

1 SENATE BILL 80  
2 57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

3 INTRODUCED BY  
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10 AN ACT  
11 RELATING TO HEALTH INSURANCE; REQUIRING ISSUERS OF MEDICARE  
12 SUPPLEMENT POLICIES TO PROVIDE OPEN ENROLLMENT PERIODS.  
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14 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

15 SECTION 1. Section 59A-24A-3 NMSA 1978 (being Laws 1989,  
16 Chapter 28, Section 3, as amended) is amended to read:

17 "59A-24A-3. DEFINITIONS.--As used in the Medicare  
18 Supplement Act:

19 A. "applicant" means:

20 (1) in the case of an individual medicare  
21 supplement policy, the person who seeks to contract for  
22 insurance benefits; ~~and~~ or

23 (2) in the case of a group medicare supplement  
24 policy, the proposed certificate holder;

25 B. "certificate" means any certificate delivered or

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1 issued for delivery in this state under a group medicare  
2 supplement policy;

3 C. "certificate form" means the document on which a  
4 certificate is delivered or issued for delivery;

5 D. "eligible policyholder" means a medicare  
6 beneficiary who is sixty-five years or older and insured under  
7 a medicare supplement policy;

8 ~~[D.]~~ E. "issuer" means insurance companies,  
9 fraternal benefit societies, nonprofit health care plans,  
10 health maintenance organizations and any other entities that  
11 deliver or issue for delivery in this state medicare supplement  
12 policies or certificates;

13 ~~[E.]~~ F. "medicare" means the federal Health  
14 Insurance for the Aged Act, Title XVIII of the Social Security  
15 Amendments of 1965, as then constituted or later amended;

16 ~~[F.]~~ G. "medicare supplement policy" means:

17 (1) a group policy as defined in Chapter 59A,  
18 Article 23 NMSA 1978;

19 (2) an individual policy as defined in Chapter  
20 59A, Article 22 NMSA 1978; or

21 (3) a group or individual certificate issued  
22 pursuant to the Nonprofit Health Care Plan Law or the Health  
23 Maintenance Organization ~~[Act]~~ Law that is advertised, marketed  
24 or designed as a supplement to reimbursements under medicare  
25 for the hospital, medical or surgical expenses of persons

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1 eligible for medicare;

2           [~~G.~~] H. "policy form" means the document on which a  
3 policy is delivered or issued for delivery by the issuer; and

4           [~~H.~~] I. "superintendent" means the superintendent  
5 of insurance."

6           **SECTION 2.** A new section of the Medicare Supplement Act  
7 is enacted to read:

8           "[NEW MATERIAL] ANNUAL OPEN ENROLLMENT.--

9           A. Every issuer participating in the market for  
10 medicare supplement policies shall offer an annual open  
11 enrollment period to all eligible policyholders. Each eligible  
12 policyholder's open enrollment period shall commence with the  
13 first day of the eligible policyholder's birthday month and  
14 remain open for at least sixty days thereafter. During the  
15 open enrollment period:

16                       (1) each eligible policyholder may purchase  
17 any medicare supplement policy offered in this state; and

18                       (2) an issuer shall not deny, delay or  
19 condition the issuance or effectiveness, or discriminate in the  
20 price of coverage, of a medicare supplement policy based on the  
21 health status, claims, experience, receipt of health care or  
22 medical condition of an eligible policyholder.

23           B. At least thirty days before the beginning of an  
24 eligible policyholder's open enrollment period, but not more  
25 than sixty days before the beginning of the open enrollment

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1 period, the issuer of an eligible policyholder's medicare  
2 supplement policy shall notify the eligible policyholder of:

3 (1) the dates on which the open enrollment  
4 period begins and ends;

5 (2) the rights provided to the eligible  
6 policyholder by this section; and

7 (3) any modifications to the medicare  
8 supplement policy currently held by the eligible policyholder  
9 or any adjustments to the premiums charged for that policy."