

## [N.M. Stat. Ann. § 27-5-1](#)

Current with legislation through 2022 regular session, chapter 15.

*Michie's™ Annotated Statutes of New Mexico > Chapter 27 Public Assistance (Arts. 1 — 15) > Article 5 Indigent Hospital and County Health Care (§§ 27-5-1 — 27-5-18)*

### 27-5-1. Short title.

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Chapter 27, Article 5 NMSA 1978 may be cited as the “Indigent Hospital and County Health Care Act”.

### History

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1953 Comp., § 13-2-12, enacted by Laws 1965, ch. 234, § 1; [1993, ch. 321, § 1](#).

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## [N.M. Stat. Ann. § 27-5-2](#)

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### **27-5-2. Purpose of Indigent Hospital and County Health Care Act.**

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The purpose of the Indigent Hospital and County Health Care Act [[27-5-1 NMSA 1978](#)] is:

- A. to recognize that each individual county of this state is the responsible agency for ambulance transportation, hospital care or the provision of health care to indigent patients domiciled in that county, as determined by resolution of the board of county commissioners, in addition to providing support for the state's medicaid program;
- B. to recognize that the counties of the state are responsible for supporting indigent patients by providing local revenues to match federal funds for the state medicaid program pursuant to *Section 7-20E-9 NMSA 1978* and the transfer of funds to the county-supported medicaid fund pursuant to the Statewide Health Care Act [[27-10-1 NMSA 1978](#)]; and
- C. to recognize that the counties of the state can improve the provision of health care to indigent patients by providing local revenues for countywide or multicounty health planning.

### **History**

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1953 Comp., § 13-2-13, enacted by Laws 1965, ch. 234, § 2; 1971, ch. 72, § 1; 1983, ch. 234, § 1; 1987, ch. 88, § 1; [1993, ch. 321, § 2](#); [1997, ch. 51, § 1](#); [2014, ch. 79, § 4](#), effective March 12, 2014.

Annotations

### **Notes**

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#### **Amendment Notes**

The 2014 amendment, effective March 12, 2014, rewrote A, which formerly read: “to recognize that the individual county of this state is the responsible agency for ambulance transportation or the hospital care or the provision of

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health care to indigent patients domiciled in that county for at least three months or for such period of time, not in excess of three months, as determined by resolution of the board of county commissioners, and to provide a means whereby each county can discharge this responsibility through a system of payments to ambulance providers, hospitals or health care providers for the care and treatment of, or the provision of health care services to, indigent patients”; substituted “pursuant to Section 7-20E-9 NMSA 1978” for “including the provision of matching funds for payments to sole community provider hospitals” in B; and made a stylistic change.

## Opinion Notes

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### OPINIONS OF ATTORNEY GENERAL

#### Applicability.

Mental health treatment provided by a county hospital to indigent residents of that county is included within the type of medical care covered by the New Mexico Indigent Hospital Claims Act (“Act”), [27-5-1 NMSA](#) 1978 et seq. [1988 N.M. Op. Att’y Gen. No. 88-64, 1988 N.M. AG LEXIS 63.](#)

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## [N.M. Stat. Ann. § 27-5-3](#)

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### 27-5-3. Public assistance provisions.

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- A. A hospital shall not be paid from the fund under the Indigent Hospital and County Health Care Act [[27-5-1 NMSA 1978](#)] for costs of an indigent patient for services that have been determined by the department to be eligible for medicaid reimbursement.
- B. No action for collection of claims under the Indigent Hospital and County Health Care Act [[27-5-1 NMSA 1978](#)] shall be allowed against an indigent patient who is medicaid eligible for medicaid covered services, nor shall action be allowed against the person who is legally responsible for the care of the indigent patient during the time that person is medicaid eligible.

### History

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1953 Comp., § 13-2-14, enacted by Laws 1965, ch. 234, § 3; 1984, ch. 101, § 1; [1993, ch. 321, § 3](#); [2003, ch. 413, § 1](#); [2014, ch. 79, § 5](#), effective March 12, 2014.

Annotations

### Notes

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#### Amendment Notes

**The 2014 amendment**, effective March 12, 2014, deleted the former second sentence of A, which read: “However, nothing in the Indigent Hospital and County Health Care Act shall be construed to prevent the board from transferring money from the fund to the sole community provider fund or the county-supported medicaid fund for support of the state medicaid program.”

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## [N.M. Stat. Ann. § 27-5-4](#)

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### **27-5-4. Definitions.**

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As used in the Indigent Hospital and County Health Care Act [[27-5-1 NMSA 1978](#)]:

