

LFC Requester:

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AGENCY BILL ANALYSIS - 2025 REGULAR SESSION

WITHIN 24 HOURS OF BILL POSTING, UPLOAD ANALYSIS TO

[AgencyAnalysis.nmlegis.gov](https://www.legis.nm.gov/AgencyAnalysis) 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: 2/14/25

Check all that apply:

Bill Number: HB424Original Correction Amendment Substitute

Agency Name

and Code

HCA 630

Number:

Sponsor: Rep. Rebecca DowShort Title: Pregnancy & Family Care ActPerson Writing Kresta OppermanPhone: 505-231-8752 Email Kresta.opperman@hca**SECTION II: FISCAL IMPACT****APPROPRIATION (dollars in thousands)**

Appropriation		Recurring or Nonrecurring	Fund Affected
FY25	FY26		
\$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	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 FTE	\$0.0	\$48.7	\$48.7	\$97.4	Recurring	SGF
HCA FTE	\$0.0	\$48.6	\$48.6	\$97.2	Recurring	FF

Total	\$0.0	\$97.3	\$97.3	\$194.6	Recurring	TOTAL
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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: HB 424 enacts a new Pregnancy and Family Care Act to provide screening for pregnant patients for substance use disorder and prioritize treatment for those patients. It includes the development of family care plans to address related needs, such as substance use disorder treatment, mental health issues, health care needs, parenting skills, and child development.

HB 424 requires the New Mexico Department of Health to:

- Develop a notification system that is distinct from the system used for reporting allegations of abuse and neglect and require health care providers to notify the department regarding the birth of substance-exposed infants. The system will include disaggregated, non-personal identifying information, no later than October 1, 2025.
- Ensure that hospitals, birthing centers, and other facilities provide all postpartum patients with information regarding the development of voluntary family care plans.
- Develop educational and training materials for health care providers and others providing services to pregnant and postpartum patients regarding family care plans.
- Set up statewide and county advisory councils to provide recommendations to the department related to the implementation of the Pregnancy and Family Care Act.

HB 424 defines “department” means the department of health.

The department of health, in collaboration with the relevant state agencies and other stakeholders, shall create educational and training materials

- to support health care providers, substance use disorder providers, first responders, law enforcement agencies and others providing services to pregnant and postpartum patients and substance-exposed infants
- educational materials for members of the public who may become pregnant and have a substance use disorder

FISCAL IMPLICATIONS

HB424 has minimal fiscal implication for HCA. HB424 does not provide appropriations to HCA, nor does it add new services to be covered by New Mexico Medicaid however there will be costs described in the administrative implications section related to MAD monitoring and oversight functions.

One (1) Full Time Employee (FTE) needed to implement, monitor and enforce HB424, at pay-band 70, would cost \$97.3 thousands, \$48.7 thousands in state funds and \$48.6 thousands in federal funds.

SIGNIFICANT ISSUES

NA

PERFORMANCE IMPLICATIONS

The Pregnancy and Family Care Act could potentially provide comprehensive support for pregnant and postpartum patients, which could lead to improved health outcomes and potentially lower costs in the long run.

A pregnant or postpartum patient referred to a substance use disorder treatment provider shall be given priority for starting available treatment. A substance use disorder treatment provider who receives state or federal funds shall not refuse to treat a patient because the patient is pregnant, postpartum or already receiving medication for substance use disorder.

A pregnant or postpartum patient who is incarcerated in a state correctional facility or county jail, participating in a court-supervised program or on parole or probation shall receive substance use disorder treatment or continue to receive substance use disorder treatment as recommended by the patient's health care provider.

ADMINISTRATIVE IMPLICATIONS

A hospital, birthing center or other facility shall provide the department, each quarter, with information regarding the number of patients who have been provided with information regarding the development of a family care plan including instructions for follow-up starting January 1, 2026.

Implementing HB 424 would require MAD staff for NMAC revisions, issuing Managed Care Organization letters of direction, provider supplements and prior authorizations.

No IT impact.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

HB 424 work overlaps with CARA Plan of Care and notification. Relates to SB 42 New CARA requirements.

TECHNICAL ISSUES

None

OTHER SUBSTANTIVE ISSUES

A health care provider shall not directly bill a pregnant or postpartum patient for any service related to substance use disorder treatment who has insurance coverage, unless the health care provider receives a prior authorization rejection, rejection for payment of a claim or denial of coverage from the patient's insurer.

ALTERNATIVES

None

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

Continue with CARA Plan of Care and notification per LOD #23 Comprehensive Addiction Recovery Act (CARA) Program Plan of Safe Care, LOD #105 Care Coordination for Comprehensive Addiction and Recovery Act (CARA) Infants and Supplement #24-19 <https://www.hca.nm.gov/wp-content/uploads/Supplement-24-19-CARA-Program-FINAL.pdf>

AMENDMENTS

None