1	HOUSE JUDICIARY COMMITTEE SUBSTITUTE FOR HOUSE BILL 586
2	57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025
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10	AN ACT
11	RELATING TO THE PUBLIC PEACE, HEALTH, SAFETY AND WELFARE;
12	AMENDING THE HEALTH CARE CONSOLIDATION OVERSIGHT ACT TO REQUIRE
13	REVIEW OF PROPOSED TRANSACTIONS THAT INVOLVE MERGERS,
14	ACQUISITIONS OR OTHER ACTIONS THAT CHANGE CONTROL OF A HOSPITAL
15	OR CERTAIN HEALTH CARE PROVIDER ORGANIZATIONS; BROADENING THE
16	DEFINITION OF "TRANSACTION", OVER WHICH THE HEALTH CARE
17	AUTHORITY HAS REVIEW AUTHORITY; PROVIDING WHISTLEBLOWER
18	PROTECTION; PROVIDING FOR ENFORCEMENT OF THE ACT; PRESCRIBING
19	ADMINISTRATIVE PENALTIES; REPEALING THE DELAYED REPEAL OF THE
20	ACT.
21	
22	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:
23	SECTION 1. Section 59A-63-1 NMSA 1978 (being Laws 2024,
24	Chapter 40, Section 1) is recompiled as Section 24A-9-1 NMSA
25	1978 and is amended to read:
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1	"24A-9-1. SHORT TITLE[This act] Chapter 24A, Article 9
2	<u>NMSA 1978</u> may be cited as the "Health Care Consolidation
3	Oversight Act"."
4	SECTION 2. Section 59A-63-2 NMSA 1978 (being Laws 2024,
5	Chapter 40, Section 2) is recompiled as Section 24A-9-2 NMSA
6	1978 and is amended to read:
7	"24A-9-2. DEFINITIONSAs used in the Health Care
8	Consolidation Oversight Act:
9	A. "acquisition" means [an agreement or activity
10	the consummation of which results in a person acquiring,
11	directly or indirectly, the control of a hospital in New Mexico
12	and includes the acquisition of voting securities, membership
13	interests, equity interests or assets] the direct or indirect
14	purchase or other procurement in any manner, including through
15	<u>a lease, a license, a transfer, an exchange, an option, a</u>
16	proxy, a conveyance or a joint venture, of all or substantially
17	all of the assets, equity or operations of a person;
18	B. "affiliation" means a business arrangement in
19	which one person, directly or indirectly, is controlled by, is
20	under common control with or controls another person;
21	C. "authority" means the health care authority
22	[department];
23	D. "control" means the power to direct or cause the
24	direction of the management and policies of a hospital,
25	[whether] directly or indirectly, including through the
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ownership of voting securities, through licensing, <u>lease</u> or franchise agreements or by contract other than a commercial contract for goods or nonmanagement services, unless the power is the result of [an official position with] <u>a public</u> <u>appointment, general election</u> or corporate office held by an individual;

F. "essential services" means health care services
covered by the state medicaid program, health care services
that are required to be included in health plans pursuant to
state or federal law and health care services that are required
to be included in qualified health plans offered through the
New Mexico health insurance exchange;

F. "health care provider" means a person [qualified or licensed] certified, licensed, registered or otherwise authorized under state law to perform or provide health care services <u>in New Mexico</u>;

G. "health care provider organization" means a person that is in the business of delivering or managing the delivery of health care services, whether incorporated or not, including physician organizations, physician-hospital organizations, independent practice associations, provider networks, accountable care organizations, dental services organizations and any other organization that contracts with health insurers for payment for health care services but does not include hospitals;

