



NEW MEXICO LEGISLATURE

LEGISLATIVE HEALTH
AND HUMAN SERVICES
COMMITTEE

2024 INTERIM FINAL REPORT

LEGISLATIVE COUNCIL SERVICE
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INTERIM SUMMARY

Legislative Health and Human Services Committee 2024 Interim Summary

During the 2024 interim, the Legislative Health and Human Services Committee (LHHS) held eight meetings over 25 days. The committee met in Albuquerque, Taos, Portales, Socorro, Silver City, Rio Rancho and Santa Fe. At its first meeting, the LHHS developed its work plan and decided to use the first half of the interim to delve into the following broad areas of concern: improving the child welfare system, expanding access to health care, growing the health care workforce and addressing behavioral health and substance use issues.

With respect to improving the child welfare system, the LHHS heard presentations from various stakeholders in the child welfare system, including advocates and government agencies. The committee also received presentations from organizations providing services to children and families in the community, including the University of New Mexico Child Abuse Response Team, the New Mexico Court Appointed Special Advocate Association and the New Mexico Child Advocacy Networks.

To evaluate ways to expand access to health care and grow the health care workforce, the committee invited representatives from across the state to provide potential solutions to those issues. The committee examined potential ways to grow the health care workforce, such as streamlining the professional licensing process, expanding health care professional recruitment efforts, growing health care education programs at universities and colleges across the state and providing new incentives for health care professionals who practice in rural areas. Representatives from the Health Care Authority (HCA) provided updates on the new expanded Medicaid program known as Turquoise Care. Additionally, the Department of Health (DOH) discussed the underutilization of state health care facilities.

The LHHS focused its fourth meeting on behavioral health and substance use issues. Behavioral health and substance use providers discussed their work and the challenges that they face. The committee also heard a presentation from representatives from the DOH, the Roosevelt County Detention Center, the New Mexico Association of Counties and the Corrections Department on expanding medication-assisted treatment programs in correctional and detention facilities.

Additionally, the LHHS focused on issues relating to housing and the unhoused and heard several presentations from stakeholders and experts to devise potential solutions for making housing more affordable. The committee also heard reports from the DOH, the HCA, the Association of Developmental Disabilities Community Providers and Disability Rights New Mexico about the availability and quality of services for individuals with developmental disabilities. In addition, the committee spent a significant amount of time and effort evaluating potential ways to lower costs in the health care industry.

Before the end of each meeting, committee members brainstormed ideas for addressing the issues discussed. Those brainstorming sessions were used as starting points for crafting substantive legislation, including appropriations. At its final meeting, the LHHS endorsed 27 bills.

WORK PLAN AND MEETING SCHEDULE

**2024 APPROVED
WORK PLAN AND MEETING SCHEDULE
for the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE**

Members

Sen. Gerald Ortiz y Pino, Chair	Rep. Pamela Herndon
Rep. Elizabeth "Liz" Thomson, Vice Chair	Sen. Martin Hickey
Rep. Eleanor Chávez	Rep. Jenifer Jones
Sen. David M. Gallegos	Sen. Antoinette Sedillo Lopez

Advisory Members

Rep. John Block	Rep. Alan T. Martinez
Rep. Kathleen Cates	Rep. Cristina Parajón
Rep. Gail Chasey	Sen. Shannon D. Pinto
Sen. Katy M. Duhigg	Sen. Harold Pope
Rep. Joanne J. Ferrary	Sen. Nancy Rodriguez
Rep. Miguel P. García	Rep. Patricia Roybal Caballero
Sen. Siah Correa Hemphill	Sen. Gregg Schmedes
Rep. Tara Jaramillo	Sen. Elizabeth "Liz" Stefanics
Rep. D. Wonda Johnson	Rep. Reena Szczepanski
Sen. Linda M. López	Sen. Bill Tallman
Rep. Stefani Lord	Rep. Harlan Vincent
Rep. Tara L. Lujan	

Legislative Health and Humans Services Committee (LHHS)

The LHHS is a permanent joint committee of the legislature created pursuant to Section 2-13-1 NMSA 1978 and is responsible for studying the programs, agencies, policies and needs relating to health and human services, in addition to programs and services for children, families and the aging population.

