HOUSE BILL 968

46TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2003

INTRODUCED BY

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FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO HEALTH; CREATING A HEALTH CARE PROVIDER LICENSING AND CREDENTIALING TASK FORCE UNDER THE NEW MEXICO HEALTH POLICY COMMISSION; PROVIDING FOR DUTIES AND MEMBERSHIP; PROVIDING FOR AN INFORMATION TECHNOLOGY PROJECT MANAGER; AUTHORIZING THE USE OF CERTAIN FUNDS.

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

Section 1. [NEW MATERIAL] FINDINGS.--The legislature finds that licensed professionals in New Mexico, particularly those in the health care field, are severely burdened by multiple layers of mandatory credentialing obligations, costing them, their patients and third-party payers needless expense and wasted time. Further, the legislature notes that New Mexico's health care licensure provisions may be contributing to harmful delays in access to health care throughout the

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state, particularly in areas with acute professional shortages.

The legislature believes that efforts begun pursuant to House

Joint Memorial 61 of the second session of the forty-fifth

legislature and the continued cooperation among respective

licensing boards, the regulation and licensing department,

various statewide professional associations and societies,

insurers and national accrediting and standard setting

organizations will produce a system satisfactory to all

concerned while maintaining the primary goal of ensuring the

health and safety of New Mexico residents.

Section 2.   [NEW MATERIAL] TASK FORCE CREATED--

RESPONSIBILITIES--PARTICIPANTS--FUNDING.--

A.   The "health care providers licensing and

credentialing task force" is created under the direction of the

New Mexico health policy commission to study and make

recommendations for the consolidation and simplification of the

health care licensure processes. The task force shall make

recommendations for the establishment of a web site portal for

licensure to facilitate and complement or replace the present

system conducted by individual health care provider boards and

for a central database for credentialing information to

simplify and eliminate duplication of effort.

B.   The task force shall study and make

recommendations to the superintendent of insurance on health

care provider credentialing issues and obstacles to one-time

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1   efforts by providers to meet all necessary requirements to

2   practice independently or as a provider for any appropriately

3   licensed health care organization or facility.   The task force

4   shall study and recommend, if practicable, use of credentialing

5   expertise developed by a statewide association of hospitals.

6   C.   The task force shall include participation by

7   the New Mexico health policy commission; the department of

8   health; the New Mexico board of medical examiners; the board of

9   nursing; other health care provider boards; the regulation and

10   licensing department; the insurance division of the public

11   regulation commission; the human services department; the

12   office of the attorney general; other affected state agencies;

13   members of the health care industry, including statewide

14   associations and societies representing providers, hospitals

15   and other affected facilities; insurers; and other third-party

16   payers as well as health care advocates and members of the

17   public.

18   D.   The New Mexico health policy commission,

19   together with the New Mexico board of medical examiners and the

20   board of nursing, shall hire an information technology project

21   manager to work under the commission to design, implement and

22   maintain a web site portal for licensure and a central database

23   for credentialing of health care providers.

24   Section 3.   [NEW MATERIAL] SUPERINTENDENT OF INSURANCE--

25   DUTIES.--The superintendent of insurance shall adopt rules

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1   pursuant to the health care providers licensing and

2   credentialing task force recommendations to ensure that third-

3   party payer credentialing requirements facilitate New Mexico

4   providers' ability to satisfy all credentialing requirements,

5   including those by a national committee on quality assurance,

6   as efficiently as possible. Rules adopted shall require

7   primary credential verification no more frequently than every

8   three years and shall be scheduled to coincide with national

9   accrediting organizations and hospital and managed care

10   organizations' credentialing requirements.

11   Section 4. [NEW MATERIAL] HUMAN SERVICES DEPARTMENT--

12   MANAGED CARE CONTRACT CREDENTIALING PROVISIONS.--The human

13   services department shall negotiate with medicaid contractors

14   to ensure that the contractors' credentialing requirements are

15   coordinated with other credentialing processes required of

16   individual providers.

17   Section 5. A new Section 61-3-27.1 NMSA 1978 is enacted

18   to read:

19   "61-3-27.1. [NEW MATERIAL] BOARD OF NURSING FUND--

20   AUTHORIZED USE.--Pursuant to Subsection D of Section 61-3-27

21   NMSA 1978, the board shall authorize expenditures from

22   unexpended and unencumbered cash balances in the board of

23   nursing fund to support an information technology project

24   manager to develop, implement and maintain a web site portal

25   for licensure and a central database for credentialing of

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health care providers."

Section 6. A new Section 61-6-31.1 NMSA 1978 is enacted

to read:

"61-6-31.1.   [NEW MATERIAL] BOARD OF MEDICAL EXAMINERS

FUND--AUTHORIZED USE.--Pursuant to Subsection D of Section

61-6-31 NMSA 1978, the board shall authorize expenditures from

unexpended and unencumbered cash balances in the board of

medical examiners fund to support an information technology

project manager to develop, implement and maintain a web site

portal for licensure and a central database for credentialing

of health care providers."

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underscored material = new
[bracketed material] = delete

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