

**MINUTES  
of the  
FIRST MEETING  
of the  
HEALTH COVERAGE FOR NEW MEXICANS COMMITTEE**

**August 10, 2006  
State Capitol, Room 317  
Santa Fe**

The first meeting of the Health Coverage for New Mexicans Committee (HCNM) was called to order by Lieutenant Governor Diane Denish, on Thursday, August 10, 2006, at 9:10 a.m. in Room 317 of the State Capitol in Santa Fe.

**Present**

Lt. Gov. Diane Denish, Chair  
Rep. Danice Picraux  
Sen. Carroll Leavell  
Sen. Mary Jane Garcia  
Charlotte Roybal  
April Redbird  
Mike Batte  
David Scrase, MD  
Craig Keyes, MD  
Alfredo Vigil, MD  
Duane Trythall  
Dennis S. Peña  
Paul Sowards  
Michelle Melendez  
Robin Gould  
Carter Bundy  
Jim Tryon  
Les Ruben (proxy for Charlie Alfero)  
Secretary. Pamela S. Hyde

**Absent**

Rep. James Madalena  
Rep. Brian Moore  
Sen. Dede Feldman  
Steve Altmiller

**Staff**

Ruby Ann M. Esquibel, Human Services Department (HSD)  
Raúl E. Burciaga, Legislative Council Service (LCS)  
Tim Crawford, LCS

**Guests**

The guest list is in the meeting file.

Copies of all handouts and written testimony are in the meeting file.

**Thursday, August 10**

## **Welcome and Charge of the Committee**

Lt. Gov. Denish welcomed the members of the HCNM Committee and, on behalf of the Speaker of the House of Representatives, the Senate President Pro Tempore and the Governor, thanked them for their participation. She advised the members that the committee's charge could be found in the materials provided in the binders that each committee member received. She mentioned that the recommendations of the *Insure New Mexico!* Council included a proposal to cost-out various models of health care coverage. She then asked the members for their cooperation in ensuring that the committee remains focused on the charge related to health coverage models by staying on time, staying on topic and striving for brevity.

## **Introductions**

The HCNM Committee members introduced themselves and provided some information on their experience related to health care.

## **Committee Operating Procedures**

Lt. Gov. Denish proceeded to advise the committee about the committee's operation:

- meetings will be audio-recorded;
- meeting minutes will be taken by LCS staff;
- a member may send a proxy to attend in the member's place but the proxy's role will be limited to obtaining material and hearing testimony;
- reimbursement may be made by LCS for legislative appointees and by HSD for executive appointees if the member's organization is unable to provide such reimbursement;
- Sec. Hyde may chair the committee in the Lt. Governor's absence;
- subcommittees may be formed but most of the work will be done by the entire committee; and
- additional information or materials distributed may be forwarded to Ms. Esquibel for copying and distribution to other members.

Sec. Hyde described the various materials provided in the binders.

## **Committee's Proposed Timeline and Draft Agendas**

Lt. Gov. Denish reminded the committee that its charge was a cooperative effort between the executive and legislative branches. She briefly described Gov. Richardson's 5-point plan to increase the number of persons with health care coverage:

- vendors of the state must offer employees insurance;
- ensure that state employees are covered;
- maximize Medicaid for low-income adults;

- expand the State Coverage Insurance (SCI) plan; and
- analyze health coverage models.

Sec. Hyde reviewed the draft agenda for September 7, which would include strategies to address the uninsured, economic considerations of coverage strategies and models analyses and presentations from individuals on health coverage models to consider for analysis. The length and the scope of individual presentations will depend on the time available and the number of presentations. Written testimony will be allowed as well. Sec. Hyde expected to have national experts on health policy and health economics make presentations at the September 7 meeting and possibly the October 19 meeting.

Sec. Hyde reviewed the proposed time line that would include five committee meetings during the remainder of the 2006 interim, issuance of a request for proposals by early October, consideration of finalists in mid- to late November, and awarding of a contract through the LCS by mid-December. The successful bidder would provide a preliminary report in April or May 2007 and a final report by June 2007. The report recommendations would then be considered by legislative committees, the executive branch and other stakeholders during the 2007 interim in preparation for the 2008 legislative session.

### **Discussion of Definitions and Guiding Principles**

Sec. Hyde advised the committee that the working definitions for the committee were largely taken from the Insure New Mexico! Council. On general questioning and comments, the committee addressed the following issues:

- what the benefit structures may be;
- the definition of "people living in New Mexico" may be controversial;
- whether "people living in New Mexico" was sufficiently broad or narrow to capture the individuals targeted for greater health coverage;
- whether the health coverage would include prevention, nutrition and wellness;
- the focus of the committee should be on coverage of individuals rather than access to health care resources, e.g., providers or facilities;
- the impact of "replacing the current multi-payer system" or "eliminating commercial insurance" if a single payer system was recommended or endorsed;
- the levels of coverage were based on discussion of the Governor's 2003 Health Care Coverage and Access Task Force;
- final charge to successful bidder should require a breakdown of the different levels and types of coverage;
- whether catastrophic coverage is currently offered in the state;
- distinction between organic eye or natural tooth causes of illness or injury versus coverage for basic dental and vision benefits;
- maximum levels of coverage;
- cosmetic or elective surgery versus medically necessary treatment;

- consideration of "evidence-based medicine" as a definition or as a qualifier to other definitions;
- consideration of the definition of "medical necessity";
- identification of statutory requirements for insurance coverage; and
- whether the term "pre-existing conditions" should be defined.

Upon a recommendation by the Lt. Governor to make the suggested changes and bring the revised definitions back to the committee, the committee unanimously adopted the working definitions. The revised definitions are attached to these minutes.

Sec. Hyde advised the committee that the proposed guiding principles for the committee were largely taken from the *Insure New Mexico!* Council. On general questioning and comments, the committee addressed the following issues:

- the guiding principle regarding priority populations should be struck since the charge of the committee is to increase the number of insured New Mexicans without specifically targeting any particular group;
- guiding principles 5, 6 and 7 should be combined into a single principle that encourages all stakeholders to share responsibility for health and health costs to the extent they are able;
- statistical data should be provided to committee members for a better understanding of costs and other statistics; and
- subsequent meetings should allow for public input.

Upon a recommendation by the Lt. Governor to make the suggested changes and bring the revised guiding principles back to the committee, the committee unanimously adopted the working definitions. The revised guiding principles are attached to these minutes.

## **Adjournment**

Lt. Governor Denish thanked the members for their participation. The meeting was adjourned at approximately 12:00 noon.