Work Plan

At its organizational meeting, the LHHS chairs proposed, and the members agreed, to use the first three meetings of the interim as opportunities to focus on the following issues: child welfare; access to health care and expanding the health care workforce; and behavioral health and substance use.

During the first two days of each meeting, the committee will hear testimony from stakeholders, including national experts, state agencies, advocates and members of the public, pertaining to one of these issues. The committee will reserve the third day of each meeting to hear presentations on additional issues of concern.

At the end of each day, the committee chairs will lead a wrap-up session to discuss the issues that were heard that day. Members will be encouraged to engage in collaborative brainstorming sessions with the goal of identifying legislative action that is necessary to address the issues. The chairs will assign follow-up tasks and research questions to committee members

and staff who will work together to craft proposed legislation for discussion at the subsequent meeting. After receiving feedback, staff will work with the committee to revise the proposed legislation in time for the LHHS chairs to present it to the Legislative Finance Committee (LFC) when the LFC considers budget priorities in the fall.

Child Welfare

During its June 5-7 meeting, the LHHS will investigate issues affecting children and families, including the federal Comprehensive Addiction and Recovery Act of 2016 program. The committee will hear from representatives from the Children, Youth and Families Department (CYFD) and child welfare advocates to develop solutions that will ensure the safety of New Mexico's children and families.

Access to Health Care and the Health Care Workforce

At its July 1-3 meeting, the committee will examine several strategies for expanding and improving the health care workforce in the state to increase access to health care. The committee will invite representatives from higher education institutions across the state, including the University of New Mexico, New Mexico Highlands University, Eastern New Mexico University, Western New Mexico University and New Mexico State University, to present on current and potential new programs for health care students. The LHHS will also discuss ways to streamline the reimbursement process and increase reimbursement for health care providers practicing in New Mexico. Additionally, the Higher Education Department (HED) will update the committee on its work to promote and expand educational opportunities for students seeking to become health care professionals.

Behavioral Health and Substance Use

During its July 31-August 2 meeting, the LHHS will focus on addressing behavioral health and substance use issues. The Department of Health (DOH), the Corrections Department and the New Mexico Association of Counties will be invited to discuss the expansion of medically assisted treatment for substance use disorder. The committee will also invite representatives from the Health Care Authority (HCA) and the Interagency Behavioral Health Purchasing Collaborative to discuss the demand for and availability of behavioral health services. Additionally, the LHHS will hear from various behavioral health providers across the state. The committee will also investigate methods for addressing the misuse of alcohol and tobacco.

Additional Issues of Concern

In addition to the issues that will be discussed during the committee's first three meetings, the LHHS will examine and receive presentations that address or include the following topics.

A. Agency Updates

The LHHS will invite the secretaries and leadership from the DOH; the HCA; the CYFD; the Aging and Long-Term Services Department; the HED; the Office of Superintendent of Insurance (OSI); the Interagency Behavioral Health Purchasing Collaborative; and the Early

Childhood Education and Care Department to present on the implementation of new programs, legislative priorities and budgetary needs.

B. Aging and Long-Term Services

The LHHS will address several nursing home issues, including liability insurance requirements and expanding and improving the personal care service workforce. Additionally, the committee will explore expanding job training, small business development and job placement services for senior citizens.

C. Disabilities

The committee will invite the HCA to report on the status of various Medicaid waivers for individuals with disabilities. The committee will also address the demand for and availability of services for people living with autism.

D. Environment and Public Health

The LHHS will evaluate the role that the environment plays in public health. For example, the committee will investigate the impact of the recent forest fires in New Mexico on physical and behavioral health.

E. Human Services

The LHHS will oversee multiple important transitions that are taking place in the human services sector. First, the committee will oversee the Human Services Department's transition to the HCA. The committee will be updated on the status of the HCA's social service programs, including Temporary Assistance for Needy Families and Medicaid.