- A. “ambulance provider” or “ambulance service” means a specialized carrier based within the state authorized under provisions and subject to limitations as provided in individual carrier certificates issued by the public regulation commission to transport persons alive, dead or dying en route by means of ambulance service. The rates and charges established by public regulation commission tariff shall govern as to allowable cost. Also included are air ambulance services approved by the county. The air ambulance service charges shall be filed and approved pursuant to Subsection D of [Section 27-5-6 NMSA 1978](#) and [Section 27-5-11 NMSA 1978](#);
- B. “cost” means all allowable costs of providing health care services, to the extent determined by resolution of a county, for an indigent patient. Allowable costs shall be based on medicaid fee-for-service reimbursement rates for hospitals, licensed medical doctors and osteopathic physicians;
- C. “county” means a county except a class A county with a county hospital operated and maintained pursuant to a lease or operating agreement with a state educational institution named in Article 12, Section 11 of the constitution of New Mexico;
- D. “department” means the human services department;
- E. “fund” means a county health care assistance fund;
- F. “health care services” means treatment and services designed to promote improved health in the county indigent population, including primary care, prenatal care, dental care, behavioral health care, alcohol or drug detoxification and rehabilitation, hospital care, provision of prescription drugs, preventive care or health outreach services, to the extent determined by resolution of the county;
- G. “indigent patient” means a person to whom an ambulance service, a hospital or a health care provider has provided medical care, ambulance transportation or health care services and who can normally support the person’s self and the person’s dependents on present income and liquid assets available to the person but, taking into consideration the person’s income, assets and requirements for other necessities of life for the person and the person’s dependents, is unable to pay the cost of the ambulance transportation or medical care administered or both; provided that if a definition of “indigent

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patient” is adopted by a county in a resolution, the definition shall not include any person whose annual income together with that person’s spouse’s annual income totals an amount that is fifty percent greater than the per capita personal income for New Mexico as shown for the most recent year available in the survey of current business published by the United States department of commerce. “Indigent patient” includes a minor who has received ambulance transportation or medical care or both and whose parent or the person having custody of that minor would qualify as an indigent patient if transported by ambulance, admitted to a hospital for care or treated by a health care provider;

H. “medicaid eligible” means a person who is eligible for medical assistance from the department;

I. “planning” means the development of a countywide or multicounty health plan to improve and fund health services in the county based on the county’s needs assessment and inventory of existing services and resources and that demonstrates coordination between the county and state and local health planning efforts;

J. “public entity” means a state, local or tribal government or other political subdivision or agency of that government; and

K. “qualifying hospital” means an acute care general hospital licensed by the department of health that is qualified to receive payments from the safety net care pool pursuant to an agreement with the federal centers for medicare and medicaid services.

## History

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1953 Comp., § 13-2-15, enacted by Laws 1965, ch. 234, § 4; 1975, ch. 44, § 1; 1977, ch. 253, § 43; 1978, ch. 123, § 1; 1979, ch. 146, § 1; 1983, ch. 234, § 2; 1987, ch. 50, § 1; 1987, ch. 88, § 2; [1990, ch. 37, § 1](#); [1991, ch. 171, § 1](#); [1991, ch. 212, § 19](#); [1993, ch. 321, § 4](#); [1997, ch. 51, § 2](#); [1999, ch. 37, § 1](#); [1999, ch. 270, § 4](#); [2001, ch. 30, § 1](#); [2001, ch. 272, § 1](#); [2001, ch. 280, § 1](#); [2003, ch. 413, § 2](#); [2004, ch. 94, § 1](#); [2012, ch. 18, § 1](#); [2014, ch. 79, § 6](#), effective March 12, 2014.

Annotations

## Notes

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### Amendment Notes

**The 2004 amendment**, effective July 1, 2004, added Paragraph N(10).

**The 2012 amendment**, effective March 1, 2012, reorganized the definitions to be in alphabetical order; in (D), added “or the commission’s successor agency”; added (Q) and (S); and made stylistic changes.

The 2014 amendment, effective March 12, 2014, rewrote the section.

## Notes to Decisions

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### Constitutionality.

Under the Indigent Hospital Claims Act (Act), former 13-2-12 NMSA 1978 et seq. (now [27-5-1 NMSA 1978](#) et. seq.), specifically former § 13-2-15B NMSA 1978 (now [27-5-4 NMSA 1978](#)), the constitutional provision prohibiting government aid to anyone except sick and indigent people, [N.M. Const. art. IX, § 14](#), did not prohibit counties from paying hospital bills for those statutorily defined as indigent, and was not unconstitutional. [Humana of New Mexico v. Board of County Comm'rs, 1978-NMSC-036, 92 N.M. 34, 582 P.2d 806, 1978 N.M. LEXIS 950 \(N.M. 1978\)](#).

## Opinion Notes

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### OPINIONS OF ATTORNEY GENERAL

#### Applicability.

Mental health treatment provided by a county hospital to indigent residents of that county is included within the type of medical care covered by the New Mexico Indigent Hospital Claims Act ("Act"), [27-5-1 NMSA](#) 1978 et seq. [1988 N.M. Op. Att'y Gen. No. 88-64, 1988 N.M. AG LEXIS 63](#).

#### Construction.

The amendment to [27-5-4 NMSA](#) 1978 of the Indigent Hospital and County Health Care Act enacted by 1999 N.M. Laws, ch. 37 is valid and in effect, although the amendment was not codified in the New Mexico Statutes Annotated ("NMSA") pursuant to the statutory rules governing the compilation of laws, under which the latter 1999 amendment by ch. 270 was compiled. [2000 N.M. Op. Att'y Gen. No. 00-05, 2000 N.M. AG LEXIS 5](#).