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1 [G.] H. "health insurer" means a person required to 2 be licensed or subject to the <u>New Mexico</u> Insurance Code or the 3 insurance laws of any other state in connection with the 4 business of health insurance, [or health care] excluding 5 insurance producers; 6 [H.] I. "hospital" means a hospital licensed by the 7 [department of health] authority or its successor health 8 facility licensing agency, but "hospital" does not include a 9 state university teaching hospital or a state-owned special 10 hospital; 11 J. "independent health care practice" means a 12 health care provider organization entirely owned or controlled 13 by one or more health care providers who are individuals and 14 who provide health care services through the health care 15 provider organization to patients in New Mexico; 16 [1.] K. "management services organization" means a 17 person that provides all or substantially all of the 18 administrative or management services under contract with a 19 hospital, including administering contracts with health plans, 20 third-party administrators and pharmacy benefit managers, on 21 behalf of the hospital; 22 [J.] L. "office" means the office of superintendent 23 of insurance; [K.] M. "party" means a person [taking part in] 24 25 that is a party to a transaction subject to the Health Care .231826.5 - 4 -

1	Consolidation Oversight Act;
2	[L.] <u>N.</u> "person" means an individual, association,
3	organization, partnership, firm, syndicate, trust, corporation
4	or other legal entity;
5	0. "secretary" means the secretary of health care
6	authority; and
7	[M. "superintendent" means the superintendent of
8	insurance; and
9	N.] P. "transaction" means any of the following:
10	(1) a merger of a hospital in New Mexico with
11	another hospital or with a person controlling a hospital;
12	(2) an acquisition of one or more hospitals <u>or</u>
13	<u>a person controlling a hospital</u> in New Mexico;
14	(3) any affiliation or contract or other
15	agreement that results in a change of control of a hospital in
16	New Mexico, including with a management services organization
17	or health insurer;
18	(4) a formation of a new corporation,
19	partnership, joint venture, trust, parent organization or
20	management services organization that results in a change of
21	control of an existing hospital in New Mexico; [and]
22	(5) a sale, <u>mortgage</u> , purchase, lease, new
23	affiliation or [any] <u>other</u> agreement that results in <u>a change</u>
24	<u>of</u> control of a hospital in New Mexico <u>or the real estate on</u>
25	which the hospital is located; and
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1	(6) an acquisition of one or more independent
2	health care practices by a health care provider organization
3	that is owned or affiliated with a health insurer."
4	SECTION 3. Section 59A-63-3 NMSA 1978 (being Laws 2024,
5	Chapter 40, Section 3) is recompiled as Section 24A-9-3 NMSA
6	1978 and is amended to read:
7	"24A-9-3. APPLICABILITYPROVISIONS ADDITIONALCONTROL
8	PRESUMPTIONS
9	A. The oversight power of the [office] <u>authority</u>
10	pursuant to the Health Care Consolidation Oversight Act applies
11	to proposed transactions [that involve a New Mexico hospital].
12	B. Being subject to the Health Care Consolidation
13	Oversight Act does not preclude or negate any person regulated
14	pursuant to the Insurance Holding Company Law.
15	C. Control is presumed to exist if a person,
16	directly or indirectly, owns, controls, holds fifteen percent
17	or more of the power to vote or holds proxies representing
18	fifteen percent or more of the voting securities of any other
19	person. The presumption may be rebutted by a showing in the
20	manner provided by Section 59A-37-19 NMSA 1978 that control
21	does not in fact exist."
22	SECTION 4. Section 59A-63-4 NMSA 1978 (being Laws 2024,
23	Chapter 40, Section 4) is recompiled as Section 24A-9-4 NMSA
24	1978 and is amended to read:
25	"24A-9-4. CONFIDENTIALITY <u>Except for the information</u>

