

AN ACT

RELATING TO HEALTH CARE; AMENDING SECTIONS OF THE PUBLIC ASSISTANCE ACT TO REQUIRE REPORTING OF CERTAIN MEDICAL ASSISTANCE DATA.

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

Section 1. Section 27-2-1 NMSA 1978 (being Laws 1973, Chapter 376, Section 1) is amended to read:

"27-2-1. SHORT TITLE.--Sections 27-2-1 through 27-2-34 NMSA 1978 may be cited as the "Public Assistance Act"."

Section 2. Section 27-2-2 NMSA 1978 (being Laws 1973, Chapter 376, Section 2, as amended) is amended to read:

"27-2-2. DEFINITIONS.--As used in the Public Assistance Act:

A. "department" means the human services department;

B. "board" means the human services department;

C. "director" means the secretary of human services;

D. "local office" means the county or district office of the human services department;

E. "public welfare" or "public assistance" means any aid or relief granted to or on behalf of an eligible person under the Public Assistance Act and regulations issued pursuant to that act;

F. "applicant" means a person who has applied for assistance or services under the Public Assistance Act;

G. "recipient" means a person who is receiving assistance or services under the Public Assistance Act;

H. "federal act" means the federal Social Security Act, as may be amended from time to time, and regulations issued pursuant to that act;

I. "secretary" means the secretary of human services;

J. "medical assistance program" means health care coverage or assistance that the department provides pursuant to the Public Assistance Act; and

K. "report" means to post prominently and make easily accessible on the department's internet web site."

Section 3. A new section of the Public Assistance Act is enacted to read:

"REQUIRED REPORTING.--

A. The department shall report within thirty days of filing any plans, state plan amendments, waiver proposals or amendments it has filed and any documentation of any public input that was obtained as required by the United States department of health and human services centers for medicare and medicaid services for any medical assistance program. The department shall also report any correspondence, reports or reviews with the centers for medicare and medicaid services

that the director of the medical assistance division of the department deems to have a significant impact on any medical assistance program.

B. The department shall report annually and within thirty days of any change in the per-member per-month capitation rate by rate cohort for each contract that the department enters into to provide medical assistance pursuant to the Public Assistance Act. When the individual contracts that the department enters into offer rates that differ from each other, the average capitation shall be reported for each rate cohort and not the rates pursuant to each of the individual contracts. The department shall report annually the average per-member per-month expenditure by rate cohort for medical assistance programs directly administered by the department. The department shall report annually for each medical assistance program the percentage of total expenditures that the department and the person with whom it contracts spend on administrative expenses, exclusive of health care services provided to individual members. The department shall define "administrative expenses" when reporting on administrative expenses.

C. The department shall report on a monthly basis:

(1) enrollment and demographic data on individuals in each medical assistance program, which is routinely collected and tabulated by the department; and

(2) data on employer involvement in medical assistance, where applicable, including the number of participating employers, their size by number of employees, their geographic location by county and their financial contributions.

D. The department shall report on a quarterly basis budget projections and actual expenditures by program and all actuarial analyses related to medical assistance programs.

E. The department shall report annually all information that is currently provided to the department or routinely collected on utilization, quality and performance data for each medical assistance program."