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### 27-5-4.1. Applicability. [Repealed]

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Repealed by [Laws 2012, ch. 18, § 4](#), effective March 1, 2012.

### History

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1953 Comp., § 13-2-15.1, enacted by Laws 1978, ch. 123, § 2.

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## [N.M. Stat. Ann. § 27-5-5](#)

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### **27-5-5. County indigent hospital and county health care board. [Repealed]**

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#### **History**

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1953 Comp., § 13-2-16, enacted by Laws 1965, ch. 234, § 5; [1993, ch. 321, § 5](#); repealed by [2014, ch. 79, § 22](#), effective March 12, 2014.

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### **27-5-5.1. Indigent health care report; required.**

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Every county in New Mexico shall file an annual report on all indigent health care funding by the county with the commission. The report shall contain the county's eligibility criteria for indigent patients, services provided to indigent patients, restrictions on services provided to indigent patients, conditions for reimbursement to providers of health care, revenue sources used to pay for indigent health care and other related information as determined by the commission. The report shall be submitted by October 1 of each year on a form provided by the commission. The commission shall make the report available to interested parties.

### **History**

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[Laws 1993, ch. 321, § 17](#), [1999, ch. 37, § 2](#).

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## [N.M. Stat. Ann. § 27-5-5.2](#)

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### 27-5-5.2. Nondiscrimination; indigent patients.

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Qualifying hospitals and hospitals with which a county contracts to provide for the services of indigent patients shall provide those services for indigent patients, including financial assistance, to all non-citizens, regardless of immigration status, if they meet all other qualifying criteria for such services.

### History

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[2021, ch. 127, § 4](#), effective June 18, 2021.

Annotations

### Notes

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#### Publisher's Notes

[Laws 2021, ch. 127, § 1](#), relating to eligibility for state or local health benefits, provides:

“A. A state or local health benefit shall be provided to all non-citizens, regardless of immigration status, if they meet all other qualifying criteria for such benefit.

B. For purposes of this section:

(1) ‘health care services’ means treatment and services designed to promote improved health, including primary care, prenatal care, dental care, behavioral health care, provision of prescription drugs, preventive care or health outreach services, provided by a state agency, county, local government or state educational institution named in Article 12, Section 11 of the constitution of New Mexico or an entity with which the state agency, county, local government or state educational institution named in Article 12, Section 11 of the constitution of New Mexico contracts to provide such services; and

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(2) 'state or local health benefit' means any health benefit for which payments, assistance or health care services are provided to an individual, household or family eligibility unit by an agency of the state, a county, a local government or a state educational institution named in Article 12, Section 11 of the constitution of New Mexico or by appropriated funds of the state, a county, a local government or a state educational institution named in Article 12, Section 11 of the constitution of New Mexico, as permitted by federal law. 'State or local health benefit' includes care or services for indigent persons or patients provided or funded pursuant to the Hospital Funding Act or the Indigent Hospital and County Health Care Act."

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## [N.M. Stat. Ann. § 27-5-6](#)

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### **27-5-6. Powers and duties of counties relating to indigent care.**

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A county:

**A.** may budget for expenditure on ambulance services, burial expenses, hospital or medical expenses for indigent residents of that county and for costs of development of a countywide or multicounty health plan. The combined costs of administration and planning shall not exceed the following percentages of revenues based on the previous fiscal year revenues for a fund that has existed for at least one fiscal year or based on projected revenues for the year being budgeted for a fund that has existed for less than one fiscal year. The percentage of the revenues in the fund that may be used for such combined administrative and planning costs is equal to the sum of the following:

- (1) ten percent of the amount of the revenues in the fund not over five hundred thousand dollars (\$500,000);
- (2) eight percent of the amount of the revenues in the fund over five hundred thousand dollars (\$500,000) but not over one million dollars (\$1,000,000); and
- (3) four and one-half percent of the amount of the revenues in the fund over one million dollars (\$1,000,000);

**B.** may accept contributions of public funds for county health care services, which shall be deposited in the fund;

**C.** may hire personnel to carry out the provisions of the Indigent Hospital and County Health Care Act [Chapter 27, Article 5 NMSA 1978];

**D.** shall transfer to the state by the last day of March, June, September and December of each year an amount equal to one-fourth of the county's payment pursuant to [Section 27-5-6.2 NMSA 1978](#). This money shall be deposited in the safety net care pool fund;

**E.** shall, in carrying out the provisions of the Indigent Hospital and County Health Care Act, comply with the standards of the federal Health Insurance Portability and Accountability Act of 1996;

**F.** may provide for the transfer of money from the fund to the county-supported medicaid fund to meet the requirements of the Statewide Health Care Act; and

## N.M. Stat. Ann. § 27-5-6

**G.** may contract with ambulance providers, hospitals or health care providers for the provision of services for indigent patients domiciled within the county; such services shall be provided to all non-citizens, regardless of immigration status, if they meet all other qualifying criteria for such services.

## History

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1953 Comp., § 13-2-17, enacted by Laws 1965, ch. 234, § 6; 1979, ch. 146, § 2; 1983, ch. 234, § 3; 1987, ch. 88, § 3; [1991, ch. 212, § 20](#); [1993, ch. 321, § 6](#); [1997, ch. 51, § 3](#); [1999, ch. 37, § 3](#); [2003, ch. 413, § 3](#); [2014, ch. 79, § 7](#), effective March 12, 2014; [2021, ch. 127, § 3](#), effective June 18, 2021.