F. Pharmaceutical Drugs

The LHHS will continue its work to ensure that pharmaceutical drugs are affordable and accessible in New Mexico. The committee will hear testimony from the OSI to oversee the implementation of new legislative efforts to control pharmaceutical drug pricing and regulate pharmacy benefits managers. The committee will continue to identify potential new strategies for ensuring the affordability and accessibility of pharmaceutical drugs.

G. Previously Introduced Bills

The committee will hear testimony from sponsors who plan to reintroduce bills that were not signed into law.

H. Reporting

The committee will receive statutorily required and legislatively requested reports from various working groups and task forces. Task forces that are not required by statute to present a report to the LHHS will be asked to submit the task force's annual report to LHHS staff for email distribution to committee members.

I. School-Based Health Centers

The LHHS will invite the DOH to provide updates on school-based health center programs in New Mexico.

J. Other Health and Human Services Issues

As necessary, the LHHS will examine other issues relevant to health and human services.

**Legislative Health and Human Services Committee
2024 Approved Meeting Schedule**

<u>Date</u>	<u>Location</u>
May 7-8	Santa Fe
June 5-7	Albuquerque
July 1-3	Taos
July 31-August 2	Portales
August 26-28	Socorro
September 23-25	Silver City
October 21-24	Rio Rancho
November 19-22	Santa Fe

AGENDAS AND MINUTES

Revised: May 6, 2024

**TENTATIVE AGENDA
for the
FIRST MEETING
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE**

**May 7-8, 2024
State Capitol, Room 307
Santa Fe**

Tuesday, May 7

- 10:00 a.m. **Call to Order, Welcome and Introductions**
—Senator Gerald Ortiz y Pino, Chair, Legislative Health and Human
Services Committee (LHHS)
—Representative Elizabeth "Liz" Thomson, Vice Chair, LHHS
- 10:15 a.m. (1) **Post-Session Health and Human Services Fiscal Summary**
—Eric Chenier, Principal Analyst, Legislative Finance Committee (LFC)
—Kelly Klundt, Principal Analyst, LFC
—Nathan Eckberg, Senior Analyst II, LFC
- 11:45 a.m. **Public Comment***
- 12:00 noon **Lunch**
- 1:00 p.m. (2) **LHHS 2024 Work Plan and Meeting Schedule: Presentation and
Member Discussion**
- 4:00 p.m. **Recess**

Wednesday, May 8

- 9:00 a.m. (3) **Medicaid 101**
—Eric Chenier, Principal Analyst, LFC
- 10:30 a.m. (4) **Behavioral Health 101**
—RubyAnn Esquibel, Principal Analyst, LFC
- 12:00 noon **Adjourn**

*Members of the public may make virtual public comments during the public comment period of the meeting by following the instructions under the "Virtual Public Comment" section of the LHHS [web page](#).

**MINUTES
of the
FIRST MEETING
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE**

**May 7-8, 2024
State Capitol, Room 307
Santa Fe**

The first meeting of the Legislative Health and Human Services Committee (LHHS) was called to order by Senator Gerald Ortiz y Pino, chair, on Tuesday, May 7, 2024, at 10:09 a.m. in Room 307 of the State Capitol in Santa Fe.

Present

Sen. Gerald Ortiz y Pino, Chair
Rep. Elizabeth "Liz" Thomson, Vice Chair
Rep. Eleanor Chávez
Sen. Martin Hickey
Rep. Jenifer Jones
Sen. Antoinette Sedillo Lopez

Absent

Sen. David M. Gallegos
Rep. Pamelya Herndon

Advisory Members

Rep. Kathleen Cates
Rep. Joanne J. Ferrary
Sen. Linda M. López
Rep. Tara L. Lujan
Rep. Alan T. Martinez
Sen. Shannon D. Pinto
Sen. Harold Pope
Sen. Nancy Rodriguez
Sen. Elizabeth "Liz" Stefanics
Rep. Reena Szczepanski

Rep. John Block
Rep. Gail Chasey
Sen. Katy M. Duhigg
Rep. Miguel P. García
Sen. Siah Correa Hemphill
Rep. Tara Jaramillo
Rep. D. Wonda Johnson
Rep. Stefani Lord
Rep. Cristina Parajón
Rep. Patricia Roybal Caballero
Sen. Gregg Schmedes
Sen. Bill Tallman
Rep. Harlan Vincent

Guest Legislator

Rep. Debra M. Sariñana

Staff

Zander Dawson, Staff Attorney, Legislative Council Service (LCS)
Andrea Lazarow, Bill Drafter, LCS
Grace Balderamos, Staff, LCS

Guests

The guest list is in the meeting file.

