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SENATE BILL 309

54TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2019

INTRODUCED BY

Elizabeth "Liz" Stefanics

AN ACT

RELATING TO HEALTH INSURANCE; PROHIBITING PRIOR AUTHORIZATION
FOR GYNECOLOGICAL OR OBSTETRICAL ULTRASOUNDS; DECLARING AN
EMERGENCY.

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

SECTION 1. A new section of the Health Care Purchasing
Act is enacted to read:

"[NEW MATERIAL] PRIOR AUTHORIZATION FOR GYNECOLOGICAL OR
OBSTETRICAL ULTRASOUNDS PROHIBITED.--

A. Group health coverage, including any form of
self-insurance, offered, issued or renewed under the Health
Care Purchasing Act that provides coverage for gynecological or
obstetrical ultrasounds shall not require prior authorization
for gynecological or obstetrical ultrasounds.

B. As used in this section, "prior authorization"

underscoring material = new
~~[bracketed material] = delete~~

underscored material = new
[bracketed material] = delete

1 means advance approval that is required as a condition
2 precedent to payment for medical care or related benefits
3 rendered to a covered person, including prospective or
4 utilization review conducted prior to the provision of covered
5 medical care or related benefits."

6 SECTION 2. A new section of the Public Assistance Act is
7 enacted to read:

8 "[NEW MATERIAL] PRIOR AUTHORIZATION FOR GYNECOLOGICAL OR
9 OBSTETRICAL ULTRASOUNDS PROHIBITED.--

10 A. The department shall prohibit its medicaid
11 managed care and fee-for-service contractors from requiring
12 prior authorization for gynecological or obstetrical
13 ultrasounds.

14 B. As used in this section, "prior authorization"
15 means advance approval that is required as a condition
16 precedent to payment for medical care or related benefits
17 rendered to a covered person, including prospective or
18 utilization review conducted prior to the provision of covered
19 medical care or related benefits."

20 SECTION 3. A new section of Chapter 59A, Article 22 NMSA
21 1978 is enacted to read:

22 "[NEW MATERIAL] PRIOR AUTHORIZATION FOR GYNECOLOGICAL OR
23 OBSTETRICAL ULTRASOUNDS PROHIBITED.--

24 A. An individual or group health insurance policy,
25 health care plan or certificate of insurance that is delivered,

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underscored material = new
[bracketed material] = delete

1 issued for delivery or renewed in this state and that provides
2 coverage for gynecological or obstetrical ultrasounds shall not
3 require prior authorization for gynecological or obstetrical
4 ultrasounds.

5 B. As used in this section, "prior authorization"
6 means advance approval that is required by a health insurance
7 policy, health care plan or certificate of insurance as a
8 condition precedent to payment for medical care or related
9 benefits rendered to a covered person, including prospective or
10 utilization review conducted prior to the provision of covered
11 medical care or related benefits."

12 SECTION 4. A new section of Chapter 59A, Article 23 NMSA
13 1978 is enacted to read:

14 "[NEW MATERIAL] PRIOR AUTHORIZATION FOR GYNECOLOGICAL OR
15 OBSTETRICAL ULTRASOUNDS PROHIBITED.--

16 A. A blanket or group health insurance policy or
17 contract that is delivered, issued for delivery or renewed in
18 this state and that provides coverage for gynecological or
19 obstetrical ultrasounds shall not require prior authorization
20 for gynecological or obstetrical ultrasounds.

21 B. As used in this section, "prior authorization"
22 means advance approval that is required by blanket or group
23 health insurance policy or contract as a condition precedent to
24 payment for medical care or related benefits rendered to a
25 covered person, including prospective or utilization review

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underscored material = new
[bracketed material] = delete

1 conducted prior to the provision of covered medical care or
2 related benefits."

3 SECTION 5. A new section of the Health Maintenance
4 Organization Law is enacted to read:

5 "[NEW MATERIAL] PRIOR AUTHORIZATION FOR GYNECOLOGICAL OR
6 OBSTETRICAL ULTRASOUNDS PROHIBITED.--

7 A. An individual or group health maintenance
8 organization contract that is delivered, issued for delivery or
9 renewed in this state and that provides coverage for
10 gynecological or obstetrical ultrasounds shall not require
11 prior authorization for gynecological or obstetrical
12 ultrasounds.

13 B. As used in this section, "prior authorization"
14 means advance approval that is required by a health maintenance
15 organization as a condition precedent to payment for medical
16 care or related benefits rendered to a covered person,
17 including prospective or utilization review conducted prior to
18 the provision of covered medical care or related benefits."

19 SECTION 6. A new section of the Nonprofit Health Care
20 Plan Law is enacted to read:

21 "[NEW MATERIAL] PRIOR AUTHORIZATION FOR GYNECOLOGICAL OR
22 OBSTETRICAL ULTRASOUNDS PROHIBITED.--

23 A. An individual or group health insurance policy,
24 health care plan or certificate of health insurance that is
25 delivered, issued for delivery or renewed in this state and

underscored material = new
[bracketed material] = delete

1 that provides coverage for gynecological or obstetrical
2 ultrasounds shall not require prior authorization for
3 gynecological or obstetrical ultrasounds.

4 B. As used in this section:

5 (1) "health care plan" means an organization
6 that demonstrates to the office of superintendent of insurance
7 that it has been granted exemption from the federal income tax
8 by the United States commissioner of internal revenue as an
9 organization described in Section 501(c)(3) of the United
10 States Internal Revenue Code of 1986, as that section may be
11 amended or renumbered, and is authorized by the office of
12 superintendent of insurance to enter into contracts with
13 subscribers and make health care expense payments; and

14 (2) "prior authorization" means advance
15 approval that is required by a health care plan as a condition
16 precedent to payment for medical care or related benefits
17 rendered to a covered person, including prospective or
18 utilization review conducted prior to the provision of covered
19 medical care or related benefits."

20 SECTION 7. EMERGENCY.--It is necessary for the public
21 peace, health and safety that this act take effect immediately.