Annotations

## Notes

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### Publisher's Notes

[Laws 2021, ch. 127, § 1](#), relating to eligibility for state or local health benefits, provides:

“A. A state or local health benefit shall be provided to all non-citizens, regardless of immigration status, if they meet all other qualifying criteria for such benefit.

B. For purposes of this section:

(1) ‘health care services’ means treatment and services designed to promote improved health, including primary care, prenatal care, dental care, behavioral health care, provision of prescription drugs, preventive care or health outreach services, provided by a state agency, county, local government or state educational institution named in Article 12, Section 11 of the constitution of New Mexico or an entity with which the state agency, county, local government or state educational institution named in Article 12, Section 11 of the constitution of New Mexico contracts to provide such services; and

(2) ‘state or local health benefit’ means any health benefit for which payments, assistance or health care services are provided to an individual, household or family eligibility unit by an agency of the state, a county, a local government or a state educational institution named in Article 12, Section 11 of the constitution of New Mexico or by appropriated funds of the state, a county, a local government or a state educational institution named in Article 12, Section 11 of the constitution of New Mexico, as permitted by federal law. ‘State or local health benefit’ includes care or services for indigent persons or patients provided or funded pursuant to the Hospital Funding Act or the Indigent Hospital and County Health Care Act.”

### Amendment Notes

## N.M. Stat. Ann. § 27-5-6

The 2014 amendment, effective March 12, 2014, rewrote the section.

The 2021 amendment substituted “multicounty” for “multi county” in the first sentence of A; substituted “Section 27-5-6.2 NMSA 1978” for “Section 16 of this 2014 act” in D; and added “such services shall be provided to all non-citizens regardless of immigration status, if they meet all other qualifying criteria for such services” in G.

## Notes to Decisions

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### False claims.

Qui tam claims alleging that hospital system violated FCA by causing submission of false claims by state Medicaid agency seeking federal funding of its health care programs were not subject to summary judgment because Government and employee presented evidence that hospitals' donations were related to funds hospitals would later receive from State; factual disputes existed regarding falsity and materiality of claims, scienter and causation, and Government's knowledge of falsity. [\*United States ex rel. Baker v. Community Health Sys., Inc., No. 05-279 WJ/ACT, 2014 U.S. Dist. LEXIS 184541 \(D.N.M. May 16, 2014\).\*](#)

## Research References & Practice Aids

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### Research References and Practice Aids

#### Cross references.

Definitions, [27-5-4 NMSA](#) 1978.

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## [N.M. Stat. Ann. § 27-5-6.1](#)

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### **27-5-6.1. Safety net care pool fund created.**

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A. The “safety net care pool fund” is created in the state treasury. The safety net care pool fund, which shall be administered by the department, shall consist of public funds provided through intergovernmental transfers from counties or other public entities and transferred from counties pursuant to Section 16 of this 2014 act [[27-5-6.2 NMSA 1978](#)]. Money in the fund shall be invested by the state treasurer as other state funds are invested. Any unexpended or unencumbered balance remaining in the fund at the end of any fiscal year shall not revert.

B. Money in the safety net care pool fund is appropriated to the department to make payments to qualifying hospitals. No safety net care pool fund payments or money in the safety net care pool fund shall be used to supplant any general fund support for the state medicaid program.

### **History**

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[Laws 1993, ch. 321, § 18](#); [2012, ch. 18, § 2](#); [2014, ch. 79, § 8](#), effective March 12, 2014.

Annotations

### **Notes**

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#### **Amendment Notes**

**The 2012 amendment**, effective March 1, 2012, rewrote the second sentence of (A), which formerly read: “The fund, which shall be administered by the human services department, shall consist of funds provided by counties to match federal funds for medicaid sole community provider hospital payments” and deleted “human services” following “appropriated to the” in the first sentence of (B).

**The 2014 amendment**, effective March 12, 2014, rewrote the section.

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**Temporary Provisions**

[Laws 2014, ch. 79, § 19A](#) provides: “On the effective date of this act, all money in the sole community provider fund shall be transferred to the safety net care pool fund.”

[Laws 2014, ch. 79, § 21](#), as vetoed by the governor, provides: “The Human Services department is directed to seek funds to fully fund the safety net care pool fund.”

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### **27-5-6.2. Transfer to safety net care pool fund.**

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**A.** A county shall, by ordinance to be effective July 1, 2014, dedicate to the safety net care pool fund an amount equal to a gross receipts tax rate of one-twelfth percent applied to the taxable gross receipts reported during the prior fiscal year by persons engaging in business in the county. For purposes of this subsection, a county may use public funds from any existing authorized revenue source of the county.

**B.** A county enacting an ordinance pursuant to Subsection A of this section shall transfer to the safety net care pool fund by the last day of March, June, September and December of each year an amount equal to one-fourth of the county's payment to the safety net care pool fund.

### **History**

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[2014, ch. 79, § 16](#), effective March 12, 2014.