Handouts

Handouts and other written testimony are in the meeting file and posted on the legislature's website.

References to Webcast

The time reference noted next to each agenda item in this document is cross-referenced to the webcast of the committee meeting, which can be found at www.nmlegis.gov, under the "Webcast" tab. The presentations made and committee discussions for agenda items can be found on the recorded webcast for this meeting.

Tuesday, May 7

Welcome and Introductions (10:09 a.m.)

Senator Ortiz y Pino welcomed everyone to the meeting, and members of the committee and staff introduced themselves.

Post-Session Health and Human Services Fiscal Summary (10:18 a.m.)

Eric Chenier, principal analyst, Legislative Finance Committee (LFC); Nathan Eckberg, senior analyst II, LFC; and Kelly Klundt, principal analyst, LFC, presented on the LFC's post-session health and human services fiscal summary. They discussed appropriations for and the budgets of the Health Care Authority, Department of Health, Children, Youth and Families Department, Office of Family Representation and Advocacy and Early Childhood Education and Care Department. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=5/7/2024&ItemNumber=1>.

Public Comment (11:45 a.m.)

A list of individuals making public comment is available in the meeting file.

LHHS 2024 Work Plan and Meeting Schedule: Presentation and Member Discussion (12:39 p.m.)

Mr. Dawson and Ms. Lazarow reviewed the legislative actions taken on the LHHS's endorsed legislation during the 2024 legislative session. Committee members proposed topics that could be included in the committee's work plan and potential meeting locations.

Recess

The meeting recessed at 2:49 p.m.

Wednesday, May 8

Reconvene

The meeting reconvened at 9:13 a.m.

Medicaid 101 (9:13 a.m.)

Mr. Cheiner explained core Medicaid concepts, including cost drivers and trends, managed care organizations and enrollment. He discussed Medicaid statistics, enrollment revenue and expenditures, state plans, waivers and barriers that Medicaid enrollees face when searching for access to health care. The presentation can be found here:

<https://www.nmlegis.gov/handouts/LHHS%20050724%20Item%203%20BH%20and%20Medicaid%20101.pdf>.

Behavioral Health 101 (11:03 a.m.)

RubyAnn Esquibel, principal analyst, LFC, discussed the state's interagency behavioral health purchasing collaborative's duties and goals, Medicaid behavioral health expenditures and potential enhancements for children's behavioral health systems in New Mexico. The presentation can be found here:

<https://www.nmlegis.gov/handouts/LHHS%20050724%20Item%203%20BH%20and%20Medicaid%20101.pdf>.

Public Comment (12:40 p.m.)

A list of individuals making public comment is available in the meeting file.

Adjournment

There being no further business before the committee, the meeting adjourned at 1:01 p.m.

Revised: June 4, 2024

**TENTATIVE AGENDA
for the
SECOND MEETING
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE**

**June 5-7, 2024
University of New Mexico
Lobo Rainforest Building, Collaboration Space
101 Broadway Boulevard NE
Albuquerque**