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1 provided pursuant to Paragraphs (2) through (6) of Subsection E 2 of Section 24A-9-6 NMSA 1978, all documents, materials or other 3 information in the possession or control of the [office] 4 authority that are obtained by or disclosed to the [office or] authority, the authority's contracted experts, the attorney 5 6 general, the [authority] office or any other governmental 7 entity in the course of a review under the Health Care 8 Consolidation Oversight Act are confidential." 9 SECTION 5. Section 59A-63-5 NMSA 1978 (being Laws 2024, 10 Chapter 40, Section 5) is recompiled as Section 24A-9-5 NMSA 11 1978 and is amended to read: 12 "24A-9-5. TIMING OF REVIEW OF NOTICE AND TOLLING.--13 A. A notice of a proposed transaction shall be 14 deemed complete by the [office] authority on the date when all 15 the information required by the Health Care Consolidation 16 Oversight Act [or requested by the office] is submitted by all the parties to the transaction, as applicable. 17 18 B. Within thirty days after the notice of a 19 proposed transaction is filed, the authority shall notify the 20 parties in writing if the notice is complete or, if the notice is incomplete, specify what additional information must be 21 22 submitted. 23

[B.] <u>C.</u> Should the scope of the proposed transaction be significantly modified from that outlined in the initial notice, the time periods set out in the Health Care .231826.5

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Consolidation Oversight Act shall be restarted by the [office]
 <u>authority</u>.

3 [C.] D. The time periods shall be tolled during any
4 time in which the [office] authority has requested and is
5 awaiting further information from the parties to a transaction
6 necessary to complete its review."

SECTION 6. Section 59A-63-6 NMSA 1978 (being Laws 2024, Chapter 40, Section 6) is recompiled as Section 24A-9-6 NMSA 1978 and is amended to read:

"24A-9-6. NOTICE OF PROPOSED TRANSACTION--GENERAL PROVISIONS--REQUIREMENTS--CONSULTATIONS--EXPERTS--PAYMENT OF COSTS.--

A. At least one person that is a party to a proposed transaction shall submit to the [office] authority a written notice of the proposed transaction in the form and manner prescribed by the [office] authority. The parties shall pay the reasonable costs and expenses incurred by the [office] authority in the performance of the [office's or] authority's duties pursuant to the Health Care Consolidation Oversight Act for costs associated with the [office's] authority's contracts with experts, unless determined otherwise by the [superintendent] secretary. The [office] authority shall notify parties before any costs are incurred when a transaction review requires the use of outside experts, including the estimated cost of their services.

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1 Upon receipt of a complete notice of a proposed Β. 2 transaction, the [office] authority shall determine if the 3 transaction is urgently necessary to maintain the solvency of a 4 hospital or if there is an emergency that threatens the 5 continued provision of immediate health care services. In such 6 circumstances, the [office] authority may agree to an immediate 7 approval of a transaction with or without conditions. 8 Entry into a binding agreement before a C. 9 transaction is effectuated is not a violation of the Health 10 Care Consolidation Oversight Act if the transaction remains subject to regulatory review and approval. 11 12 If a party to the proposed transaction is a D. health insurer, the notice shall be submitted as an addendum to 13 14 any filing required by Sections 59A-37-4 through 59A-37-10 NMSA 1978. 15 16 Ε. The notice of the proposed transaction shall 17 include: [a list of the parties] the terms of the 18 (1) 19 proposed transaction and copies of all transaction agreements 20 between any of the parties; (2) a list of the parties and business 21 22 addresses;

[(2)] (3) a statement describing the proposed transaction, the goals of the proposed transaction and whether and how the proposed transaction affects health care services .231826.5 - 9 -

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1 in New Mexico;

2 [(3)] <u>(4)</u> the geographic service area [of any 3 hospital] affected by the proposed transaction; 4 $\left[\frac{4}{1}\right]$ (5) a description of the groups or 5 individuals likely to be affected by the transaction; and 6 [(5)] (6) a summary of the health care 7 services currently provided by any of the parties and any 8 health care services that will be added, reduced or eliminated, 9 including an explanation of why any services will be reduced or 10 eliminated in the service area in which they are currently 11 provided. 12 F. The [office shall] authority may consult with 13 the [authority] office about the potential effect of the 14

proposed transaction and incorporate the [authority's] office's recommendations into the [office's] authority's final determination.

