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FISCAL IMPACT REPORT

SPONSOR	Jennings	ORIGINAL DATE 01 LAST UPDATED	3/02/11 HB	
SHORT TITL	E Contraceptive Med	ication to Certain Mothers	SB	548
			ANALYST	Hanika-Ortiz

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY11	FY12	FY13	3 Year Total Cost	Recurring or Non-Rec	Fund Affected
Total		*See fiscal impact			Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From
Department of Health (DOH)
Attorney General's Office (AGO)

SUMMARY

Synopsis of Bill

Senate Bill 548 (SB 548) provides procedures to initiate the provision of contraceptive medication to women who give birth to a drug- or alcohol- addicted baby for a second time.

FISCAL IMPLICATIONS

SB 548 proposes that the cost of providing the contraceptive medication shall be paid for by DOH. Based on current federal guidelines, DOH asserts that Title X grant funds from the Family Planning Program cannot be used to pay for contraceptive medication ordered by the district court and, therefore, DOH will have to identify an alternative funding source for contraceptives.

The cost for a contraceptive implant depends on insurance, copays, and the facility. The cost of the exam, contraceptive implant device, and insertion ranges from \$400–\$800. Removal costs between \$75 and \$150. The total cost pays for pregnancy protection that can last for three years. Planned Parenthood works to make reproductive health care accessible and affordable. Some health centers are able to charge according to income. Most accept health insurance. If one qualifies, state Medicaid programs may help lower those health care costs.

Senate Bill 548 – Page 2

Reports are varied, but on average drug-addicted babies spend an average of 10.4 days in the hospital, compared to 2.3 days for a healthy child, and the initial costs appear to be about \$3,000 higher than for the treatment of the drug-addicted child. Of course, depending upon developmental delays which may not always be present, the costs for health care and special education may continue as the child grows older.

The district courts may see an increase in activity depending upon how many petitions are brought forth by DOH.

SIGNIFICANT ISSUES

Senate Bill 548 (SB 548) will require DOH to develop procedures to identify women who give birth to "drug- or alcohol-addicted babies." In the event that a woman "gives birth to a drug- or alcohol-addicted baby for a second time" DOH will be required to petition "the district court for the judicial district in which the woman gave birth" to initiate the provision of contraceptive medication to the woman "as prescribed by a physician for the woman." If the Court ruled in DOH's favor, the woman will be required to initiate contraceptive medication but could petition for removal of the court order "provided that the woman has remained drug- and alcohol-free for a period of no less than one year."

PERFORMANCE IMPLICATIONS

The AGO asserts that this bill is vulnerable to legal challenge on grounds that it is unconstitutionally vague and violates several provisions of the U.S. Constitution Bill of Rights.

ADMINISTRATIVE IMPLICATIONS

Some states are amending their civil child welfare laws to address specifically the subject of a woman's drug use during pregnancy. These laws vary considerably: in some states a pregnant woman's drug use is supposed to trigger only an evaluation of parenting ability and the provision of services, whereas in others it provides the basis for presuming neglect or qualifies as a factor to be considered in terminating parental rights.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

SB 548 relates to SB 353 which proposes a new section to the Family Planning Act. That new section will require any publicly-funded health care facility that provides substance abuse treatment to assess whether a patient is in need of family planning services and provide these services or refer the patient for family planning services if they are not available at the health care facility.

OTHER SUBSTANTIVE ISSUES

Fear may deter drug and alcohol dependent women from obtaining necessary health care which may cause greater harm to both maternal and fetal health. Recent studies suggest poverty and stress are just as harmful on early brain development.

Addiction disorders in pregnancy present a unique challenge and public health dilemma as the rights and health needs of the pregnant, substance-abusing mother must be balanced with optimizing health outcomes for her fetus and family.

Senate Bill 548 – Page 3

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

Procedures to initiate the provision of contraceptive medication to women who give birth to a drug- or alcohol-addicted baby for a second time will not be established.

POSSIBLE QUESTIONS

What physical coercion will be permitted to force a long-term court-imposed contraception?

AHO/bym