Wednesday, June 5

- 8:45 a.m. **Call to Order and Introductions**
—Senator Gerald Ortiz y Pino, Chair, Legislative Health and Human Services Committee (LHHS)
—Representative Elizabeth "Liz" Thomson, Vice Chair, LHHS
- 8:45 a.m. (1) **[Welcome to the University of New Mexico \(UNM\)](#)**
—James Holloway, Provost and Executive Vice President for Academic Affairs, UNM
- 9:00 a.m. (2) **[Child Welfare 101](#)**
—Rachel Mercer-Garcia, Principal Analyst, Legislative Finance Committee (LFC)
—Nathan Eckberg, Esq., Senior Fiscal Analyst, LFC
- 10:30 a.m. (3) **[UNM Child Abuse Response Team \(CART\)](#)**
—Leslie Strickler, D.O., F.A.A.P., Professor of Pediatrics; Section Chief, Child Maltreatment; Medical Director, CART; and Director, SafeCare New Mexico, UNM Health Sciences Center
—Rebecca A. Girardet, M.D., Professor, Pediatrics and Child Abuse Services, UNM School of Medicine
- 11:30 a.m. **Public Comment***
- 12:00 noon **Lunch**
- 1:00 p.m. (4) **[Court Appointed Special Advocate Program \(CASA\) Update](#)**
—Veronica Montano-Pilch, Executive Director, New Mexico CASA Association

- 2:00 p.m. (5) [New Mexico Child Advocacy Networks \(NMCAN\)](#)
—Lorilynn Violanta, Co-Executive Director, NMCAN
—Mia Calle, Youth Leader
—Joanna DeLaney, Youth Leader
—Yazh Pending, Youth Leader

3:00 p.m. **Recess**

Thursday, June 6

9:00 a.m. **Reconvene**

- 9:00 a.m. (6) [Best Practices for Child Welfare Systems](#)
—Joseph E. Ribsam Jr., Director, Child Welfare and Juvenile Justice
Policy, The Annie E. Casey Foundation

- 10:00 a.m. (7) [Advocating for and Providing Services to Children and Families](#)
—Krisztina Udvardi, M.B.A., President and Chief Executive Officer (CEO),
All Faiths Children's Advocacy Center

- 11:00 a.m. (8) [Children's Trust Fund](#)
—Kim Straus, Member, Children's Trust Fund Board of Trustees
—Marg Elliston, Vice Chair, Children's Trust Fund Board of Trustees

12:00 noon **Public Comment***

12:15 p.m. **Lunch**

- 1:00 p.m. (9) [Update: Children, Youth and Families Department \(CYFD\)](#)
—Teresa Casados, Secretary, CYFD

4:00 p.m. **Recess**

Friday, June 7

9:00 a.m. **Reconvene**

- 9:00 a.m. (10) [Kevin S. Update](#)
—Sara Crecca, Esq.
—George Davis, M.D.
—Bette Fleishman, Executive Director, Pegasus Legal Services for Children
—Gary D. Housepian, CEO, Disability Rights New Mexico
—Therese Yanan, Executive Director, Native American Disability Law
Center

10:30 a.m. (11) [Community Services](#)
—Robert Chavez, M.A., CEO, Youth Development, Inc.
—Sara Penn, L.M.S.W., Chief Programs Officer, New Day
—Jennifer Thompson, Co-Executive Director, PB&J Family Services, Inc.

11:30 a.m. **Public Comment***

12:00 noon **Lunch**

1:00 p.m. **Brainstorming Session**

1:30 p.m. **Adjourn**

*Members of the public may make virtual public comments during the public comment period of the meeting by following the instructions under the "Virtual Public Comment" section of the LHHS [web page](#).

**MINUTES
of the
SECOND MEETING
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE**

**June 5-7, 2024
University of New Mexico
Lobo Rainforest Building, Collaboration Space
101 Broadway Boulevard NE
Albuquerque**

The second meeting of the Legislative Health and Human Services Committee was called to order by Senator Gerald Ortiz y Pino, chair, on Wednesday, June 5, 2024, at 9:01 a.m. in the Collaboration Space of the Lobo Rainforest Building at the University of New Mexico (UNM) in Albuquerque.

