

This is an emergency amendment to 13.10.13 NMAC, Section 12, effective 3/12/2020.

13.10.13.12 [COPAYMENTS] COST SHARING:

A. All [~~copayments~~] cost sharing (including copayments, deductibles, co-insurance, or similar charges) required of covered persons by the health care insurer or managed health care plan for the provision of health care services shall be reasonable and shall include any applicable state and federal taxes.

B. Any cost sharing requirement for the provision of testing and delivery of health care services for COVID-19, pneumonia, influenza, or any disease or condition which is the cause of, or subject of, a declared public health emergency is presumptively unreasonable and is prohibited. For purpose of this rule, a public health emergency exists when declared by the state or federal government, or by order of the superintendent.

~~[B]~~ **C.** [~~Copayment~~] Cost sharing requirements, including any variations in contribution requirements based on the type of health care service rendered or provider used, shall be disclosed to covered persons in MHCP contracts, enrollment materials, and in the evidence of coverage.

~~[C]~~ **D.** No female covered person shall be assessed a higher [~~copayment~~] cost sharing requirement, over and above the [~~copayment~~] cost sharing required of all covered persons to be seen by a primary care physician, for choosing a women's health care provider as her primary care physician

E. Health care services for any disease or condition for which cost sharing is prohibited, under Paragraph B of this section shall be subject to the Surprise Billing Protection Act, Section 59A-57A-1 through 13, NMSA 1978.

[13.10.13.12 NMAC - Rp, 13.10.13.27 NMAC, 09/01/2009; A/E, 3/12/2020]