Annotations

### **Notes**

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#### **Editor's Notes**

**Line item veto.** The words “through June 30, 2017,” in (A) were line item vetoed by the governor when she approved Laws 2014, Senate Bill 268 on March 12, 2014. The text of the Paragraph (A) would have read: “A. A county shall, by ordinance to be effective July 1, 2014 through June 30, 2017, dedicate to the safety net care pool fund an amount equal to a gross receipts tax rate of one-twelfth percent applied to the taxable gross receipts reported during the prior fiscal year by persons engaging in business in the county. For purposes of this subsection, a county may use public funds from any existing authorized revenue source of the county.”

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**Emergency Clause Notes**

[Laws 2014, ch. 79, § 23](#) makes the act effective immediately. Approved March 12, 2014.

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## [N.M. Stat. Ann. § 27-5-7](#)

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### **27-5-7. Health care assistance fund.**

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- A. There is created in the county treasury of each county a “health care assistance fund”.
- B. Collections under the levy made pursuant to the Indigent Hospital and County Health Care Act [[27-5-1 NMSA 1978](#)] and all payments shall be placed into the fund, and the amount placed in the fund shall be budgeted and expended only for the purposes specified in the Indigent Hospital and County Health Care Act, by warrant upon vouchers approved by the county. Payments for indigent hospitalizations shall not be made from any other county fund.
- C. The fund shall be audited in the manner that other state and county funds are audited, and all records of payments and verified statements of qualification upon which payments were made from the fund shall be open to the public.
- D. Any balance remaining in the fund at the end of the fiscal year shall carry over into the ensuing year, and that balance shall be taken into consideration in the determination of the ensuing year’s budget and certification of need for purposes of making a tax levy.
- E. Money may be transferred to the fund from other sources, but no transfers may be made from the fund for any purpose other than those specified in the Indigent Hospital and County Health Care Act [[27-5-1 NMSA 1978](#)].

### **History**

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1953 Comp., § 13-2-18, enacted by Laws 1965, ch. 234, § 7; [1991, ch. 212, § 21](#); [1992, ch. 31, § 1](#); [1993, ch. 321, § 7](#); [1996, ch. 29, § 4](#); [1998, ch. 71, § 1](#); [1999, ch. 188, § 1](#); [2014, ch. 79, § 9](#), effective March 12, 2014.

Annotations

### **Notes**

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## N.M. Stat. Ann. § 27-5-7

**Amendment Notes**

The 2014 amendment, effective March 12, 2014, substituted “health care assistance fund” for “county indigent hospital claims fund” in the section heading and in A and substituted “the county” for “a majority of the board and signed by the chairman of the board” in the first sentence of B.

**Temporary Provisions**

[Laws 2014, ch. 79, § 19B](#) provides: “On the effective date of this act, all money in a county's indigent hospital claims fund shall be transferred to the county's health care assistance fund.”

**Opinion Notes**

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**OPINIONS OF ATTORNEY GENERAL****Authority of county to provide medical care to indigents.**

Section 27-5-7B NMSA 1978 prohibits Colfax county from using the 1980 tax levy proceeds for indigents' medical care expenses. The county may, however, use any proceeds in the indigent hospital claims fund to provide medical care for indigent patients at the miners' hospital if they otherwise qualify. [1988 N.M. Op. Att'y Gen. No. 88-41, 1988 N.M. AG LEXIS 40.](#)

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## [N.M. Stat. Ann. § 27-5-7.1](#)

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*Michie's™ Annotated Statutes of New Mexico > Chapter 27 Public Assistance (Arts. 1 — 15) > Article 5 Indigent Hospital and County Health Care (§§ 27-5-1 — 27-5-18)*

### **27-5-7.1. County health care assistance fund; authorized uses of the fund.**

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A. The fund may be used to pay for:

- (1) expenses of burial or cremation of an indigent person;
- (2) ambulance transportation, hospital care and health care services for indigent patients;
- (3) [Vetoed by Governor March 12, 2014.]
- (4) [Vetoed by Governor March 12, 2014.] or
- (5) [(3)] county administrative expenses associated with fund expenditures authorized in Paragraphs of this subsection.

B. The fund may be used to meet a county's obligation under [Section 27-10-4 NMSA 1978](#).

### **History**

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[Laws 1993, ch. 321, § 16](#), [2001, ch. 307, § 2](#), [2014, ch. 79, § 10](#), effective March 12, 2014.

Annotations

### **Notes**

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#### **Editor's Notes**

**Line item veto.** Paragraphs A(3) and A(4) and the words “(1) through (4)” in paragraph A(5) were line item vetoed by the governor when she approved Laws 2014, Senate Bill 268 on March 12, 2014. The text of Paragraphs A(3) through A(5) would have read:

“A.(3) all or a portion of the monthly premiums of health insurance policies for indigent patients;

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“(4) all or a portion of the out-of-pocket costs, including copayments and deductibles, incurred by indigent patient insureds pursuant to the terms of a health insurance policy; or

“(5) county administrative expenses associated with fund expenditures authorized in Paragraphs (1) through (4) of this subsection.”

