



The New Mexico Health Security Act

Through State Innovation Waivers, the 2010 federal Affordable Care Act provides an opportunity for states to develop alternative health coverage systems that, unlike insurance exchanges, do not have to rely on our complex private insurance system. States that receive waivers will also be eligible for federal tax credits, subsidies, and Medicaid expansion funds. Creating a plan that self-insures most residents is still the best way for New Mexico to solve the problems of rising health care costs and a large uninsured population.

State Innovation Waivers are available starting January 1, 2017. The Health Security Act is set up so that once New Mexico receives a State Innovation Waiver, the state's insurance exchange will be transformed into the Health Security Plan.

What the NM Health Security Act proposes

Under the proposal, New Mexico will set up its own health insurance plan—the Health Security Plan—that will cover almost all New Mexico residents. (Federal retirees, active duty and retired military, and TRICARE recipients will continue with their federal plans. The tribes, as sovereign nations, may choose to join the Plan. Health plans covered under ERISA have the option of joining the Plan.)

The Plan shifts private insurance to a supplemental role (as traditional Medicare does). Plan members have guaranteed access to comprehensive, quality health care coverage, regardless of income level or health and employment status.

After passage of the Act: A carefully considered approach

- ✓ **Year 1:** The “Year of Financing,” when the Legislative Finance Committee, with public input, will determine:
 - The cost of the Plan
 - Individual premiums and employer contributions
 - Workers’ compensation and automobile insurance premium reductions
- ✓ **End of Year 1:** Legislative and gubernatorial approval of financial analysis report. If not approved, the Plan will not go into effect.
- ✓ **Years 2-3:** Development of the Plan, with legislative, executive, and public input, and application for a Waiver for State Innovation so the Plan can begin operations in 2018 and receive all federal tax credits and subsidies.

In addition, the NM Health Security Plan:

- Guarantees choice of provider, even across state lines.
- Guarantees a good benefit package that must be as comprehensive as the services offered state employees.
- Preserves the private delivery system (private physicians, hospitals, etc.)
- Provides strong protections for retirees

The Health Security Plan: An old-fashioned solution to our current crisis.

Currently, we all pay for a segmented system of hundreds of insurance plans that create a costly and complex administrative system. The Plan is based on the “old-fashioned” concept of insurance, where the young, the old, the healthy and not so healthy are all in one large insurance pool and the risk is shared while administrative costs are reduced.

This proposal has been worked and reworked for many years. Input has been received from all over the state. What this Plan proposes is not an imitation of the Canadian, French, or British systems; nor is it modeled after any other state’s proposals. It is a **New Mexico solution**.

A cost-effective approach: A 1994 New Mexico study by the independent think tank The Lewin Group estimated that \$4.6 billion could have been saved by 2004 had all New Mexicans been under one plan by 1997. While not all New Mexicans are covered by the Health Security Plan, even if half that amount is saved, that is significant for our state. Mathematica Policy Research, Inc., concluded in 2007 that the Health Security Act was the only proposal that would significantly reduce health care costs, even in its first year of operation. Other state studies also have concluded that including all or most state residents under one insurance plan controls rising health care costs.

Who will administer the NM Health Security Plan?

- **An independent, non-governmental Commission** with 15 geographically representative commissioners oversees the Plan.
- 10 commissioners must represent consumer and employer interests and 5 must represent provider and health facility interests.
- The publicly accountable Commission will be subject to the Open Meetings Act. Its budget will be available for public scrutiny, and patient/provider privacy will be protected.

Who will pay for the NM Health Security Plan?

Public and private dollars will be efficiently pooled into one fund. Funding sources include federal and state monies spent on health care (Medicaid and Medicare, for example), including Affordable Care Act federal subsidies, plus individual premiums and employer contributions (with caps). Employers may cover all or part of an employee’s premium obligations.

About the Health Security for New Mexicans Campaign

Established in 1992, the Campaign is a statewide, nonpartisan coalition of over 145 organizations and numerous individual supporters. Its mission is to create a publicly accountable health care system in New Mexico that guarantees comprehensive medical and mental health care coverage to all residents, allows for freedom of choice of provider, and controls costs.

The Health Security for New Mexicans Campaign
PO Box 2606, Corrales, NM 87048 • (505) 897-1803
www.nmhealthsecurity.org
6/11/15