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## FISCAL IMPACT REPORT

ORIGINAL DATE 1/18/19

SPONSOR Trujillo, CH LAST UPDATED \_\_\_\_\_ HB 59

SHORT TITLE No Professional Art Therapist Discrimination SB \_\_\_\_\_

ANALYST Chilton

### ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY19	FY20	FY21	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
<b>Total</b>	NFI	NFI	NFI	NFI		

(Parenthesis ( ) Indicate Expenditure Decreases)

Relates to 2017 House Bill 216

### SOURCES OF INFORMATION

LFC Files

#### Responses Received From

Office of the Superintendent of Insurance (OSI)

Retiree Health Care Authority (RHCA)

### SUMMARY

#### Synopsis of Bill

House Bill 59 would amend the Health Purchasing Act, the Public Assistance Act, and the New Mexico Insurance Code to

- Add professional art therapists to the list of those “participating mental health or other providers” who provide paid services to health plan enrollees
- Prohibits discrimination against professional art therapists,
- Requires professional art therapists to be treated like any other mental health practitioner,
- Allows for varying reimbursement rates among mental health care practitioners based on quality or performance measures, and
- Defines mental health care practitioner, participating provider and professional art therapist.

The three sections of the bill refer to different types of health insurance, but make the same requirement for each. They are as follows: Section 1: Health Care Purchasing Act (group health

insurance and any form of self-insurance under the Health Care Purchasing Act); Section 2: Public Assistance Act (Medicaid), Section 3: Other forms of insurance offered within New Mexico.

## **FISCAL IMPLICATIONS**

Responding agencies could not identify either costs or cost savings from the current bill.

## **SIGNIFICANT ISSUES**

According to the American Art Therapy Association, art therapy is widely practiced in a wide variety of settings including hospitals, psychiatric and rehabilitation facilities, wellness centers, forensic institutions, schools, crisis centers, senior communities, private practice, and other clinical and community settings. During individual and/or group sessions art therapists elicit their clients' inherent capacity for art making to enhance their physical, mental, and emotional well-being. Research supports the use of art therapy within a professional relationship for the therapeutic benefits gained through artistic self-expression and reflection for individuals who experience illness, trauma, and mental health problems and those seeking personal growth.

The Office of the Superintendent of Insurance (OSI) stated in 2017 in response to that year's House Bill 216 that in the existing network adequacy regulations for the Insurance Code, health insurance carriers are not required to have any particular kind of behavioral health providers (although they must have enough behavioral health providers to serve the area in which the consumer resides). OSI has a workgroup with stakeholders, to rework the network adequacy regulations using the model provided by the National Association of Insurance Commissioners (NAIC). Therefore, there is the probability that in the future, revised regulations will include more specific behavioral-health-type providers, notably those called out in the New Mexico Counseling and Therapy Practice Act. OSI would welcome comments from art therapists to its network adequacy workgroup.

OSI commented further regarding the current bill, "In surveying insurance companies about their inclusion of art therapists in network, a number of the carriers pointed out that under Medicaid guidelines they were prohibited from independently contracting with some art therapists due to their licensure status, see NMAC 8.321.2.9(H). Licensed practicing art therapists are currently not included in this provision, however the carriers do contract with higher level supervisors of these practitioners. The carriers recommend revisions to NMAC 8.321.2.9(H)."

LAC/sb/al