NOTICE IS HEREBY GIVEN to every insurer who has issued or delivered an individual or group plan to a New Mexico resident that provides excepted benefits coverage as defined in § 59A-23G-2(B), NMSA 1978, other than a policy or plan that provides:

1) coverage issued as a supplement to liability insurance;
2) liability insurance;
3) workers' compensation or similar insurance;
4) automobile medical payment insurance;
5) credit-only insurance;
6) coverage for on-site medical clinics;
7) limited-scope dental or vision benefits;
8) Medicare supplemental health insurance as defined pursuant to Section 1882(g)(1) of the federal Social Security Act; and
9) disability-only insurance.

The Superintendent of Insurance ("Superintendent"), pursuant to Executive Order 2020-004 issued by Governor Michelle Lujan Grisham on March 11, 2020, and on his own motion, HEREBY FINDS:

1. The Governor of the State of New Mexico has proclaimed a public health emergency to minimize the spread and adverse impacts of COVID-19 in our state.
2. The unprecedented public health emergency posed by COVID-19 creates a need to eliminate potential administrative and financial barriers to testing for and treatment of COVID-19.
3. It is in the public interest for persons insured under excepted benefit products to understand the limited nature of the coverage for the diagnosis and treatment of COVID-19 related conditions. It is also in the public interest for such insureds who do not have major medical coverage to understand the options for obtaining such coverage during the current COVID-19 public health emergency.
IT IS THEREFORE ORDERED:

A. Every insurer who has underwritten an excepted benefits policy or plan described in the Notice must provide every New Mexico resident named as an insured, participant, member, or certificate holder under each such policy or plan the following notice:

"The coverage provided under your benefits plan or policy underwritten by [insert name of underwriter] is limited in nature and may not provide financial protection for significant costs that you could incur for the diagnosis or treatment of COVID-19 ("Corona virus") related illness.

If you do not have comprehensive major medical coverage, in addition to the plan or policy issued by our company, you may incur significant uninsured medical expenses associated with the testing, diagnosis and treatment of illness caused by COVID-19.

Major medical plans offer robust consumer protections, and are required to waive all deductibles, co-pays and other cost sharing expenses for the diagnosis or treatment of COVID-19 related illness. Your policy or plan with us is not a major medical plan and does not provide such protections.

If you do not have major medical coverage, you may:

1. Contact a licensed insurance broker or agent to see about major medical coverage availability.

2. To see if you are eligible for a special enrollment period for major medical coverage through the New Mexico Health Insurance Exchange, contact beWellnm toll-free at 1-833-862-3935.

3. To see if you are eligible for Medicaid coverage and to complete an application, please call the Human Services Department’s Medicaid Expansion Hotline toll-free at 1-855-637-6574 or visit https://www.yes.state.nm.us/yesnm/home/index

4. To see if you are eligible for high risk pool coverage, please contact the New Mexico Medical Insurance Pool (the "High Risk Pool") at 1-844-728-7896 or https://nmmip.org/”. If you are uninsured and have a COVID-19 diagnosis, your condition qualifies you for Pool coverage.

The Centers for Disease Control and the New Mexico Department of Health each have websites with considerable information on COVID-19. Visit each website at https://www.cdc.gov/ or http://cv.nmhealth.org/.
Individuals who have symptoms consistent with COVID-19 should immediately call the NM Department of Health at 1-855-600-3453.”

B. The required notice must be mailed or e-mailed to each required recipient no later than 6:00 p.m. on March 27, 2020.

C. Verification of compliance with this Amended Order shall be furnished under oath through an affidavit by a duly authorized representative of each insurer. Verification shall be delivered to the Superintendent no later than 6:00 p.m., on March 27, 2020. All submissions shall be made electronically to: freya.tschantz2@state.nm.us.

D. The required notice must also be provided by each insurer to every person authorized to market the excepted benefits policy or plan of the insurer which is subject to this Amended Order. Employees of the insurer shall be required to provide this Notice to all prospective purchasers of an excepted benefits policy or plan described in the Notice on or after the effective date of this Amended Order. Insurers shall direct nonemployee and/or contracted agents, brokers and producers to provide the Notice to all prospective purchasers of an excepted benefits policy or plan described in the Notice on or after the effective date of this Amended Order.

E. Failure to comply with this Amended Order may result in a fine or other penalty including suspension or revocation of the insurer’s Certificate of Authority pursuant to Section 59A-5-26(A)(1) NMSA 1978.

F. This Amended Order is effective immediately.

G. Copies of this Amended Order shall be served electronically upon all persons listed on the attached Certificate of Service.

H. Staff Counsel shall upload this Amended Order on the OSI Newsletter and ensure the Amended Order is sent out as a large volume correspondence to all Insurers licensed in New Mexico on the State Based System.

I. This Amended Order shall remain in effect until further written order of the Superintendent.

J. This docket shall remain open until further written order of the Superintendent.

DONE AND ORDERED this 17th day of March, 2020.

RUSSELL TOAL
SUPERINTENDENT OF INSURANCE

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CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing Amended Notice and Order was emailed to the following individuals, as indicated below, this 17th day of March, 2020.

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Office of General Counsel
Office of Superintendent of Insurance

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