**Amendment Notes**

**The 2014 amendment**, effective March 12, 2014, rewrote the section, which formerly read: “A. The fund shall be used: (1) to meet the county’s contribution for support of sole community provider payments as calculated by the department for that county; (2) to pay for expenses of burial or cremation of an indigent person; and (3) to pay all claims that have been approved by the board that are not matched with federal funds under the state medicaid program. B. The fund may be used to meet the county’s obligation under Section 27-10-4 NMSA 1978.”

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## [N.M. Stat. Ann. § 27-5-8](#)

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### **27-5-8. Board certification to county commissioners. [Repealed]**

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#### **History**

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1953 Comp., § 13-2-19, enacted by Laws 1965, ch. 234, § 8; [1993, ch. 321, § 8](#); repealed by [2014, ch. 79, § 22](#), effective March 12, 2014.

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[N.M. Stat. Ann. § 27-5-9](#)

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**27-5-9. Tax levies authorized.**

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A. Subject to the provisions of Subsection B of this section, the board of county commissioners, upon the certification of the county as to the amount needed to provide health care to indigent residents of the county or to support the state's medicaid program, shall impose a levy against the net taxable value, as that term is defined in the Property Tax Code [Chapter 7, Articles 35 to 38 NMSA 1978], of the property in the county sufficient to raise the amount certified by the county.

B. The question of imposing an indigent and medicaid health care levy for the purpose of the Indigent Hospital and County Health Care Act [Chapter 27, Article 5 NMSA 1978] shall be submitted to the electors and voted upon as a separate question at the next subsequent general election or any special election called prior thereto for such purpose.

C. Upon finding by the board of county commissioners that an election will be necessary, the board of county commissioners shall meet and order an election to be held at a designated time in the county upon the question of imposing an indigent and medicaid health care levy for the purpose of the Indigent Hospital and County Health Care Act in the county. If the question is to be voted upon at a special election, the election shall be held not less than thirty nor more than fifty days after the finding, but in no event shall the election be held within fifty days preceding or succeeding any general election held in the county. The order for the election shall be made a part of the official minutes of the board of county commissioners. A copy of the order shall be published in a newspaper of general circulation in the county at least fifteen days before the date set for the election, and an affidavit of publication shall be obtained. At least five days prior to the date for holding the election, the board of county commissioners shall publish in a newspaper of general circulation in the county and post in five conspicuous places in the county a notice of election, which shall be in substantially the following form:

**"NOTICE OF ELECTION ON SPECIAL INDIGENT**

**AND MEDICAID HEALTH CARE LEVY**

Notice is given on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, there will be held in \_\_\_\_\_ county of New Mexico an election on the question of imposing an indigent and medicaid health care levy to provide health care to indigent residents of the county or to support the

N.M. Stat. Ann. § 27-5-9

state’s medicaid program, such levy to be made annually against the taxable value of the property in the county and limited to an amount sufficient to provide funds necessary to support the state’s medicaid program or to provide health care to indigent residents of the county who do not qualify for medicaid.

\_\_\_\_\_  
Official Title of the Authority”.

The election shall be held on the date specified in the notice and shall be, if a special election, conducted and canvassed in substantially the same manner as general elections are conducted and canvassed in the county; provided that the ballot used in any election shall be a special and separate ballot and shall be in substantially the following form:

**“BALLOT**

On the question of imposing an indigent and medicaid health care levy for the purposes of the Indigent Hospital and County Health Care Act, such levy to be made annually against the taxable value of the property in \_\_\_\_\_ county of New Mexico, and limited to an amount sufficient to provide funds budgeted and certified as necessary for health care for indigent residents of the county in addition to those services provided by the state or to support the state’s medicaid program:

FOR THE LEVY.....\_\_\_\_\_

AGAINST THE LEVY.....\_\_\_\_\_”.

D. If the electors vote in favor of an indigent and medicaid health care levy, the levy shall become effective in the same manner prescribed by law for all levies upon property within that county, and a levy for those purposes in such an amount as will provide sufficient money for the fund shall be made for each year thereafter.

E. Any board of county commissioners that has, prior to the effective date of this section, made a valid imposition of a property tax for the purpose of the Indigent Hospital and County Health Care Act shall not be required to hold an election on the existing tax, and that tax may be imposed and continue to be imposed in accordance with the provisions of law existing at the time of its imposition. However, if any such tax is not imposed in a given property tax year or if the authorization for its imposition terminates or expires, the election requirements of Subsections B and C of this section shall apply to any subsequent proposed imposition of a property tax for indigent health care for county residents or to support the state’s medicaid program.

**History**

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## N.M. Stat. Ann. § 27-5-9

1953 Comp., § 13-2-20, enacted by Laws 1965, ch. 234, § 9; 1981, ch. 37, § 85; [1993, ch. 321, § 9](#); [2014, ch. 79, § 11](#), effective March 12, 2014; [2015, ch. 145, § 99](#), effective July 1, 2015.

