

LFC Requestor: KLUNDT, Kelly

2025 LEGISLATIVE SESSION
AGENCY BILL ANALYSIS

Section I: General

Chamber: Senate
Number: 371

Category: Bill
Type: Introduced

Date (of THIS analysis): 2/13/2025
Sponsor(s): William E. Sharer
Short Title: Safety Requirements for Abortions

Reviewing Agency: Agency 665 - Department of Health
Analysis Contact Person: Arya Lamb
Phone Number: 505-470-4141
e-Mail: 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	\$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

Senate Bill 371 (SB371) proposes to add a new section to the Public Health Act related to reproductive health care safety. This legislation would create restrictions regarding the health care professionals able to provide procedural and medication abortions, with the former only by a licensed physician in a licensed health facility and the latter only by a licensed physician.

Is this an amendment or substitution? Yes No

Is there an emergency clause? Yes No

b) Significant Issues

Currently both procedural and medication abortions can be provided by health care professionals such as Nurse Practitioners and other advanced practice clinicians, within their scope of practice and as overseen by their respective licensing entities.

While SB371 purports to be related to safety requirements, current data and guidance do not support that these services are safer when provided by a licensed physician versus other professionals. The World Health Organization recommends that abortion can be provided at different levels of the healthcare system. Training mid-level providers, such as midwives, nurses, and other non-physician providers to conduct first trimester aspiration abortions and manage medical abortions has been proposed to increase women's access to safe abortion procedures. Based on 8 studies with 22,018 participants, there was no significant difference in the risk of complications between mid-level providers and doctors. (<https://pubmed.ncbi.nlm.nih.gov/26214844/#:~:text=For%20surgical%20abortion%20procedures%2C%20we,to%202.72%20from%20observational%20studies>.)

Limiting procedural and medication abortions to physicians would decrease access to these services. This would indirectly reduce safety for patients, especially if limiting the provider type to physicians limits timely accessibility to procedures. Legal induced abortion has

been shown in numerous studies to be safer than childbirth. A review of multiple data sources including the Centers for Disease Control and Prevention's (CDC) Pregnancy Mortality Surveillance System found that the pregnancy-associated mortality rate among women who delivered live neonates was 8.8 deaths per 100,000 live births. In comparison, the mortality rate related to induced abortion was far lower at 0.6 deaths per 100,000 abortions.

<https://pubmed.ncbi.nlm.nih.gov/22270271/#:~:text=The%20risk%20of%20death%20as%20sociated,Level%20of%20evidence%3A%20II.>

2. PERFORMANCE IMPLICATIONS

- Does this bill impact the current delivery of NMDOH services or operations?
 Yes No
- 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

This bill would limit the scope of practice of a variety of health care professions, necessitating rulemaking to change their allowable activities.

8. DISPARITIES ISSUES

Where abortion is illegal or highly restricted, pregnant people may resort to unsafe means to end an unwanted pregnancy, including self-inflicted abdominal and bodily trauma, ingestion of dangerous chemicals, and reliance on unqualified or predatory abortion providers.

9. HEALTH IMPACT(S)

Where abortion is illegal or highly restricted, pregnant people may resort to unsafe means to end an unwanted pregnancy, including self-inflicted abdominal and bodily trauma, ingestion of dangerous chemicals, and reliance on unqualified or predatory abortion providers. Limiting the types of providers who can deliver medication and procedural abortion would increase health care professional shortages, probably most severely in rural and frontier parts of the state. That would mean increased gaps in access to safe, legal and best practice reproductive care.

10. ALTERNATIVES

None.

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

If SB371 is not enacted, a new section would not be added to the Public Health Act related to reproductive health care safety. There would not be a restriction of the health care professionals able to provide procedural and medication abortions, with the former only by a licensed physician in a licensed health facility and the latter only by a licensed physician.

12. AMENDMENTS

None.