

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Room 352-G  
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Washington, DC 20201



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## CMS NEWS

FOR IMMEDIATE RELEASE  
August 28, 2020

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### **The Centers for Medicare & Medicaid Services (CMS) Approves New Essential Health Benefit Benchmarks for New Mexico**

*New Health Standards Will Expand Coverage for Opioid Use Disorder Treatment, Hepatitis-C Treatment and Weight Loss Drugs and Programs*

Today, the Centers for Medicare & Medicaid Services (CMS) approved a change to the essential health benefit (EHB) benchmark plan for New Mexico starting with the 2022 plan year to improve access to services for people suffering from opioid use disorder (OUD). The EHB-benchmark plan includes items and services in ten benefit categories, like hospitalization and doctor visits. All plans sold on the individual and small group market must cover the EHBs in their state's benchmark plan. Today's action supports the Trump Administration's efforts in fighting our nation's opioid epidemic by providing consumers access to much needed prevention and treatment services. These new changes will also increase healthcare services for individuals suffering from obesity, those in need of prosthetics and anti-Hepatitis C treatment.

"The opioid epidemic continues to have a serious impact on both patients and providers, which has only been exacerbated by the recent pandemic," said Kimberly Brandt, CMS Principal Deputy Administrator for Policy and Operations. "Under New Mexico's new EHB-benchmark plan, issuers will be encouraged to cover a wider range of services to care for those who suffer from OUD."

CMS concentrates on three approaches in our opioid strategy: prevention, treatment and data. To further bolster treatment options, the "benchmark" plan will add coverage for several intranasal spray opioid overdose reversal agents, including: EVZIO, a naloxone auto-injector, naltrexone HCL (including Anhydrous), Naloxone HCL, and NARCAN. While naloxone is a medication used to save lives by reversing opioid overdoses, only one naloxone prescription is dispensed for every 70 high-dose opioid prescriptions nationwide. Adding coverage of this drug in the new EHB-benchmark plan emphasizes the importance of naloxone in addressing the opioid epidemic.

New Mexico will also remove benefit limits for prosthetics, expand eligibility for weight loss drugs and programs, and add the benefits for artery calcification testing and hepatitis C agents as EHBs. These changes will alleviate unnecessary restrictions on benefits that will improve the overall health of consumers in New Mexico. New Mexico also made clarifications to coverage requirements for certain benefits already included in its current EHB-benchmark plan.

Upon enactment, the Patient Protection and Affordable Care Act (PPACA) required non-grandfathered health insurance plans in the individual and small group markets to cover EHBs in all ten categories. CMS's regulations allow each state to develop a state-specific "benchmark" plan that detail the specific services covered among these broad categories, and that is equal in scope of benefits to a typical employer plan. Until recently, updating these benchmark plans was burdensome because states had limited options. To increase flexibility, in 2018, CMS published a rule, the HHS Notice of Benefits and Payment Parameters for 2019, that allows states greater flexibility in how they update their EHB-benchmark plan, if they so choose.

Today's approval follows a public comment period in which New Mexico's Office of Superintendent of Insurance accepted public input on their proposed EHB-benchmark plan changes and also follows an application process to CMS. The new changes will take effect for plans required to comply with EHB requirements, including plans sold through the Exchange, for plan years starting on or after January 1, 2022.

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