

LFC Requestor: KLUNDT, Kelly

2025 LEGISLATIVE SESSION  
AGENCY BILL ANALYSIS

Section I: General

Chamber: Senate  
Number: 252

Category: Bill  
Type: Introduced

Date (of THIS analysis): 02/05/2025

Sponsor(s): Natalie Figueroa

Short Title: Allowing Social workers to Provide Telehealth Services

Reviewing Agency: Agency 665 - Department of Health

Analysis Contact Person: Arya Lamb

Phone Number: 505-470-4141

e-Mail: [arya.lamb@doh.nm.gov](mailto:arya.lamb@doh.nm.gov)

---

---

Section II: Fiscal Impact

APPROPRIATION (dollars in thousands)

Appropriation Contained		Recurring or Nonrecurring	Fund Affected
FY 25	FY 26		
\$ 0.00	\$ 0.00	N/A	N/A

REVENUE (dollars in thousands)

Estimated Revenue			Recurring or Nonrecurring	Fund Affected
FY 25	FY 26	FY 27		
\$ 0.00	\$ 0.00	\$ 0.00	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	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	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

SB252 would modify the New Mexico Telehealth Act (24-25-3 NMSA 1978), modifying the definition of a “health care provider”, changing podiatrist to “podiatric physician”, changing “licensed independent social worker” to “licensed social worker”, adding certified peer workers, and adding “any other health care professional who has received a Medicaid provider identification number from the health care authority” to the definition of “healthcare provider”. SB252 proposes allowing all licensed social workers to provide telehealth services.

Is this an amendment or substitution?  Yes  No.

Is there an emergency clause?  Yes  No

b) Significant Issues

The New Mexico Telehealth act was established by the New Mexico Legislature in 2023 to address lack of access to healthcare in medically underserved and geographically isolated areas of the state. It provides a framework for healthcare providers to follow in providing telehealth to New Mexico citizens when it is impractical for those citizens to receive healthcare consultations face-to-face. It does not alter the scope of work for any healthcare providers but provides an alternative when a face-to-face consultation is not possible. “Originating Site” is defined as a place where a patient may receive health care via telehealth including centers, clinics, or other healthcare setting. “Telehealth” is defined as including audio, video and other technologies.

Licensed social workers require a high level of specialized experience, education, and training to provide for the increasingly complex behavioral health, socioeconomic, and cultural needs of the individuals and families that they work with. Currently, New Mexico is experiencing a shortage of licensed professional social workers, and telehealth can

provide increased efficiency and productivity, as well as cost savings. Delays in preventive and direct care result in exacerbated conditions, expensive emergency department visits, and hospitalizations that could have been avoided.

SB 252 would change the definition of social worker to encompass all those licensed as a social worker rather than the current definition, which only allows licensed independent social workers to conduct telehealth services. By expanding the definition this would include all three levels of licensed social workers; baccalaureate social worker (LBSW), licensed master social worker (LMSW), and Licensed Clinical Social Worker (LCSW), which is known under regulation as a licensed independent social worker.

(<https://www.srca.nm.gov/nmac-home/nmac-titles/title-16-occupational-and-professional-licensing/chapter-63-social-workers/>)

While each of these licenses provides various services and different levels of care from case management to direct support, social workers at all levels serve an important role in case management, direct support, community referrals, and advocacy in healthcare settings. (<https://pmc.ncbi.nlm.nih.gov/articles/PMC7435073/>).

By expanding the definition of social workers, more people would be available to provide services through telehealth to rural communities. According to the 2024 Social Workers of New Mexico Survey, completed by New Mexico Highlands University, social workers are experiencing very high caseloads, and experience burnout and financial burdens (<https://www.nmhu.edu/wp-content/uploads/2024/07/2024survey.pdf>) By expanding the ability of social workers to complete telehealth services, we can increase the numbers of social workers available and expand the social workers earning potential.

Modifying the definition of “health care provider” to add people certified or registered to provide health care to patients and adding certified peer support workers; or any other health care professional who has received a Medicaid provider identification number from the health care authority would expand what is currently considered the provision of health care to include all types of services technically eligible for Medicaid reimbursement, but not necessarily health care services.

## 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

SB242 attempts to address disparities around access to health care for medically underserved communities who have difficulty with recruitment and retention of professionals. Telehealth may improve access to an array of care for members of these communities who have barriers such as transportation to seek care in other regions of the State.

#### 9. HEALTH IMPACT(S)

SB 252 would positively impact rural communities by increasing support services, advocacy, and mental health services to rural communities.

#### 10. ALTERNATIVES

None.

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

If SB 242 is not enacted, then there will be no allowance for social workers with all levels of licensure to provide telehealth services.

#### 12. AMENDMENTS

It is recommended that “public health office” be added to section B, which defines originating site.