

fg

LFC Requester:	Kelly Klunt
-----------------------	--------------------

AGENCY BILL ANALYSIS - 2025 REGULAR SESSION
WITHIN 24 HOURS OF BILL POSTING, UPLOAD ANALYSIS TO
AgencyAnalysis.nmlegis.gov and email to billanalysis@dfa.nm.gov
(Analysis must be uploaded as a PDF)

SECTION I: GENERAL INFORMATION

(Indicate if analysis is on an original bill, amendment, substitute or a correction of a previous bill)

Date Prepared: 1/30/25 *Check all that apply:*
Bill Number: HB214 Original Correction
 Amendment Substitute

Sponsor: Rep. Gallegos **Agency Name and Code** HCA 630
Short Title: Doula Credentialing & Access Act **Number:** _____
Person Writing Kresta Opperman
Phone: (505)231- **Email** Kresta.opperman@hca

SECTION II: FISCAL IMPACT

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Nonrecurring	Fund Affected
FY25	FY26		
\$0.0	\$0.0	NA	NA

(Parenthesis () indicate expenditure decreases)

REVENUE (dollars in thousands)

Estimated Revenue			Recurring or Nonrecurring	Fund Affected
FY25	FY26	FY27		
\$0.0	\$0.0	\$0.0	Nonrecurring	NA

(Parenthesis () indicate revenue decreases)

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

FY25	FY26	FY27	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected

	\$0.0	\$0.0	\$0.0	\$0.0	NA	NA
Total	\$0.0	\$0.0	\$0.0	\$0.0	NA	NA

(Parenthesis () Indicate Expenditure Decreases)

Duplicates/Conflicts with/Companion to/Relates to: None.
 Duplicates/Relates to Appropriation in the General Appropriation Act: None

SECTION III: NARRATIVE

BILL SUMMARY

Synopsis: HB 214 establishes a voluntary credentialing process for doulas. Some key points include:

- **Credentialing Process:** The bill requires the Secretary of Health to create rules for a voluntary program that allows doulas to become Medicaid providers.
- **Doula Definition:** A doula is a trained, nonmedical professional who provides support during the pre-conception period, pregnancy, childbirth, or postpartum period.
- **Eligibility:** The bill ensures that eligible Medicaid recipients can receive doula services during pregnancy and the first twelve months postpartum.
- **Collaboration:** It establishes a process for collaboration among state agencies, local government entities, and private entities to share information about services provided by credentialed doulas.
- **Annual Reporting:** The bill requires annual reporting on the program's progress and outcomes.
- **Doula Fund:** It creates a Doula Fund to support the program.
- **Hospital Policies:** Hospitals and freestanding birth centers must create policies to allow doulas to accompany patients receiving certain services.

FISCAL IMPLICATIONS

HB 214 does not include an appropriation to the Health Care Authority (HCA) or the Department of Health (DOH) but does create a Doula Fund.

- A. The "doula fund" is created as a non-reverting fund in the state treasury. The fund shall be administered by the DOH and consist of gifts, grants, donations and requests made to the fund.
- B. Money in the fund is subject to appropriation by the legislature to the DOH for purposes relevant to the provisions of the Doula Credentialing and Access Act.
- C. The DOH shall adopt rules on qualifications for grants and specify the format, procedure and deadlines for grant applications.
- D. Disbursements from the fund shall be made upon vouchers issued and signed by the secretary of DOH or the secretary's designee upon warrants drawn by the secretary of finance and administration.

SIGNIFICANT ISSUES

No significant issues for HCA.

PERFORMANCE IMPLICATIONS

Commented [FD1]: @Dancis, Alanna, HCA I am not understanding the significant issue here - do we need intro language?

Research indicates that doulas positively impact several maternal and infant health outcomes and experiences. See [ASPE-Doula-Issue-Brief-12-13-22.pdf](#)

The Medical Assistance Division of the HCA (NM Medicaid) added coverage for doula services as a new reimbursable preventative service. Doula services are anticipated to positively impact maternal and infant health outcomes and improve access to quality health care across the state, especially in rural and frontier areas where the state faces access to care challenges.

ADMINISTRATIVE IMPLICATIONS

HB 214 may require NMAC and supplements to be edited; for example, the current rules do include requiring hospital and freestanding birth centers to create policies to allow doulas to accompany patients receiving certain services.

HCA will need continued collaboration with Department of Health related to credentialing.

No IT impact.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

None

TECHNICAL ISSUES

Although the program may be voluntary for the recipient/member, the credentialing is required for Medicaid enrollment and reimbursement.

SECTION 3. A. The secretary shall adopt and promulgate rules relating to the following:

(1) the establishment and administration of a voluntary program for credentialing doulas, including the development of criteria for

Many sections of this bill are included in in NMAC 8.310.2 and supplement 25-01 with an effective date of January 1, 2025.

OTHER SUBSTANTIVE ISSUES

N/A

ALTERNATIVES

No alternatives identified

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

HCA has created a mechanism for doula reimbursement. The State Plan Amendment has already been approved by the Centers for Medicare and Medicaid Services (CMS), the letter of direction to MCOs already posted, and all system changes implemented at Medicaid. The only remaining piece for doulas to be able to be reimbursed via Medicaid is for them to have a path to state credentialing. This bill is necessary to achieve doula reimbursement within Medicaid.

Without this bill doulas will not be able to bill Medicaid for their services.

AMENDMENTS

No known amendments at this time.

