

1 SENATE JOINT MEMORIAL 1

2 **50TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2011**

3 INTRODUCED BY

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10 A JOINT MEMORIAL

11 REQUESTING THE CONTINUATION OF THE HEALTH CARE REFORM WORKING
12 GROUP CONVENED TO MAKE RECOMMENDATIONS REGARDING THE
13 IMPLEMENTATION OF THE PATIENT PROTECTION AND AFFORDABLE CARE
14 ACT.

15
16 WHEREAS, the second session of the forty-ninth legislature
17 passed Senate Joint Memorial 1, which requested that the
18 superintendent of insurance of the public regulation commission
19 convene a health care reform working group with membership
20 drawn from the department of health, the human services
21 department, the legislature, the insurance division of the
22 public regulation commission, the New Mexico medical insurance
23 pool and the New Mexico health insurance alliance; and

24 WHEREAS, the United States congress enacted federal health
25 care reform in 2010, with the passage of the federal Patient

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1 Protection and Affordable Care Act and the Health Care and
2 Education Reconciliation Act of 2010; and

3 WHEREAS, the health reform working group met during the
4 months of April through October 2010, heard testimony and
5 discussed many components of the federal health care reform
6 legislation, including the state's options regarding the
7 creation of a health insurance exchange and other state
8 entities; how to prepare the state for increased enrollment in
9 medicaid and other coverage options; recommended actions to
10 implement insurance reforms in accordance with federal law and
11 state concerns; strategies to obtain any federal money
12 available for health care work force development, medicaid,
13 community clinics, addressing health care disparities and
14 health care information systems; implications for taxation and
15 revenue; and how to ensure that New Mexicans are properly
16 educated about their rights and responsibilities under the
17 federal legislation; and

18 WHEREAS, the health care reform working group incorporated
19 advisory groups made up of stakeholders, including the state's
20 business interests, health care providers, insurers, state
21 agencies, consumers, health care advocates and spokespersons
22 for the state's Native American communities; and

23 WHEREAS, the health care reform working group provided
24 ongoing testimony and recommendations to the legislative health
25 and human services committee and the legislative finance

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1 committee during the 2010 interim; and

2 WHEREAS, health care reform is a process that will take
3 place over the next several years, with many issues still to be
4 considered as federal rules are issued and components of reform
5 are implemented; and

6 WHEREAS, it is important that New Mexico continue to be in
7 a position to make well-planned responses to the federal rules
8 as they are issued and to any additional health care reforms
9 that may be enacted by the United States congress; and

10 WHEREAS, New Mexico has received eighty-five million
11 dollars (\$85,000,000) in federal grants pursuant to the federal
12 Patient Protection and Affordable Care Act and needs to
13 continue to monitor funding opportunities available through
14 that act;

15 NOW, THEREFORE, BE IT RESOLVED BY THE LEGISLATURE OF THE
16 STATE OF NEW MEXICO that the executive director of the New
17 Mexico medical insurance pool be requested to continue the
18 health care reform working group with membership drawn from the
19 department of health, the human services department, the
20 legislative finance committee, the leadership of the
21 legislative health and human services committee, the insurance
22 division of the public regulation commission, the New Mexico
23 medical insurance pool and the New Mexico health insurance
24 alliance; and

25 BE IT FURTHER RESOLVED that the leadership of each house

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1 of the legislature appoint the legislative members of the
2 working group; and

3 BE IT FURTHER RESOLVED that the health care reform working
4 group meet at least quarterly through December 31, 2013; and

5 BE IT FURTHER RESOLVED that the health care reform working
6 group receive staff assistance from state agencies, the
7 legislative finance committee and the legislative council
8 service as appropriate to carry out the work of the health care
9 reform working group; and

10 BE IT FURTHER RESOLVED that the health care reform working
11 group continue to receive and consider input and
12 recommendations from public stakeholders and advisory groups
13 and that the health care reform working group present to the
14 governor and the legislature recommendations and proposed
15 action steps for administrative, legislative, regulatory,
16 operational and financial initiatives necessary to implement
17 and supplement federal health care reform; and

18 BE IT FURTHER RESOLVED that the health care reform working
19 group continue to make recommendations regarding the
20 implementation of a health insurance exchange and the creation
21 of any entities that the health care reform working group
22 considers necessary to supplement the federal reforms; whatever
23 changes in state regulations are necessary to reconcile
24 differences or conflicts between federal and New Mexico
25 insurance regulations; state strategies to get access to

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1 federal money available for health care work force development,
2 medicaid, community clinics, addressing health care disparities
3 and health care information systems; any restructuring of
4 medical assistance programs to maximize federal funds; and
5 other health-related issues; and

6 BE IT FURTHER RESOLVED that the health care reform working
7 group present its recommendations to the governor, the
8 legislative finance committee and the legislative health and
9 human services committee by October 1 of each year until
10 October 1, 2013; and

11 BE IT FURTHER RESOLVED that copies of this memorial be
12 transmitted to the governor; the chairs of the New Mexico
13 health policy commission, the legislative finance committee and
14 the legislative health and human services committee; the
15 co-chairs of the New Mexico legislative council; the
16 superintendent of insurance; the secretary of human services;
17 and the secretary of health.