Kelly Klundt

# 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:	2/4/25	Check all that apply:		
<b>Bill Number:</b>	SB252	Original	_x Correction	
		Amendment	Substitute	

		Agency Name and Code	HCA-630	
Sponsor:	Sen Figueroa	Number:		
Short	Social Worker Telehealth	Person Writing		Jacqueline Nielsen
Title:		505-709	-5622	Email Jacqueline.Nielsen@h

#### **SECTION II: FISCAL IMPACT**

### **APPROPRIATION** (dollars in thousands)

Appropr	iation	Recurring	Fund Affected	
FY25	FY26	or Nonrecurring		
\$0.0	\$0.0	N/A	N/A	

(Parenthesis () indicate expenditure decreases)

#### **REVENUE** (dollars in thousands)

	Recurring	Fund		
FY25	FY26	FY27	or Nonrecurring	Affected
\$0.0	\$0.0	\$0.0	N/A	N/A

(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	\$0	Indeterminate	Indeterminate	Indeterminate	recurring	General Fund/Federal Fund

(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**

<u>Synopsis</u>: Senate Bill 252 amends the NM Telehealth Act, allowing all levels of licensed social workers (previously independent only), certified peer support workers, or any other healthcare professional that received a Medicaid provider identification number from the Health Care Authority to administer telehealth services.

# FISCAL IMPLICATIONS

#### Medical Assistance Division (MAD)

The state's Medicaid program allows broad use of telehealth services as described in  $\underline{8.310.2}$  <u>NMAC</u>. This bill may increase the utilization of telehealth services but also may allow Medicaid members to access care in a more timely manner so the impact to budget is likely small.

None for Behavioral Health Services Division (BHSD). None for State Health Benefits (SHB).

#### SIGNIFICANT ISSUES

None for MAD. None for BHSD. None for SHB.

# PERFORMANCE IMPLICATIONS

This provision can reduce barriers to care, especially in cases where local provider capacity is limited. Expanding the list of eligible telehealth providers could lead to a more comprehensive approach to care, particularly for mental health and community-based services, with the inclusion of certified peer support workers and other professionals.

None for BHSD

None for SHB.

# ADMINISTRATIVE IMPLICATIONS

None for MAD. None for BHSD, None for SHB. No IT impact.

**CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP** SB12-630 Out of State Telehealth Providers

TECHNICAL ISSUES None

# **OTHER SUBSTANTIVE ISSUES**

The bill aligns with broader national efforts to expand telehealth use, particularly in response to lessons learned during the COVID-19 Public Health Emergency. It reflects an approach to leveraging technology for healthcare delivery.

# ALTERNATIVES

N/A

# WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

Capacity to offer telehealth services will not be expanded.

# AMENDMENTS