G. The [office] <u>authority</u> may retain actuaries, accountants, attorneys or other professionals who are qualified and have expertise in the type of transaction under review as necessary to assist the [office] <u>authority</u> in conducting its review of the proposed transaction.

H. The parties shall not effectuate a transaction without the written approval of the [superintendent] secretary. The submitting party shall notify the [office] authority in a form and manner prescribed by the [office] authority when the .231826.5

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1 transaction has been effectuated.

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2	I. Parties to a proposed transaction may request a
3	pre-notice conference to determine if they are required to file
4	a notice or to discuss the potential extent of the review.
5	J. The authority shall provide all notices and
6	documents received from any of the parties to a proposed
7	transaction to the office and the attorney general. The
8	attorney general may provide input to the authority about the
9	potential effect of a proposed transaction relative to the
10	Antitrust Act, the Unfair Practices Act or other state or
11	<u>federal law.</u>
12	K. Nothing in the Health Care Consolidation
13	Oversight Act shall amend, modify, abrogate or otherwise affect
14	the applicability or obligations of a party to a transaction or
15	acquisition under any other state or federal law. The filing
16	obligations under that act are in addition to any other
17	obligation that may be required under other laws."
18	SECTION 7. A new section of the Health Care Consolidation
19	Oversight Act, Section 24A-9-6.1 NMSA 1978, is enacted to read:
20	"24A-9-6.1. [<u>NEW MATERIAL</u>] POSTING PUBLIC INFORMATION
21	PUBLIC COMMENTPUBLIC COMMENT FORUMS
22	A. Within ten days of receipt of a complete notice
23	of a proposed transaction, the authority shall post the
24	information provided pursuant to Paragraphs (2) through (6) of
25	Subsection E of Section 24A-9-6 NMSA 1978.

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1 Β. The authority shall publish a statement briefly 2 describing a notice of proposed transaction in at least one 3 newspaper of general circulation or other media that is 4 prevalent in the area affected by the transaction. The 5 authority shall also provide the statement to the following in the affected area: 6 7 municipal and county officials; (1) 8 county health councils; (2) 9 Indian nations, tribes and pueblos; (3) 10 military installation commands; (4) 11 (5) state legislators; 12 the state's congressional delegation; and (6) 13 (7) any labor organization that represents 14 employees of the impacted hospital or health care provider 15 organization. 16 C. With respect to website, newspaper and other 17 disseminations and communications described in Subsection B of 18 this section, the authority shall provide details on how the 19 public can provide comments and offer multiple methods to 20 provide comments on a notice of a proposed transaction by 21 telephone or in writing by mail or electronic mail, anonymously 22 or by a third party, and such methods shall provide 23 opportunities to submit comments in languages other than 24 English. 25 If the authority conducts a review, at least one D.

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public comment forum shall be held in the New Mexico service area or areas of the hospital or health care provider organization that is party to or the subject of the proposed transaction.

At least ten calendar days prior to the public Ε. comment forum, the authority shall post to the authority's website information about the public comment forum and a link 8 on the website to publicly available materials relevant to the proposed transaction. The forum notice and the materials shall be in a format that is easy to find and easy to read and shall include information on how to submit comments.

F. The authority shall publish a notice of a public comment forum in at least one newspaper of general circulation or other media that is prevalent in the area affected by the transaction and provide the notice to the officials and other persons specified in Subsection B of this section.

G. Public comment on a proposed transaction that is subject to review shall be provided in the same manner as provided in Subsection C of this section.

н. The authority shall consider public comments and input received during the public comment forum on a proposed transaction in the authority's determination."

