

LFC Requester:

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AGENCY BILL ANALYSIS - 2025 REGULAR SESSION

SECTION I: GENERAL INFORMATION

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

Date Prepared: 2/24/2025

Check all that apply:

Bill Number: SB42

Original Correction
Amendment Substitute

Sponsor: Sen. Michael Padilla,
Rep. Gail Armstrong, Sen.
Elizabeth "Liz" Stefanics

Agency Name and Code Number: 305 – New Mexico
Department of Justice

Short Title: COMPREHENSIVE
ADDICTION AND
RECOVERY PGM

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SECTION II: FISCAL IMPACT

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Nonrecurring	Fund Affected
FY25	FY26		

(Parenthesis () indicate expenditure decreases)

REVENUE (dollars in thousands)

Estimated Revenue			Recurring or Nonrecurring	Fund Affected
FY25	FY26	FY27		

(Parenthesis () indicate revenue decreases)

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

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

(Parenthesis () Indicate Expenditure Decreases)

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

SECTION III: NARRATIVE

This analysis is neither a formal Opinion nor an Advisory Letter issued by the New Mexico Department of Justice. This is a staff analysis in response to a committee or legislator’s request. The analysis does not represent any official policy or legal position of the NM Department of Justice.

BILL SUMMARY

SB 42 makes amendments to the Voluntary Placement and Family Services Act, NMSA 1978, §§ 32A-3A-1 to -25 (1993, as amended through 2023)

Synopsis:

Section 1(Y) amends NMSA 1978, § 32A-1-4 (1993), clarifying that the definition is for a plan of “safe” care and provides prenatal or perinatal support to pregnant persons dealing with substance use disorder.

Section 2(A) amends NMSA 1978, § 32-3A-13 (2019), putting the Department of Health and Health Care Authority in charge of developing the rules and overseeing the regulation related to hospitals, insurance, etc.

Section 2(B)(1) amends NMSA 1978, § 32-3A-13 (2019) to address the new definition for a safe care plan and requires that a plan of safe development is completed before discharge and that the plan is provided to the child’s primary care physician.

Section 2(B)(1)(b) amends NMSA 1978, § 32-3A-13 (2019) to remove an insurance plan care coordinator from monitoring the safe care plan.

Section 2(B)(2) amends NMSA 1978, § 32-3A-13 (2019) to require that hospitals, birthing centers, and prenatal care providers comply with the treatment program and safe care plan. The next few sections are changed to add the word “safe” to the plan of care.

Section 2(B)(4) amends NMSA 1978, § 32-3A-13 (2019), listing the requirements that the department is subject to, which include ensuring that there is at least one birthing coordinator available in each birthing hospital in the state; that all substance-exposed children have a plan of safe care, receive care coordination to implement the plan, and that training is provided to hospital staff for intervention and referral to treatment programs.

Section 2(B)(5) amends NMSA 1978, § 32-3A-13 (2019), rewriting the section to include home visit programs and substance use disorder prevention and treatment providers.

Section 2(B)(7) amends NMSA 1978, § 32-3A-13 (2019) to provide the requirements of

what the care coordinators will undertake in working with substance-exposed children and their families and to use evidence-based intensive care coordination models.

Section 2(E) amends NMSA 1978, § 32-3A-13 (2019) to have the Department of Health overseeing the reporting and data collection instead of the Department of Children, Youth, and Families. Also included are updated requirements on what data will be collected, which include what drugs the child was exposed to, if the family or child was reported, what services were recommended, and demographic and geographic data.

Section 3(A) amends NMSA 1978, § 32A-3A-14 (2019) to include the wording “Safe” to Plan of Care and amends Section A to put the Department of Health in charge of the plans and changes the statute from may issue a plan to shall issue a plan. This change requires that the Department of Health conduct a family assessment if the plan of safe care is not followed.

Section 4(H) amends NMSA 1978, § 32A-3A-14 (2019) amends Section H, removing the volunteer and requiring that a contractor or staff member of a hospital, clinic, or birthing center be required to notify the department of health and complete a written plan of safe care.

Section 5 has the changes take effect July 1, 2025.

FISCAL IMPLICATIONS

N/A

SIGNIFICANT ISSUES

N/A

PERFORMANCE IMPLICATIONS

N/A

ADMINISTRATIVE IMPLICATIONS

N/A

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

HB136 amends NMSA 1978, § 30-6-1 to include a child exposed to fentanyl as prima facie evidence of child abuse as it impacts when a plan of safe care would be issued. This also creates the issue of fentanyl still being a prescription drug and its impact on people unaware they might be pregnant.

HB383 is related to SB42 as it is changing the statute of child abuse to include exposing a child to fentanyl. The difference to HB136 is that HB383 requires the intent of knowingly exposing a child to fentanyl to make it prima facie evidence of child abuse. Like HB136, this change would impact when a plan of safe care is issued.

HB303 is related to SB42 since it addresses child abuse as it relates to controlled substances and children that test positive at birth. HB303 would also require that a plan of safe care be issued if a recently born child tested positive for a controlled substance without a lawful intake. HB303 would not require a plan for safe care under SB42 if the child tested positive for lawful use of a controlled substance.

TECHNICAL ISSUES

N/A

OTHER SUBSTANTIVE ISSUES

The addition of "...or a pregnant person who agrees to creating a plan of safe care,..." to NMSA 32A-4-3(H)(1) appears to refer to a pregnant person who tests positive for drugs. If this is the intent, consider clarifying that the section refers to a pregnant person that has tested positive for a controlled substance.

ALTERNATIVES

N/A

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

Status quo.

AMENDMENTS

N/A