Present

Sen. Gerald Ortiz y Pino, Chair
Rep. Elizabeth "Liz" Thomson, Vice Chair
Rep. Eleanor Chávez
Rep. Jenifer Jones
Sen. Antoinette Sedillo Lopez (6/7)

Absent

Sen. David M. Gallegos
Rep. Pamela Herndon
Sen. Martin Hickey

Advisory Members

Rep. John Block (6/6, 6/7)
Rep. Kathleen Cates
Rep. Gail Chasey (6/7)
Rep. Joanne J. Ferrary
Rep. Miguel P. García (6/6, 6/7)
Rep. D. Wonda Johnson (6/6)
Sen. Linda M. López
Rep. Stefani Lord
Sen. Shannon D. Pinto
Sen. Harold Pope (6/6, 6/7)
Sen. Nancy Rodriguez
Sen. Elizabeth "Liz" Stefanics
Sen. Bill Tallman (6/5)
Rep. Harlan Vincent

Sen. Katy M. Duhigg
Sen. Siah Correa Hemphill
Rep. Tara Jaramillo
Rep. Tara L. Lujan
Rep. Alan T. Martinez
Rep. Cristina Parajón
Rep. Patricia Roybal Caballero
Sen. Gregg Schmedes
Rep. Reena Szczepanski

(Attendance dates are noted for those members not present for the entire meeting.)

Staff

Zander Dawson, Staff Attorney, Legislative Council Service (LCS)
Andrea Lazarow, Bill Drafter, LCS
Grace Balderamos, Staff, LCS
Michel Rivera, Law Intern, LCS

Guests

The guest list is in the meeting file.

Handouts

Handouts and other written testimony are in the meeting file and posted on the legislature's website.

References to Webcast

The time reference noted next to each agenda item in this document is cross-referenced to the webcast of the committee meeting, which can be found at www.nmlegis.gov, under the "Webcast" tab. The presentations made and committee discussions for agenda items can be found on the recorded webcast for this meeting.

Wednesday, June 5

Welcome and Introductions (9:01 a.m.)

Senator Ortiz y Pino welcomed everyone to the meeting, and members of the committee and staff introduced themselves.

Welcome to UNM (9:08 a.m.)

James Holloway, provost and executive vice president for academic affairs, UNM, welcomed the committee to UNM. He discussed the history of UNM Rainforest Innovations, a nonprofit corporation created and owned by the UNM Board of Regents. He described UNM Rainforest Innovations as UNM's hub for technology and ideas.

Child Welfare 101 (9:18 a.m.)

Rachel Mercer-Garcia, principal analyst, Legislative Finance Committee (LFC), and Nathan Eckberg, Esq., senior fiscal analyst, LFC, provided an overview of child welfare in New Mexico. They described how the child welfare system is organized and discussed data trends regarding child maltreatment, foster care and child protective services. They noted that New Mexico is the state with the highest rate of adults with adverse childhood experiences. They explained the framework of the Children, Youth and Families Department (CYFD) and discussed the CYFD's budget and appropriations. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=6/5/2024&ItemNumber=2>.

UNM Child Abuse Response Team (CART) (10:28 a.m.)

Leslie Strickler, D.O., F.A.A.P., professor of pediatrics; section chief, child maltreatment; medical director, CART; and director, SafeCare New Mexico, UNM Health Sciences Center, discussed the expansion of clinical and family support services offered by the UNM CART. She provided an update on the SafeCare New Mexico program by Project ECHO and described UNM's research and scholarly initiatives about child abuse and neglect. Dr. Strickler shared some of her experiences as a child abuse pediatrician and noted that the

fellowship in child abuse pediatrics at the UNM School of Medicine has become accredited. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=6/5/2024&ItemNumber=3>.

Public Comment (11:38 a.m.)

A list of individuals making public comment is available in the meeting file.

Court-Appointed Special Advocate Program (CASA) Update (1:02 p.m.)

Veronica Montano-Pilch, executive director, New Mexico CASA Association, and Brandie White, program director, Mesilla Valley CASA, explained the role of court-appointed special advocates in the Children's Court, pursuant to Subsection F of Section 32A-1-4 NMSA 1978. They stated that there are one court-run CASA program and 12 independent, nonprofit CASA programs in New Mexico. They described the process of becoming a CASA volunteer and outlined the other specialized support services that CASA staff provide to youth and families. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=6/5/2024&ItemNumber=4>.

New Mexico Child Advocacy Networks (NMCAN) (1:48 p.m.)

