

(2) Section 59A-22-34 NMSA 1978;

(3) Section 59A-22-34.1 NMSA 1978;

(4) Section 59A-22-35 NMSA 1978;

(5) Section 59A-22-36 NMSA 1978;

(6) Section 59A-22-39 NMSA 1978;

(7) Section 59A-22-34.3 NMSA 1978;

(8) Section 59A-22-39.1 NMSA 1978;

(9) Section 59A-22-40 NMSA 1978; and

(10) Section 59A-22-41 NMSA 1978. "

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