Section 59A-63-7 NMSA 1978 (being Laws 2024, SECTION 8. Chapter 40, Section 7) is recompiled as Section 24A-9-7 NMSA 1978 and is amended to read:

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1 "24A-9-7. REVIEW OF PROPOSED TRANSACTION.--2 A. Within one hundred twenty days of receiving a 3 complete notice of a proposed transaction, the [office] 4 authority shall complete a review, confer with the [authority] 5 office and either: 6 (1) approve the proposed transaction; 7 approve the proposed transaction with (2) 8 conditions; or 9 disapprove the proposed transaction. (3) 10 The [superintendent] secretary shall notify the Β. 11 submitting party in writing of the [office's] authority's 12 determination and the reasons for the determination. 13 The review period may be extended if the parties C. 14 agree to an extension. 15 In conducting a review of a proposed D. 16 transaction, the [office] authority may consider the likely 17 effect in New Mexico of the proposed transaction on: 18 the potential reduction or elimination in (1) 19 access to essential services; 20 the availability, accessibility and (2) 21 quality of health care services to [any community] the area 22 affected by the transaction; 23 the health care market share of a party (3) 24 and whether the transaction may foreclose competitors of a 25 party from a segment of the market or otherwise increase .231826.5 - 14 -

1 barriers to entry in a health care market; 2 changes in practice restrictions for (4) 3 [licensed] health care providers who work at the hospital; 4 (5) patient costs, including premiums and out-5 of-pocket costs; 6 (6) health care provider networks; [and] 7 the potential for the proposed transaction (7) to affect health outcomes for New Mexico residents; and 8 9 (8) current and future wages, benefits, working conditions, employment protections and restrictions and 10 other terms and conditions of employment for employees of 11 12 hospitals or health care provider organizations that are 13 parties to or the subject of the proposed transaction. 14 Ε. The [office] authority shall approve the proposed transaction after the [comprehensive] review if the 15 [office] authority determines that: 16 17 (1) the parties to the proposed transaction have demonstrated that the transaction will benefit the public 18 19 by: 20 reducing the growth in patient (a) costs, including premiums and out-of-pocket costs; or 21 22 maintaining or increasing access to (b) services, especially in medically underserved areas; 23 the proposed transaction will improve 24 (2) 25 health outcomes for New Mexico residents; and .231826.5 - 15 -

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1	(3) there is no substantial likelihood of:
2	(a) a significant reduction in the
3	availability, accessibility, affordability or quality of care
4	for patients and <u>other</u> consumers of health care services; or
5	(b) anti-competitive effects from the
6	proposed transaction that outweigh the benefits of the
7	transaction."
8	SECTION 9. Section 59A-63-8 NMSA 1978 (being Laws 2024,
9	Chapter 40, Section 8) is recompiled as Section 24A-9-8 NMSA
10	1978 and is amended to read:
11	"24A-9-8. POST-TRANSACTION OVERSIGHT
12	A. The person that acquired control over the
13	hospital or independent health care practice through an
14	approved or conditionally approved transaction shall submit
15	reports to the [office] <u>authority</u> and the [authority] <u>office</u> in
16	the form and manner prescribed by the [office] <u>authority</u>
17	annually for three years after approval or conditional
18	approval. Conditions to an approval shall remain in effect for
19	no longer than three years from the date of the conditional
20	approval.
21	B. Reports shall:
22	(1) describe compliance with conditions placed
23	on the transaction, if any;
24	(2) describe the growth, decline and other
25	changes in services provided by the person; and
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1 provide analyses of cost trends and cost (3) 2 growth trends of the hospital." 3 SECTION 10. A new section of the Health Care Consolidation Oversight Act, Section 24A-9-9 NMSA 1978, is 4 5 enacted to read: 6 "24A-9-9. [<u>NEW MATERIAL</u>] ENFORCEMENT AND ADMINISTRATIVE 7 FINES.--8 The authority shall enforce the provisions of Α. 9 the Health Care Consolidation Oversight Act. 10 A transaction that is covered by Section 24A-9-3 Β. 11 NMSA 1978 shall not be effectuated in New Mexico without the 12 secretary's written determination that no review is needed or 13 without the written approval, with or without conditions, of 14 the secretary following review. 15 C. A person that violates a material or substantive 16 provision of the Health Care Consolidation Oversight Act or an 17 order or rule of the authority issued or adopted in accordance 18 with that act may be assessed an administrative fine by the 19 secretary of not more than five thousand dollars (\$5,000) for 20 each instance of violation unless the violation is willful and 21 intentional, in which case the secretary may assess a fine of 22 not more than ten thousand dollars (\$10,000) for each 23 violation, except as provided in Paragraph (2) of Subsection D of this section. For purposes of calculating the fine, the 24 25 secretary shall determine what constitutes an "instance of .231826.5