Lorilynn Violanta, co-executive director, NMCAN, provided an overview of NMCAN's mission of building community, promoting equity and developing leadership skills among teenagers and young adults. She introduced a panel of NMCAN youth leaders. Joanna Delaney, youth leader, NMCAN, shared her personal experience growing up in the foster care system. Mia Calle, youth leader, NMCAN, shared her personal experience growing up in transitional living. Yazh Pending, youth leader, NMCAN, shared his personal experience growing up in the child welfare system. They described how their lives have been impacted by protective services. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=6/5/2024&ItemNumber=5>.

Recess

The meeting recessed at 3:17 p.m.

Thursday, June 6

Reconvene

The meeting reconvened at 9:13 a.m.

Best Practices for Child Welfare Systems (9:14 a.m.)

Joseph E. Ribsam, Jr., director, Child Welfare and Juvenile Justice Policy, The Annie E. Casey Foundation, presented about child- and family-serving systems throughout the country

that address child welfare, children's behavioral health and juvenile justice. He explained countrywide trends in child welfare systems and noted that the implementation of comprehensive, statewide, integrated care systems for children's behavioral health has been successful in New Jersey and New Hampshire. Mr. Ribsam emphasized that effective child welfare systems are systems that focus on family well-being. He discussed child welfare workforce retention, the federal Family First Prevention Services Act and juvenile justice reform. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=6/5/2024&ItemNumber=6>.

Advocating for and Providing Services to Children and Families (10:36 a.m.)

Kriztina Udvardi, M.B.A., president and chief executive officer (CEO), All Faiths Children's Advocacy Center, discussed the expansion of certified community behavioral health clinics throughout the country. She explained that certified community behavioral health clinics are specially designated clinics that provide comprehensive, coordinated behavioral health care, including crisis services, psychological rehabilitation services, treatment planning, various counseling services and targeted case management. She discussed the All Faiths Children's Advocacy Center, including its children's safehouse, family wellness program, training services and placement services. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=6/5/2024&ItemNumber=7>.

Children's Trust Fund (11:19 a.m.)

Marg Elliston, vice chair, Children's Trust Fund Board of Trustees, and Kim Straus, member, Children's Trust Fund Board of Trustees, provided an update about the Children's Trust Fund Board of Trustees' administration of the Next Generation Fund, outreach and marketing initiatives and recent grant making. They explained how grants from the Children's Trust Fund are awarded. They described the Children's Trust Fund Board of Trustees' collaboration with the CYFD and the Early Childhood Education and Care Department to prevent child abuse and neglect.

Public Comment (11:51 a.m.)

A list of individuals making public comment is available in the meeting file.

Update: CYFD (1:10 p.m.)

Teresa Casados, secretary, CYFD, discussed family services, juvenile justice reform and department updates. She stated that the department is trying to end the practice of children staying in the CYFD office and mentioned that a new facility in Albuquerque has opened and will house 12 male children in need of housing. She described some of the department's challenges, including employee recruitment and retainment and the difficulty of finding foster families. Secretary Casados gave information about the CYFD's child abuse hotline, which is called the "statewide central intake". She provided an update about the federal Comprehensive

Addiction and Recovery Act of 2016 (CARA) program in New Mexico and stated that the CYFD plans to hire a CARA manager.

Recess

The meeting recessed at 4:10 p.m.

Friday, June 7

Reconvene

The meeting reconvened at 9:14 a.m.

Approval of Minutes (9:17 a.m.)

Upon a motion made and duly seconded, and without any objections, the committee approved the minutes of the May 7-8, 2024 meeting.

Kevin S. Update (9:18 a.m.)

Gary Housepian, CEO, Disability Rights New Mexico; Bette Fleishman, executive director, Pegasus Legal Services for Children; Therese Yanan, executive director, Native American Disability Law Center; Sara Crecca, Esq.; and George Davis, M.D., provided an overview of the *Kevin S.* co-neutrals' 2022 annual report and the history of the *Kevin S.* settlement. They discussed corrective action plan pilot projects that were implemented in Dona Ana County and San Juan County to provide community-specific recommendations to the CYFD and Health Care Authority. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=6/5/2024&ItemNumber=10>.

