LFC Requester: Eric Chenier

AGENCY BILL ANALYSIS - 2025 REGULAR SESSION

WITHIN 24 HOURS OF BILL POSTING, UPLOAD ANALYSIS TO

<u>AgencyAnalysis.nmlegis.gov</u> and email to <u>billanalysis@dfa.nm.gov</u>
(Analysis must be uploaded as a PDF)

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		INFORMATION inal bill, amendment, su	ebstitute or a correction	n of a previous bill}				
	Date Prepare	d : 2/21/2025	Check a	all that apply:				
	Bill Number:	HB536	Origina	* * *	ection			
				Amendment _ Substitute				
Sponsor:	Marianna Anay		Agency Name and Code Number:	New Mexico Insurance Au				
Short	Disclosure Of		Person Writing	Kaylynn	Royba	.1		
Title:	Insurance Billi		Phone: 505-476-					
	Appro	APPROPRIATION Priation		Recurring		Fund		
FY25		FY26		onrecurring				
(Parenthesis	s () indicate expenditu	re decreases)						
,	.,	·	(dollars in thous	ands)				
	Recurring		Fund					
F	Y25	FY26	Y26 FY27		ring	Affected		

(Parenthesis () indicate revenue decreases)

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY25	FY26	FY27	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total						

(Parenthesis () Indicate Expenditure Decreases)

Duplicates/Conflicts with/Companion to/Relates to: Duplicates/Relates to Appropriation in the General Appropriation Act

SECTION III: NARRATIVE

BILL SUMMARY

HB536 amends several statutes to enhance the privacy protections afforded to individuals receiving health care services by prohibiting the disclosure of sensitive health care services on billing statements, explanations of benefits, or summaries of payments. Specifically, the bill mandates that such billing information for persons enrolled in group health coverage under the Health Care Purchasing Act, individual or group health insurance policies, group or blanket health insurance policies under Chapter 59A, Article 22 and Article 23 of the New Mexico Statutes Annotated, as well as individual or group health maintenance organization contracts and nonprofit health care plans, shall not disclose any sensitive health care services. For the purposes of this bill, "sensitive health care service" is defined to include those services that are of a particularly sensitive and personal nature, including reproductive or sexual health care services, gender-affirming health care services, behavioral health care services, and services related to treating a victim of domestic violence.

FISCAL IMPLICATIONS

HB536 would necessitate modifications to existing health insurance billing systems to ensure that sensitive health care services are not disclosed in billing information, explanations of benefits, or payment summaries. These system overhauls would likely require financial investment to develop and integrate new data management protocols. Additionally, ongoing compliance monitoring and potential staff training would contribute to increased operational costs. However, quantifying this impact in the timeframe allotted is not possible. An extensive analysis would be required to understand the final impact.

SIGNIFICANT ISSUES

PERFORMANCE IMPLICATIONS

Health insurance providers would need to implement new protocols for handling sensitive health care information. This could involve developing advanced data management systems capable of distinguishing and segregating sensitive services from general health care data. The performance of these systems would be critical to ensure timely and accurate billing processes while maintaining compliance with the new privacy requirements. Any delays or errors in implementation could impact service delivery and member satisfaction.

ADMINISTRATIVE IMPLICATIONS

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

HB536 may intersect with existing federal regulations, such as the Health Insurance Portability and Accountability Act (HIPAA), which also governs the privacy and security of health information.

TECHNICAL ISSUES

The primary technical challenge presented is the modification of existing electronic health record (EHR) systems to segregate sensitive health care information effectively. Current EHR systems may not support the level of granularity required to isolate specific services without extensive reprogramming. This raises concerns about the technical feasibility and the time frame needed to implement such changes. Engaging with EHR vendors and IT professionals will be crucial to develop viable solutions that meet the bill's requirements. This may lead to disruptions in communications such as explanation of benefits and other affected communications.

OTHER SUBSTANTIVE ISSUES

ALTERNATIVES

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

AMENDMENTS