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1 violation" based on: 2 the nature of the violation, including (1) 3 whether it is on a per-day, per-patient, per-instance or other 4 basis: 5 the nature of the proposed transaction and (2) 6 the circumstances of the parties involved; 7 the potential impact on the availability, (3) 8 accessibility, affordability or quality of care for patients of 9 health care services in New Mexico; and 10 (4) any anticompetitive effects from the 11 proposed transaction. 12 In the event of a failure to provide the D. required notice of proposed transaction, in addition to the 13 14 imposition of administrative fines, the secretary may: 15 require the parties to the unnoticed (1) 16 transaction to submit a notice of proposed transaction to allow 17 the authority to complete a preliminary review and: 18 (a) determine if the transaction should 19 be subject to a review; and 20 if needed, conduct such review to (b) 21 determine if the transaction should: 1) remain effectuated; 2) 22 remain effectuated with conditions; or 3) be disapproved; and in the event of a willful and intentional 23 (2) failure to provide the notice of proposed transaction, impose 24 25 an administrative fine of not more than fifteen thousand .231826.5

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1 dollars (\$15,000) per day from the date on which the notice was 2 required to be submitted to the authority to the date of 3 issuance of an order approving, approving with conditions or 4 disapproving the transaction.

E. Money collected from the imposition of an
administrative fine pursuant to the Health Care Consolidation
Oversight Act shall be deposited in the state treasury to the
credit of the current school fund as provided by Article 12,
Section 4 of the constitution of New Mexico."

SECTION 11. A new section of the Health Care Consolidation Oversight Act, Section 24A-9-10 NMSA 1978, is enacted to read:

"24A-9-10. [<u>NEW MATERIAL</u>] ACT NOT EXCLUSIVE--ATTORNEY GENERAL.--Nothing in the Health Care Consolidation Oversight Act limits the authority of the attorney general to protect consumers in the health care market or to protect the economy of the state or any significant part of the state insofar as health care is concerned under any state or federal law. The authority of the attorney general to maintain competitive markets and prosecute state and federal antitrust and unfair competition violations shall not be narrowed, abrogated or otherwise altered by that act."

SECTION 12. A new section of the Health Care Consolidation Oversight Act, Section 24A-9-11 NMSA 1978, is enacted to read:

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1	"24A-9-11. [<u>NEW MATERIAL</u>] JURISDICTIONNew Mexico
2	courts shall have personal jurisdiction over the parties to a
3	transaction subject to the provisions of the Health Care
4	Consolidation Oversight Act, including the parties to the
5	transaction and any person affiliated with a party."
6	SECTION 13. A new section of the Health Care
7	Consolidation Oversight Act, Section 24A-9-12 NMSA 1978, is
8	enacted to read:
9	"24A-9-12. [<u>NEW MATERIAL</u>] WHISTLEBLOWER PROTECTION
10	POLICY REQUIREDRETALIATION PROHIBITEDPENALTIES
11	A. As used in this section:
12	(1) "entity" means hospitals, management
13	services organizations and health care provider organizations
14	that are owned or affiliated with health insurers;
15	(2) "good faith" means that a reasonable basis
16	exists in fact as evidenced by the facts available;
17	(3) "retaliatory action" means any
18	discriminatory or adverse action taken by an entity against a
19	whistleblower, including termination, discharge, demotion,
20	suspension, harassment or limitation on access to health care
21	services;
22	(4) "unlawful or improper act" means a
23	practice, procedure, action or failure to act on the part of an
24	entity that violates the Health Care Consolidation Oversight
25	Act or the authority's or attorney general's ability to
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2 "whistleblower" means a health care (5) 3 provider, officer, employee, contractor, subcontractor or 4 authorized agent of an entity who reveals information about an 5 unlawful or improper act by the entity. 6 Β. An entity shall not take any retaliatory action 7 against a whistleblower who: 8 discloses to the authority, the attorney (1) 9 general, the office or any other state, local or federal 10 governmental body information about an action or a failure to act that the whistleblower believes in good faith constitutes 11 12 an unlawful or improper act; (2) provides information to or testifies 13 14 before a public body as part of an investigation, hearing or inquiry into an unlawful or improper act; or 15 16 (3) objects to or refuses to participate in an bracketed material] = delete 17 activity, policy or practice that the whistleblower believes in good faith constitutes an unlawful or improper act. 18 19 C. Every entity shall adopt, promulgate and enforce 20 a whistleblower protection policy that, at a minimum, meets the requirements of Subsection B of this section to protect 21 whistleblowers from any form of retaliatory action by the 22 entity. The policy shall be posted at each entity's workplace, 23 published on the entity's website and given, by either written 24 or electronic communication, to every officer, employee, 25