Annotations

## Notes

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### Amendment Notes

**The 2014 amendment**, effective March 12, 2014, rewrote A, which formerly read: “Subject to the provisions of Subsection B of this section, the board of county commissioners, upon the certification of the board as to the amount needed in the fund, shall impose a levy against the net taxable value, as that term is defined in the Property Tax Code, of the property in the county sufficient to raise the amount certified by the board”; substituted “and medicaid health care” for “hospital” in B, the first sentence of the introductory language of C, and in D; rewrote the forms of C; and substituted “indigent health care for county residents or to support the state’s medicaid program” for “the purpose of the Indigent Hospital and County Health Care Act” in the second sentence of E.

**The 2015 amendment** substituted “within fifty days” for “within five days” in the second sentence of C.

### Temporary Provisions

[Laws 2014, ch. 79, § 20](#) provides: “A tax levied pursuant to [Section 27-5-9 NMSA 1978](#) prior to January 1, 2014 shall remain in effect until the tax expires or is terminated.”

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## [N.M. Stat. Ann. § 27-5-10](#)

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### **27-5-10. Subrogation of claim. [Repealed]**

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#### **History**

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1953 Comp., § 13-2-22, enacted by Laws 1965, ch. 234, § 11; repealed by [2014, ch. 79, § 22](#), effective March 12, 2014.

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## [N.M. Stat. Ann. § 27-5-11](#)

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### **27-5-11. Qualifying hospital duties and reporting.**

---

- A. A qualifying hospital shall accept every indigent patient who seeks health care services from the qualifying hospital.
- B. Qualifying hospitals shall:
  - have written financial assistance policies that are publicized.
- C. [Vetoed by Governor March 12, 2014.]
- D. [C.] Within thirty days of receiving a payment from the safety net care pool, a qualifying hospital shall report the amount of such payment to the county within which it is located.
- E. [D.] In addition to the report required in Subsection D of this section, a qualifying hospital shall annually report to the county within which it is located the total costs of health care services provided in the previous calendar year.

### **History**

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1953 Comp., § 13-2-23, enacted by Laws 1965, ch. 234, § 12; 1983, ch. 234, § 4; [1993, ch. 321, § 10](#); [2003, ch. 413, § 4](#); [2014, ch. 79, § 12](#), effective March 12, 2014.

Annotations

### **Notes**

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#### **Editor's Notes**

**Line item veto.** Paragraphs B(1), B(2), B(3) and C and the word “fund” in D were line item vetoed by the governor when she approved Laws 2014, Senate Bill 268 on March 12, 2014. The text of these paragraphs would have read:  
“B. Qualifying hospitals shall:

## N.M. Stat. Ann. § 27-5-11

“(1) provide financial counseling to patients about their hospital bills

“(2) have written financial assistance policies consistent with this section that are publicized and consistently applied; and

“(3) make reasonable efforts to determine whether patients are eligible for financial assistance before initiating collections actions.

“C. No action for collection of claims shall be allowed against an indigent patient with a household income under two hundred percent of the federal poverty level.

“D. Within thirty days of receiving a payment from the safety net care pool fund, a qualifying hospital shall report the amount of such payment to the county within which it is located.”

### Amendment Notes

The 2014 amendment, effective March 12, 2014, rewrote the section.

### Temporary Provisions

[Laws 2014, ch. 79, § 21](#) provides: “The Human Services department is directed to seek funds to fully fund the safety net care pool fund.”

## Research References & Practice Aids

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### Research References and Practice Aids

### Cross References

Definitions, [27-5-4 NMSA](#) 1978.

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## [N.M. Stat. Ann. § 27-5-12](#)

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### **27-5-12. Payment of claims.**

---

- A. A hospital, ambulance service or health care provider filing a claim with the county shall:
- (1) file the claim with the county in which the indigent patient is domiciled;
  - (2) file the claim for each patient separately, with an itemized detail of the total cost; and
  - (3) file with the claim a verified statement of qualification for ambulance service, indigent hospital care or care from a health care provider signed by the patient or by the parent or person having custody of the patient to the effect that the patient qualifies under the provisions of the Indigent Hospital and County Health Care Act [[27-5-1 NMSA 1978](#)] as an indigent patient and is unable to pay the cost for the care administered and listing all assets owned by the patient or any person legally responsible for the patient's care. The statement shall constitute an oath of the person signing it, and any false statements in the statement made knowingly constitute a felony.
- B. A hospital, ambulance service or health care provider that has contracted with a county for provision of health care services shall provide evidence of health care services rendered for payment for services in accordance with the procedures specified in the contract.

### **History**

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1953 Comp., § 13-2-24, enacted by Laws 1965, ch. 234, § 13; 1983, ch. 234, § 5; 1984, ch. 101, § 2; [1993, ch. 321, § 11](#); [1997, ch. 51, § 4](#); [2014, ch. 79, § 13](#), effective March 12, 2014.

Annotations

### **Notes**

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Amendment Notes



N.M. Stat. Ann. § 27-5-12

**The 2014 amendment**, effective March 12, 2014, substituted “county” for “board” in the introductory language of A and in B; substituted “the claim with the county” for “claim with the board of the county” in A(1); and made stylistic changes.

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## [N.M. Stat. Ann. § 27-5-12.1](#)

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### 27-5-12.1. Appeal.

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Any hospital or ambulance service aggrieved by any decision of the county may appeal to the district court pursuant to the provisions of [Section 39-3-1.1 NMSA 1978](#).

