SENATE BILL 227

53RD LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION, 2018

INTRODUCED BY

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AN ACT

RELATING TO TAXATION; ASSESSING AN ADDITIONAL HEALTH INSURANCE PREMIUM SURTAX TO FUND SUBSTANCE USE DISORDER RESPONSE THROUGH STATE MEDICAL ASSISTANCE PROGRAMS AND THROUGH COUNTY HEALTH CARE ASSISTANCE FUNDS STATEWIDE; PROVIDING FOR THE CREATION OF A SUBSTANCE USE DISORDER RESPONSE PLAN FOR MEDICAL ASSISTANCE RECIPIENTS AND THE DISTRIBUTION OF A PORTION OF HEALTH INSURANCE PREMIUM SURTAX PROCEEDS TO IMPLEMENT THE PLAN; AMENDING A PROVISION OF THE INDIGENT HOSPITAL AND COUNTY HEALTH CARE ACT TO PROVIDE FOR DISTRIBUTION OF A PORTION OF HEALTH INSURANCE PREMIUM SURTAX PROCEEDS; MAKING AN APPROPRIATION.

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

SECTION 1. A new section of the Public Assistance Act is enacted to read:

"[NEW MATERIAL] SUBSTANCE USE DISORDER RESPONSE PLAN--.210093.1

LICENSED SUBSTANCE ABUSE ASSISTANTS--REPORTING.--

A. The secretary, in cooperation with medical assistance contractors, shall devise a substance use disorder response plan that identifies policies for increasing the supply of behavioral health workforce trained in substance use disorder treatment statewide and for funding a robust response statewide to the demand for timely, evidence-based substance use disorder services for medical assistance recipients statewide through the application of health insurance premium surtax revenues collected pursuant to the provisions of Subsection C of Section 59A-6-2 NMSA 1978.

- B. As part of the substance use disorder response plan, the secretary shall adopt and promulgate rules to allow a substance abuse associate licensed in accordance with the Counseling and Therapy Practice Act to be reimbursed for the following services provided to medical assistance recipients within the licensed substance abuse associate's scope of practice:
- (1) providing interventions directly to individuals, couples, families and groups;
- (2) employing practice theory and research findings;
- (3) providing screening, assessment, consultation, development of treatment plans, case management, counseling, referral, appraisal, crisis intervention, .210093.1

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education, reporting or recordkeeping pertaining specifically to alcohol and drug abuse counseling;

- (4) providing generalist services in the role of educator, assistant or mediator;
 - (5) taking a social history; and
 - (6) conducting a home study."
- SECTION 2. Section 27-5-7 NMSA 1978 (being Laws 1965, Chapter 234, Section 7, as amended) is amended to read:

"27-5-7. HEALTH CARE ASSISTANCE FUND.--

- A. There is created in the county treasury of each county a "health care assistance fund".
- B. Collections under the levy made pursuant to the Indigent Hospital and County Health Care Act, distributions made to the fund in accordance with the provisions of Paragraph (4) of Subsection E of Section 59A-6-5 NMSA 1978 and all payments shall be placed into the fund, and the amount placed in the fund shall be budgeted and expended only for the purposes specified in the Indigent Hospital and County Health Care Act, by warrant upon vouchers approved by the county. Payments for indigent hospitalizations shall not be made from any other county fund.
- C. The fund shall be audited in the manner that other state and county funds are audited, and all records of payments and verified statements of qualification upon which payments were made from the fund shall be open to the public.

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D. Any balance remaining in the fund at the end of
the fiscal year shall carry over into the ensuing year, and
that balance shall be taken into consideration in the
determination of the ensuing year's budget and certification of
need for purposes of making a tax levy.
E. Money may be transferred to the fund from other
sources, but no transfers may be made from the fund for any
purpose other than those specified in the Indigent Hospital and
County Health Care Act."
SECTION 3. Section 59A-6-2 NMSA 1978 (being Laws 1984,
Chapter 127 Section 102 as amended) is amended to read:

- "59A-6-2. PREMIUM TAX--HEALTH INSURANCE PREMIUM SURTAX.--
- A. The premium tax provided for in this section shall apply as to the following taxpayers:
- (1) each insurer authorized to transact insurance in New Mexico;
- (2) each insurer formerly authorized to transact insurance in New Mexico and receiving premiums on policies remaining in force in New Mexico, except that this provision shall not apply as to an insurer that withdrew from New Mexico prior to March 26, 1955;
- (3) each plan operating under provisions of Chapter 59A, Articles 46 through 49 NMSA 1978;
- (4) each property bondsman, as that person is defined in Section 59A-51-2 NMSA 1978, as to any consideration .210093.1

received as security or surety for a bail bond in connection with a judicial proceeding, which consideration shall be considered "gross premiums" for the purposes of this section; and

- (5) each unauthorized insurer that has assumed a contract or policy of insurance directly or indirectly from an authorized or formerly authorized insurer and is receiving premiums on such policies remaining in force in New Mexico, except that this provision shall not apply if a ceding insurer continues to pay the tax provided in this section as to such policy or contract.
- B. Each such taxpayer shall pay in accordance with this subsection a premium tax of three and three-thousandths percent of the gross premiums and membership and policy fees received or written by it, as reported in Schedule T and supporting schedules of its annual financial statement on insurance or contracts covering risks within this state during the preceding calendar year, less all return premiums, including dividends paid or credited to policyholders or contract holders and premiums received for reinsurance on New Mexico risks.
- C. In addition to the premium tax imposed pursuant to Subsection B of this section, each taxpayer described in Subsection A of this section that transacts health insurance in New Mexico or is a plan described in Chapter 59A, Article 46 or .210093.1

