AGENCY BILL ANALYSIS - 2025 REGULAR SESSION

WITHIN 24 HOURS OF BILL POSTING, UPLOAD ANALYSIS TO

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(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}

Check all that apply:

Original X Amendment Date Prepared: 2025-02-19
Correction Substitute Bill No: HB466

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PROTECTION

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SECTION II: FISCAL IMPACT

APPROPRIATION (dollars in thousands)

Appropriation		Recurring	Fund	
FY25	FY26	or Nonrecurring	Affected	

REVENUE (dollars in thousands)

Estimated Revenue			Recurring	Fund	
FY25	FY26	FY27	or Nonrecurring	Affected	

ESTIMATED ADDITIONAL OPERATION BUDGET (dollars in thousands)

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

Duplicates/Conflicts with/Companion to/Relates to:

Duplicates/Relates to Appropriation in the General Appropriation Act:

SECTION III: NARRATIVE

BILL SUMMARY

HB 466, titled the Hormone Therapy and Puberty Blocker Child Protection Act, proposes restrictions on gender-affirming medical care for minors. It establishes new regulations, penalties, and legal actions related to hormone therapy and puberty blockers for individuals under 18. Details of what the bill proposes are:

- 1. Prohibition of Gender-Affirming Medical Procedures for Minors
- * Bans puberty blockers, hormone treatments, and gender-affirming surgeries for minors.
- * Exceptions apply only for treating congenital defects, precocious puberty, diseases, or physical injuries—but not for gender dysphoria or related conditions.
- * Minors who began treatment before the law's enactment must conclude treatment by December 31, 2025 unless discontinuing would be medically harmful.
- 2. Parental Notification Requirements
- * Healthcare providers and public bodies must notify parents within seven days if a minor takes any "gender-affirming action," such as:
- * Using different pronouns.
- * Changing their name.
- * Requesting mental health or medical services for gender identity.
- * Healthcare providers and public bodies also would be required to notify and obtain consent of at least one parent of a minor before engaging with them about the use of or access to reproductive health care, including birth control, treatment of sexually transmitted infections, and abortion.
- 3. Private Right of Action and Penalties
- * Allows minors or parents to sue healthcare providers for violations.
- * Courts may award compensatory damages, punitive damages, and attorney fees.
- * If a healthcare provider knowingly violates the act, their license could be revoked or suspended.

- * The Attorney General or a District Attorney can bring civil actions with penalties of \$5,000 per violation.
- 4. Restrictions on Public Bodies
- * Public bodies, including schools and government-funded health providers:
- * Cannot offer gender-affirming care to minors.
- * Cannot provide information or referrals related to gender-affirming care.
- * Must notify parents if a minor seeks information about gender-affirming treatment.

FISCAL IMPLICATIONS

The proposed bill does not directly cause fiscal challenges for CYFD. However, New Mexico Medicaid currently covers gender-affirming care for minors. If the bill prohibits these services, the state might lose federal healthcare funding related to gender-affirming care. Additionally, minors who are denied treatment in New Mexico may seek care out of state, shifting financial burdens to families and possibly leading to legal challenges over denied coverage. The ban could increase the need for mental health services, which may strain state-funded programs already dealing with high demand. It may also impact contracts developed by CYFD for providers that work with LGBTQ+ youth.

SIGNIFICANT ISSUES

If enacted, HB466 will pose significant challenges for the state and CYFD as other states with similar laws have faced lawsuits, with courts ruling that restrictions violate equal protection rights and parental rights to make medical decisions for their children. Providers or families may challenge the law's constitutionality, leading to costly litigation for the state.

This may lead to increases in child welfare reports and caseloads as restrictions on gender-affirming care could lead to more minors experiencing family rejection, increasing their risk of homelessness, depression, and suicide. If families refuse to support their child's gender identity, more youth may enter the foster care system, further straining resources.

In addition to gender-affirming care, this bill would also restrict access to reproductive health care for minors and would require notification of and consent by at least one parent. This could change New Mexico's current law that allows youth 14 years and older to consent to their own medical and reproductive care. It may deter minors from seeking information and resources, including birth control, pregnancy testing, and testing for sexually transmitted

infections (STIs) and may lead to higher teen pregnancy rates and transmission of STIs. It also may place youth in need of reproductive health care at risk or in danger if they lose confidentiality and the ability to seek reproductive health care, if their families do not consent or do not agree with their choices. This could lead to increased family rejection and domestic violence, as well as homelessness, mental health issues, and suicide for youth.

The threat of lawsuits and license revocations may deter healthcare providers from treating LGBTQ+ youth, even for unrelated conditions. The law could lead to additional medical provider shortages in New Mexico if professionals relocate to states where they can practice without legal risks.

PERFORMANCE IMPLICATIONS

CYFD would need to adjust its procedures to align with the proposals for this bill which could decrease the support and work that CYFD funds for work with LGBTQ+ youth throughout the state. As mentioned above, youth may face higher rates of homelessness, family rejection, depression, and suicide when they lack access to reproductive health care and transgender youth are particularly vulnerable and at-risk if they are unable to access gender-affirming care. If welfare system may see this bill leads to increased family conflict, the child services, or foster care more cases of minors in need of housing, support services.

ADMINISTRATIVE IMPLICATIONS

CYFD would need to update policy and procedure to align with this bill proposal if enacted.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

None.

TECHNICAL ISSUES

None.

OTHER SUBSTANTIVE ISSUES

This bill would change New Mexico's established laws that allow youth 14 years of age and older to consent to or deny medical and mental health treatment and would deny them safe, confidential access to some of the most necessary health

treatment. The bill creates an unnecessary and improper distinction between medical care versus "reproductive health care" and "gender-affirming care."

ALTERNATIVES

None.

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

None. Youth, particularly transgender youth, in New Mexico would still have the ability to safely access reproductive healthcare and gender-affirming care, which promotes their safety, development, and well-being.

AMENDMENTS

None.