



Study Medicaid Buy-In Plan

Make Healthcare Affordable for All New Mexicans

Everyone deserves good healthcare and financial security. Healthcare costs are becoming unsustainable for our families. More than 180,000 New Mexicans don't have coverage, and recent actions by the federal government are only driving up costs. **New Mexico needs a solution.** We can lead the way with a new plan that is gaining momentum in other states and nationally.

"We are all equal in deserving healthcare."



- Alfonso, Yah-ta-hey NM

What is the Medicaid buy-in option?

The Medicaid buy-in option is an innovative, healthcare coverage solution. It would open up Medicaid for any state resident to buy (even if they are not eligible for it now). The plan would create **a low cost coverage option for everyone**, promoting choices and competition in the insurance market. The plan could be purchased by anyone in the individual market and the Exchange, and could be opened up to employers. A well designed Medicaid buy-in plan would:

- **Greatly improve patient access to care** by expanding coverage for the uninsured and by reducing uncompensated care costs for healthcare providers and hospitals.
- **Help businesses** by offering affordable coverage options for employers and workers.
- Ensure **insurance companies direct patient dollars to medical care.**

How will it affect healthcare costs for the State?

Administration costs for the State would be built into the premiums for the Medicaid buy-in plan. Many individuals and families will receive tax credits and subsidies to help purchase the plan on the Exchange. Having an affordable option will **reduce health system costs** by expanding coverage to more uninsured people. Coverage helps patients get timely and preventive care before medical conditions worsen and turn into costly emergencies.

How should New Mexico study the Medicaid buy-in option?

New Mexico's Legislative Health and Human Services Committee should explore the Medicaid buy-in plan, and ask state agencies and healthcare entities to provide cost and coverage data. The LHHS can evaluate the impact on healthcare providers to ensure the plan increases access to care, and seek input from stakeholders and the community.