

LFC Requestor: ESQUIBEL, RubyAnn

**2025 LEGISLATIVE SESSION
AGENCY BILL ANALYSIS**

Section I: General

Chamber: House

Category: Bill

Number: 95

Type: Introduced

Date (of THIS analysis): 01-23-25

Sponsor(s): Pamela Herndon, Katy M. Duhigg, Yanira Gurrola

Short Title: Coverage for Fertility Preservation Services

Reviewing Agency: Agency 665 - Department of Health

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Section II: Fiscal Impact

APPROPRIATION (dollars in thousands)

Appropriation Contained		Recurring or Nonrecurring	Fund Affected
FY 25	FY 26		
\$0	\$0	N/A	N/A

REVENUE (dollars in thousands)

Estimated Revenue			Recurring or Nonrecurring	Fund Affected
FY 25	FY 26	FY 27		
\$0	\$0	\$0	N/A	N/A

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY 25	FY 26	FY 27	3 Year Total Cost	Recurring or Non-recurring	Fund Affected
Total	\$0	\$0	\$0	\$0	N/A	N/A

Section III: Relationship to other legislation

Duplicates: None

Conflicts with: None

Companion to: None

Relates to: None

Duplicates/Relates to an Appropriation in the General Appropriation Act: None

Section IV: Narrative

1. BILL SUMMARY

a) Synopsis

House Bill 95 (HB95) proposes to enact new sections of the Health Care Purchasing Act and the New Mexico Insurance Code to allow for fertility preservation services to be covered in certain circumstances.

Is this an amendment or substitution? Yes No

Is there an emergency clause? Yes No

b) Significant Issues

House Bill 95 (HB95) will require insurance plans to cover fertility preservation services, which are procedures which help people maintain their ability to have children. These can be used before medical treatments that may cause infertility, such as chemotherapy or radiation therapy.

A survey conducted of employer-sponsored health plans found that 44 percent of employers with at least 500 employees did not cover infertility services, and 25 percent of companies with 20,000 or more employees did not cover infertility services. ([Coverage and Use of Fertility Services in the U.S. | KFF](#)). According to the CDC, 11% of women will experience infertility, leaving a significant portion of people unable to access fertility preservation services. ([National Health Statistics Reports Number 67 August 14, 2013](#))

Several other states have implemented similar legislation which improves fertility coverage. A map from the Alliance for Fertility Preservation, (<https://www.allianceforfertilitypreservation.org/state-legislation/>) shows that 19 states that instituted similar legislation. Most Utah, Colorado, Oklahoma, and Texas all have similar laws as proposed legislation.

2. PERFORMANCE IMPLICATIONS

- Does this bill impact the current delivery of NMDOH services or operations?

Yes No

If yes, describe how.

- Is this proposal related to the NMDOH Strategic Plan? Yes No

Goal 1: We expand equitable access to services for all New Mexicans

Goal 2: We ensure safety in New Mexico healthcare environments

Goal 3: We improve health status for all New Mexicans

Goal 4: We support each other by promoting an environment of mutual respect, trust, open communication, and needed resources for staff to serve New Mexicans and to grow and reach their professional goals

3. FISCAL IMPLICATIONS

- If there is an appropriation, is it included in the Executive Budget Request?
 Yes No N/A
- If there is an appropriation, is it included in the LFC Budget Request?
 Yes No N/A
- Does this bill have a fiscal impact on NMDOH? Yes No

4. ADMINISTRATIVE IMPLICATIONS

Will this bill have an administrative impact on NMDOH? Yes No

5. DUPLICATION, CONFLICT, COMPANIONSHIP OR RELATIONSHIP

None

6. TECHNICAL ISSUES

Are there technical issues with the bill? Yes No

7. LEGAL/REGULATORY ISSUES (OTHER SUBSTANTIVE ISSUES)

- Will administrative rules need to be updated or new rules written? Yes No
- Have there been changes in federal/state/local laws and regulations that make this legislation necessary (or unnecessary)? Yes No
- Does this bill conflict with federal grant requirements or associated regulations?
 Yes No
- Are there any legal problems or conflicts with existing laws, regulations, policies, or programs? Yes No

8. DISPARITIES ISSUES

The bill addresses disparities by ensuring coverage regardless of age, gender, marital status, or socioeconomic background, which supports broader reproductive rights and access.

Individuals in rural areas or with limited financial means may still face barriers to accessing fertility preservation services, such as travel and provider availability as the bill does not specifically mention Medicaid as a health plan covering fertility preservation.

9. HEALTH IMPACT(S)

Removing barriers to accessing fertility preservation services would be expected to have a positive impact on health and well-being for the population wishing to access these services by allowing individuals additional options to build and maintain families, especially when a person is about to undergo cancer treatment which may render them infertile.

10. ALTERNATIVES

None

11. WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL?

If HB95 is not enacted, insurance plans would not be required to cover fertility preservation services, which are procedures that help people maintain their ability to have children.

12. AMENDMENTS

None