



Medication Abortion Care & Telehealth Policies At A Glance

Abortion Care in New Mexico

- *Women in New Mexico have limited access to abortion care.* 91% of New Mexico counties in 2017 did not have an abortion provider.¹
- Abortion is an essential, time sensitive health care service. Medically unnecessary restrictions push medication abortion care, which is a non-invasive abortion option that is approved by FDA for use up to 10 weeks in pregnancy, out of reach for many.
- Being denied care can negatively impact the health and wellbeing of women and their families. Women who were denied a wanted abortion had four times greater odds of living below the Federal Poverty Level and were more likely to experience poorer health outcomes for years after the pregnancy.²
- People seeking abortion already face significant barriers to receiving quality care. Restrictions on abortion care and insurance coverage disproportionately impact people working to make ends meet, immigrants, young people, and women of color.³
- New Mexicans support access to abortion care. A majority of New Mexico voters say that abortion should be legal in all or most cases.⁴ A separate survey of Indigenous and people of color, people of faith, and people living in rural communities found that 74% agree personal decisions about abortion need to remain with New Mexican women, their families, and their medical providers.⁵

Telehealth: A Tool for Expanding Access to Medication Abortion Care

- Telehealth is a tool that can expand abortion access. Research shows that telehealth reduces barriers to care and can help patients access care earlier in pregnancy.⁶
- Relative to other states' policies, New Mexico's policies regarding the delivery of telehealth services to Medicaid members and enrollees of other health plans are expansive.
- Advocates have accomplished much to advance abortion access in New Mexico. Given the geographic proximity to states that severely restrict or may ban abortion access, there will likely be a significant uptick in demand for services. This makes flexibilities in telehealth care imperative for New Mexico and the abortion care ecosystem.

For more information on telehealth for medication abortion care, visit:

- <u>Telehealth for Medication Abortion Care</u>
- Telehealth for Medication Abortion Care Process Chart
- Equity in Telehealth for Medication Abortion Care Checklist

Barriers to the Provision of Telehealth for Medication Abortion Care in New Mexico

• Inequitable and burdensome reporting requirements: Every Medicaid patient must reveal the reason for their abortion as part of an additional certification providers must submit.⁷ In addition, for all patients who undergo an abortion in New Mexico, providers must submit a medically unnecessary report.

¹Guttmacher Institute. <u>State Facts About Abortion: New Mexico.</u> 2022.

² Greene Foster, G. <u>The Turnaway Study: Ten Years, a Thousand Women, and the Consequences of Having—or Being Denied—an</u> <u>Abortion</u>. June 2020.

³ Boonstra, H. <u>Abortion in the Lives of Women Struggling Financially: Why Insurance Coverage Matters</u>. Guttmacher Policy Review. 2016.

⁴ Pew Research Center. <u>Views about abortion by state - Religion in America: US Religious Data, Demographics and Statistics.</u> 2014.

⁵ Cadena, D. & Martin, N. <u>New Mexicans fought for abortion access and won</u>. *Prism*. August 2021.

⁶ Aiken, A., et al. Effectiveness, safety and acceptability of no-test medical abortion provided via telemedicine: 16 a national cohort study. British Journal of Obstetrics & Gynecology. February 2021.

- Patients already undergo informed consent as part of standard medical care, and this additional paperwork exacerbates inequities in accessing care, especially for people of color and those struggling to make ends meet.
- This requirement saddles providers with unnecessary administrative burdens and is not medically necessary.

Barriers to Coverage of Telehealth for Medication Abortion Care

- In New Mexico, reimbursement differs by type of care delivery model: As background, coverage parity requires the same *services* delivered in-person be covered if delivered by telehealth. Payment parity requires the same *payment rate* or amount to be reimbursed via telehealth as would be if it had been delivered in-person.⁸ While payment parity exists for live video (synchronous) care delivered through telehealth, regardless of whether the patient has public or private insurance, other barriers to care coverage exist.⁹
 - Asynchronous (store-and-forward)¹⁰ models may be covered by state Medicaid or private insurance, but there is no requirement for coverage.
 - No parity for audio-only: A temporary policy mandates Medicaid coverage for audio-only telehealth for a) brief check-ins with patients and b) select behavioral health visits only.¹¹ There is no requirement that other payers cover audio-only care.¹²
 - Impact: A video visit requirement unnecessarily limits access to care for patients who are in areas with limited bandwidth or who lack devices or sufficient minutes on cellular plans for telehealth video visits.
- **No coverage for translation services:** Providers participating in New Mexico Medicaid are required to provide translation services for Medicaid beneficiaries, including via telehealth.¹³ However, there is no requirement for public or private insurance to cover the costs associated with translation.
 - **Impact**: Providers may be less likely to offer patients with translation needs access to telehealth services, forcing unnecessary in-person visits and inequitable access to care.
- No coverage for mailing medications: In New Mexico, there is no requirement for public or private payers to cover the cost of mailing medications.¹⁴
 - Impact: Without this coverage, providers and/or pharmacies may be less likely to offer patients the option of mailing medications, forcing unnecessary in-person visits and inequitable access to care.

Other Opportunities for Improving Access

- **Licensing**: New Mexico offers a mechanism for out of state physicians to register and provide telehealth to New Mexico patients.¹⁵ However, New Mexico only participates in the interstate licensing compact for nurses,¹⁶ not for physicians¹⁷ or advanced practice registered nurses.¹⁸
 - State licensure expansion streamlines the process for providers to provide telehealth across state lines. Providers located out of state who want to accept New Mexico Medicaid cannot do so without being licensed in New Mexico. Increased patient demand may be more easily met with an expanded pool of providers.

More information on telehealth in New Mexico:

- <u>New Mexico Telehealth Alliance</u>
- New Mexico State Telehealth Laws
- New Mexico Southwest Telehealth Resource Center

⁸ Parity Requirements for Private Payer Telehealth Services - CCHP

⁹ N.M. Admin. Code 8.310.2.12 (M)

¹⁰ https://www.cchpca.org/topic/store-and-forward/

¹¹ Special COVID LOD #13: Telehealth Services during the COVID-19 Emergency, August 4, 2020

¹² NMSA 59A-22-49

¹³https://www.medicaid.gov/medicaid/financial-management/medicaid-administrative-claiming/translation-and-interpretationservices/index.html

¹⁴ <u>https://www.hsd.state.nm.us/wp-content/uploads/8.308.9-NMAC-Ben-Pkg-1.pdf</u>

¹⁵ N.M. Admin. Code 8.310.2.12 (M)

¹⁶ <u>https://nurse.org/articles/enhanced-compact-multi-state-license-eNLC/</u>

¹⁷ https://www.imlcc.org

¹⁸ https://www.ncsbn.org/aprn-compact.htm