47 NMSA 1978 shall pay a health insurance premium surtax of one and one-hundredth percent of the gross health insurance premiums and membership and policy fees received by it on hospital and medical expense incurred insurance or contracts; nonprofit health care service plan contracts, excluding dental or vision only contracts; and health maintenance organization subscriber contracts covering health risks within this state during the preceding calendar year, less all return health insurance premiums, including dividends paid or credited to policyholders or contract holders and health insurance premiums received for reinsurance on New Mexico risks. Except as provided in this section, all references in the Insurance Code to the premium tax shall include both the premium tax and the health insurance premium surtax.

D. For each calendar quarter, an estimated payment of the premium tax and the health insurance premium surtax shall be made on April 15, July 15, October 15 and the following January 15. The estimated payments shall be equal to at least one-fourth of the payment made during the previous calendar year or one-fifth of the actual payment due for the current calendar year, whichever is greater. The final adjustment for payments due for the prior year shall be made with the return, which shall be filed on April 15 of each year, at which time all taxes for that year are due. Dividends paid or credited to policyholders or contract holders and refunds,

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savings, savings coupons and similar returns or credits applied or credited to payment of premiums for existing, new or additional insurance shall, in the amount so used, constitute premiums subject to tax under this section for the year in which so applied or credited.

- E. Exempted from the taxes imposed by this section are:
- (1) premiums attributable to insurance or contracts purchased by the state or a political subdivision for the state's or political subdivision's active or retired employees; and
- (2) payments received by a health maintenance organization from the federal secretary of health and human services pursuant to a contract issued under the provisions of 42 U.S.C. Section 1395 mm(g)."
- SECTION 4. Section 59A-6-5 NMSA 1978 (being Laws 1984, Chapter 127, Section 105, as amended) is amended to read:
 - "59A-6-5. DISTRIBUTION OF OFFICE COLLECTIONS.--
- A. All money received by the office of superintendent of insurance for fees, licenses, penalties and taxes shall be paid daily by the superintendent to the state treasurer and credited to the "insurance department suspense fund" except as provided by the Law Enforcement Protection Fund Act.
- B. The superintendent may authorize the refund of .210093.1

money erroneously paid as fees, licenses, penalties or taxes from the insurance department suspense fund under request for refund made within three years after the erroneous payment. In the case of premium taxes erroneously paid or overpaid in accordance with law, refund may also be requested as a credit against premium taxes due in any annual or quarterly premium tax return filed within three years of the erroneous or excess payment.

- C. If required by a compact to which New Mexico has joined pursuant to law, the superintendent shall authorize the allocation of premiums collected pursuant to Section 59A-14-12 NMSA 1978 to other states that have joined the compact pursuant to an allocation formula agreed upon by the compacting states.
- D. The "insurance operations fund" is created in the state treasury. The fund shall consist of the distributions made to it pursuant to Subsection E of this section. The legislature shall annually appropriate from the fund to the division those amounts necessary for the division to carry out its responsibilities pursuant to the Insurance Code and other laws. Any balance in the fund at the end of a fiscal year shall revert to the general fund.
- E. At the end of every month, after applicable refunds are made pursuant to Subsection B of this section and after any allocations have been made pursuant to Subsection C of this section, the treasurer shall make the following

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- (1) to the "fire protection fund", that part of the balance derived from property and vehicle insurance business:
- (2) to the insurance operations fund, that part of the balance derived from the fees imposed pursuant to Subsections A and E of Section 59A-6-1 NMSA 1978 other than fees derived from property and vehicle insurance business;
- (3) to the substance use disorder response fund, an amount equal to four hundred ninety-five thousandths percent of the net receipts attributable to the health insurance premium surtax;
- (4) an amount equal to four hundred ninetyfive thousandths percent of the net receipts attributable to
 the health insurance premium surtax, to be distributed in equal
 parts to each health care assistance fund; and
- [(3)] <u>(5)</u> to the general fund, the balance remaining in the insurance department suspense fund derived from all other kinds of insurance business."
- SECTION 5. [NEW MATERIAL] SUBSTANCE USE DISORDER RESPONSE FUND--CREATION--DISTRIBUTIONS--APPROPRIATION.--The "substance use disorder response fund" is created in the state treasury. The fund shall consist of distributions from proceeds of the .210093.1

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health insurance premium surtax distributed in accordance with the provisions of Paragraph (3) of Subsection E of Section 59A-6-5 NMSA 1978; appropriations; transfers; gifts; grants; donations; and bequests made to the fund. Money in the fund is appropriated to the human services department to fund the substance use disorder response plan established pursuant to Section 1 of this 2018 act. Money in the fund shall be disbursed on warrants signed by the secretary of finance and administration pursuant to vouchers signed by the secretary of human services or the secretary's authorized representative. Money in the fund shall be invested as provided for other state funds, and income earned on the fund shall be credited to the fund. Any unexpended or unencumbered balance remaining at the end of a fiscal year shall not revert to the general fund.

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