

LFC Requester:

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**AGENCY BILL ANALYSIS - 2025 REGULAR SESSION**

WITHIN 24 HOURS OF BILL POSTING, UPLOAD ANALYSIS TO

[AgencyAnalysis.nmlegis.gov](http://AgencyAnalysis.nmlegis.gov) and email to [billanalysis@dfa.nm.gov](mailto: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: 2/21/25

Check all that apply:

Bill Number: HB578Original  Correction Amendment  Substitute 

Agency Name

and Code

HCA 630

Number:

Sponsor: Rep. Jenifer JonesShort Title: Every Mother Matters ActPerson Writing Mark ReynoldsPhone: 505-531-7790 Email mark.reynolds@hca.n**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	NA	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
HCA MAD Staff	\$0.0	\$24.4	\$24.4	\$48.8	R	SF
HCA MAD Staff	\$0.0	\$24.3	\$24.3	\$48.6	R	GF

<b>Total</b>	\$0.0	\$48.7	\$48.7	\$96.4	R	<b>TOTAL</b>
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(Parenthesis ( ) Indicate Expenditure Decreases)

Duplicates/Conflicts with/Companion to/Relates to:  
 Duplicates/Relates to Appropriation in the General Appropriation Act

**SECTION III: NARRATIVE**

**BILL SUMMARY**

Synopsis:

Prohibits health care providers from providing abortion or pregnancy termination services without making a “resource access offer” to the patient. A resource access offer must include detailed information about (1) abortion and pregnancy termination, including medically accurate information about potential risks and long-term consequences, (2) the services available through the pregnancy launch program; (3) public assistance and other social services available to New Mexico residents; (4) crisis advocacy services for victims of domestic abuse or sexual violence, if applicable. Health care providers cannot bill making the resource access offer and must inform the patient that the program is optional. The resource access offer does not apply in the case of a medical emergency, which is limited to a “physical condition” by definition.

If there is a medical emergency, the provider must provide written certification to the Department of Health. Without an appropriation, requires the Department of Health to monitor compliance with the act an initiate enforcement action with may include provider license revocation. Also requires the Department of Health to report annually including a list of resource offers made with the patient’s location and the outcome of the offer and the number of emergency certifications received.

Without an appropriation, creates the Pregnancy Launch Program within the Department of Health to provide direct services and health care to pregnant people, new parents, infants and toddlers.

**FISCAL IMPLICATIONS**

As noted above, the bill creates a new program to provide many, substantial, services at no cost to program participants but does not contain an appropriation. By the terms of the bill, all residents of the state who are pregnant, who are biological or adoptive parents of a child younger than two years of age or who experienced pregnancy loss within the immediately preceding six months before applying to access services from the program are eligible to participate in the services.

The bill calls on the Department of Health to carry out all the requirements of the bill by “leveraging available funding” including services covered by HCA’s Medical Assistance Division but appropriates no state funding to leverage federal funds.

Electronic Medical Record review would be necessary to ensure compliance as HB578 does not allow a health care provider to shall not bill for making a resource access offer. The implementation of HB578 would require one half-time HCA/MAD employee and claims processing system edits. One (1) Half Time Employee (FTE) will be needed to implement, monitor and enforce HB578. One (1) FTE at pay-band 70 would cost \$48.7 thousands: this includes \$24.4

thousands in state funds and \$24.3 thousands in federal funds.

Claims system IT changes would be made at no additional cost.

## **SIGNIFICANT ISSUES**

Besides the unfunded mandate in the bill, it would seek to put additional resource and cost requirements on providers during a time in which the state is already experiencing a shortage of trained primary care providers and OB-GYNs. Coverage for reproductive health care services is already thin in many parts of the state and this bill could further endanger the situation. Addressing statewide provider shortages continues to be a significant challenge while developing and maintaining provider networks that meet the needs of a growing Medicaid population. This challenge is particularly acute in rural areas and “OB deserts,” where access to obstetric care and other essential health services is severely limited

The Department of Health would refer noncompliant licensed health facilities to the Health Care Authority Division of Health (DHI) to impose sanctions, However, DHI does not have jurisdiction over independent health care providers, and it is unclear who would impose sanctions for independent health care providers.

## **PERFORMANCE IMPLICATIONS**

New Mexico Medicaid covers services from pregnancy through the 12-month postpartum period to support the health and well-being of pregnant individuals and new parents with no-cost sharing. Medicaid eligibility is determined based on various factors, including income, and this bill does not change the existing income eligibility criteria for Medicaid. Eligible individuals receive full coverage Medicaid under category of eligibility (COE) 300 & 301. 8.293.600 +NMAC.

Some of the key services currently covered but not limited to:

- Prenatal Care-Regular check-ups, screenings, and treatments to ensure a healthy pregnancy.
- Labor and Delivery-Coverage for hospital stays and medical care during childbirth.
- Postpartum Care-Medical care for new mothers for up to 12 months after delivery.
- Case Management-Support and coordination of care for pregnant women and infants.
- Home Health Services-Assistance with medical needs at home for eligible individuals.
- Mental Health Services-Counseling and support for mental health issues related to pregnancy and postpartum.

HB 578 introduces changes to the current New Mexico Medicaid coverage for no-cost services to pregnant people and new parents through the Pregnancy Launch Program. Licensed health facilities and healthcare providers are required to make a resource access offer before providing certain services. This could increase the demand for Medicaid services as more individuals seek out these no-cost services leading to increased Medicaid utilization.

The Pregnancy Launch Program seems to offer comprehensive support and resources, which may include services for individuals who are not eligible for Medicaid.

## **ADMINISTRATIVE IMPLICATIONS**

If HB 578 were enacted as written New Mexico Medicaid would be required to update policy to

capture new requirements, partner with Department of Health to maintain current coverage information and develop a mechanism to ensure provider compliance. The Department of Health will be responsible for ensuring the successful implementation and ongoing oversight of the Pregnancy Launch Program, Coordinating with licensed health facilities and healthcare providers to make resource access offers before providing certain services, collecting and reporting data on the utilization and outcomes of the Pregnancy Launch Program, providing training and support to healthcare providers to ensure they are equipped to offer the necessary services and resources and engaging with the community to raise awareness about the Pregnancy Launch Program and the available resources.

#### **CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP**

HB578 relates to House Bill 236 which requires the notification and posting of a notice to patients regarding medication abortions, specifically using the drug mifepristone, and Senate Bill 57, which would exclude personal information on abortion-related healthcare providers from the Inspection of Public Records Act.

#### **TECHNICAL ISSUES**

None for HCA

#### **OTHER SUBSTANTIVE ISSUES**

None for HCA

#### **ALTERNATIVES**

None for HCA

#### **WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL**

Status quo

#### **AMENDMENTS**

No Amendments at this time.