### History

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1978 Comp., § 27-5-12.1, enacted by Laws 1979, ch. 146, § 3; 1983, ch. 234, § 6; [1998, ch. 55, § 38](#); [1999, ch. 265, § 40](#); [2014, ch. 79, § 14](#), effective March 12, 2014.

Annotations

### Notes

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#### Amendment Notes

**The 2014 amendment**, effective March 12, 2014, substituted “county” for “board.”

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## [N.M. Stat. Ann. § 27-5-12.2](#)

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### **27-5-12.2. Duties of the county; sole community provider hospital payments.**

**[Repealed]**

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### **History**

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[Laws 1993, ch. 321, § 15](#); [2003, ch. 413, § 5](#); [2012, ch. 18, § 3](#); repealed by [2014, ch. 79, § 22](#), effective March 12, 2014.

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## [N.M. Stat. Ann. § 27-5-13](#)

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**27-5-13. Claim shall not expire because of lack of funds; priority of claims.**

**[Repealed]**

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### History

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1953 Comp., § 13-2-25, enacted by Laws 1965, ch. 234, § 14; 1978, ch. 123, § 3; 1983, ch. 234, § 7; repealed by [2014, ch. 79, § 22](#), effective March 12, 2014.

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## [N.M. Stat. Ann. § 27-5-14](#)

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### **27-5-14. Board to recover costs; presumption of payment. [Repealed]**

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#### **History**

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1953 Comp., § 13-2-26, enacted by Laws 1965, ch. 234, § 15; 1975, ch. 178, § 1; 1987, ch. 88, § 4; [1993, ch. 321, § 12](#); repealed by [2014, ch. 79, § 22](#), effective March 12, 2014.

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## [N.M. Stat. Ann. § 27-5-15](#)

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### 27-5-15. Limitation on lien. [Repealed]

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#### History

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1953 Comp., § 13-2-26.1, enacted by Laws 1971, ch. 72, § 2; 1975, ch. 178, § 2; repealed by [2014, ch. 79, § 22](#), effective March 12, 2014.

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## [N.M. Stat. Ann. § 27-5-16](#)

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### **27-5-16. Department; payments; cooperation; reporting.**

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- A. The department shall not decrease the amount of any assistance payments made to the hospitals or health care providers of this state pursuant to law because of any financial reimbursement made to ambulance services, hospitals or health care providers for indigent or medicaid eligible patients as provided in the Indigent Hospital and County Health Care Act [[27-5-1 NMSA 1978](#)].
- B. The department shall cooperate with each county in furnishing information or assisting in the investigation of any person to determine whether the person meets the qualifications of an indigent patient as defined in the Indigent Hospital and County Health Care Act [[27-5-1 NMSA 1978](#)].
- C. The department shall provide an annual report to each county and each qualifying hospital on the previous calendar year's payments from the safety net care pool for uncompensated care to qualifying hospitals and estimated payments of enhanced medicaid base rates. The annual report for the previous year shall be provided by July 1 of the succeeding year.

### **History**

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1953 Comp., § 13-2-27, enacted by Laws 1965, ch. 234, § 16; 1987, ch. 88, § 5; [1993, ch. 321, § 13](#); [2013, ch. 151, § 1](#); [2014, ch. 79, § 15](#), effective March 12, 2014.

Annotations

### **Notes**

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#### **Editor's Notes**

**Line item veto.** The word “fund” in C was line item vetoed by the governor when she approved Laws 2014, Senate Bill 268 on March 12, 2014. The text of Paragraph C would have read: “C. The department shall provide an annual report to each county and each qualifying hospital on the previous calendar year's payments from the safety net

## N.M. Stat. Ann. § 27-5-16

care pool fund for uncompensated care to qualifying hospitals and estimated payments of enhanced medicaid base rates. The annual report for the previous year shall be provided by July 1 of the succeeding year.”

**Amendment Notes**

**The 2013 amendment**, effective June 14, 2013, added “provided, however, that additional payments may be made pursuant to waiver agreement, rule, law or state plan amendment providing for supplemental medicaid payments to hospitals” in the second sentence of (C) and made a stylistic change.

**The 2014 amendment**, effective March 12, 2014, added “reporting” in the section heading; substituted “county” for “board” in B and rewrote C, which formerly read: “The department shall ensure that the sole community provider payment and the reimbursement to hospitals made under the state medicaid program do not exceed what would have been paid for under medicare payment principles. In the event the sole community provider payment and medicaid reimbursement to hospitals would exceed medicare payment principles, the department shall reduce the sole community provider payment prior to making any reduction in reimbursement to hospitals made under the state medicaid program; provided, however, that additional payments may be made pursuant to waiver agreement, rule, law or state plan amendment providing for supplemental medicaid payments to hospitals.”

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## 27-5-17. Repealed.

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## [N.M. Stat. Ann. § 27-5-18](#)

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### **27-5-18. Date of implementation. [Repealed]**

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### **History**

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1953 Comp., § 13-2-29, enacted by Laws 1965, ch. 234, § 20; [1993, ch. 321, § 14](#); repealed by [2014, ch. 79, § 22](#), effective March 12, 2014.

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