exercise authority pursuant to that act; and

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1 contractor or other agent of the entity.

Except as otherwise provided in the Health Care D. 3 Consolidation Oversight Act and in addition to any criminal charges or civil suits that may be brought against an entity for either an unlawful or improper act or retaliatory actions, the secretary may assess an administrative fine not to exceed ten thousand dollars (\$10,000) on an entity that the secretary 8 finds has engaged in retaliatory action. Each retaliatory action or each day of violation may be considered a separate violation. If the secretary finds the entity willfully or repeatedly violated or continues to violate the prohibition against retaliatory actions, the secretary may assess an administrative fine not to exceed one hundred thousand dollars (\$100,000) for each violation.

Ε. The secretary shall give notice to the entity of the secretary's intention to assess an administrative fine and specify the findings of retaliatory action. The entity may request a hearing, which shall be conducted as provided in the Administrative Procedures Act. The secretary shall make final findings and decisions, which may include the time in which the entity must correct an unlawful or improper violation, and send a copy by registered mail to the entity. The decision of the secretary is a final agency action and may be appealed to the district court as provided in Section 39-3-1.1 NMSA 1978. The entity has thirty days in which to pay the administrative fine.

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F. An entity that fails to stop or correct a retaliatory action within the period allowed for its correction, which period shall not begin to run until the date of the final order or appeal, if applicable, may be assessed a separate administrative fine not to exceed fifteen thousand dollars (\$15,000) for each day during which the failure to stop or correct retaliatory action continues past the deadline for stopping or correcting the action.

9 G. Administrative fines shall be deposited in the
10 state treasury to the credit of the current school fund as
11 required by Article 12, Section 4 of the constitution of New
12 Mexico.

H. The rights and remedies provided in this section shall not be waived by an agreement, policy form or condition of employment, including by an arbitration agreement.

I. Nothing in this section shall be deemed to diminish the rights, privileges or remedies of a whistleblower or other person pursuant to any federal or state law or pursuant to any collective bargaining agreement."

SECTION 14. A new section of the Health Care Consolidation Oversight Act, Section 24A-9-13 NMSA 1978, is enacted to read:

"24A-9-13. [<u>NEW MATERIAL</u>] AUTHORITY--HOSPITAL OWNERSHIP--ANNUAL POSTING ON WEBSITE.--The authority shall post hospital ownership annually on the authority's website and at .231826.5

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<u>underscored material = new</u> [bracketed material] = delete

	1	any point in which there is a change of ownership of a hospital
	2	or the real estate on which a hospital stands."
	3	SECTION 15. REPEALLaws 2024, Chapter 40, Section 9 is
	4	repealed.
	5	SECTION 16. EFFECTIVE DATEThe effective date of the
	6	provisions of this act is July 1, 2025.
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