Community Services (11:28 a.m.)

Robert Chavez, M.A., CEO, Youth Development, Inc., discussed the services and programs offered by Youth Development, Inc., which is one of the largest nonprofit organizations in New Mexico. He stated that Youth Development, Inc. offers trauma-informed programs in early childhood education, family development, behavioral health, education, counseling and employment. Sara Penn, L.M.S.W., chief programs officer, New Day, discussed the youth and family services offered by New Day, such as transitional housing services, shelter services, life skills coaching and youth peer support. Jennifer Thompson, co-executive director, PB&J Family Services, Inc., discussed programs administered by PB&J Family Services, Inc., including parenting classes, a children's peer support group, a juvenile community corrections program and family outreach programs. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=6/5/2024&ItemNumber=11>.

Public Comment (12:23 p.m.)

A list of individuals making public comment is available in the meeting file.

Brainstorming Session (12:50 p.m.)

Senator Ortiz y Pino led the committee in a brainstorming session focused on potential legislation that could address the issues presented to the committee.

Adjournment

There being no further business before the committee, the meeting adjourned at 1:14 p.m.

Revised: July 1, 2024

**TENTATIVE AGENDA
for the
THIRD MEETING
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE**

**July 1-3, 2024
University of New Mexico-Taos
Bataan Hall
121 Civic Plaza Drive
Taos**

Monday, July 1

- 9:00 a.m. **Call to Order and Introductions**
—Senator Gerald Ortiz y Pino, Chair, Legislative Health and Human
Services Committee (LHHS)
—Representative Elizabeth "Liz" Thomson, Vice Chair, LHHS
- 9:15 a.m. (1) **[Welcome to the University of New Mexico \(UNM\)-Taos](#)**
—Mary Gutierrez, Ed.D., Chancellor, UNM-Taos
- 9:30 a.m. (2) **[Recruiting Health Care Professionals](#)**
—Jerry N. Harrison, Ph.D., Executive Director, New Mexico Health
Resources, Inc.
- 10:30 a.m. (3) **[State Health Care Facility Staffing Update](#)**
—Patrick M. Allen, Secretary, Department of Health (DOH)
—George Morgan, Director, Facilities Management Division, DOH
- 11:45 a.m. **Public Comment***
- 12:00 noon **Lunch**
- 1:00 p.m. (4) **[Regulation and Licensing Department \(RLD\) Update](#)**
—Clay Bailey, Superintendent, RLD
- 2:30 p.m. (5) **[Legislative Finance Committee \(LFC\) Report: Hospital Rates and
Accountability](#)**
—Allegra Hernandez, Ph.D., Senior Fiscal Analyst, LFC
- 3:30 p.m. (6) **[LFC Report: Physical and Behavioral Health Workforce](#)**
—RubyAnn Esquibel, Principal Analyst, LFC
- 4:30 p.m. **Recess**

Tuesday, July 2

- 9:00 a.m. (7) **New Mexico Medical Board Update and 2025 Legislative Goals**
—Karen Carson, M.D., Board Chair, New Mexico Medical Board
—Amanda Quintana, Interim Executive Director, New Mexico Medical Board
—Debbie Dieterich, Investigations Manager, New Mexico Medical Board
—Monique Parks, Licensing Manager, New Mexico Medical Board
- 10:00 a.m. (8) **Higher Education Department (HED) Report: Expanding Behavioral Health Education Opportunities**
—Patricia Trujillo, Ph.D., Deputy Secretary, HED
—Jose Eli Fresquez, Ph.D., L.I.S.W., L.C.S.W., Cornerstone to Excellence
—Veronica Sanchez, D.S.W., L.I.S.W., L.C.S.W., Chief Executive Officer (CEO), Cornerstone to Excellence
- 11:00 a.m. (9) **UNM Health Care Workforce Report**
—Douglas Ziedonis, M.D., M.P.H., Executive Vice President, UNM Health Sciences Center; CEO, UNM Health System
—Michael Richards, M.D., M.P.A., Senior Vice President, Clinical Affairs, UNM Health Sciences Center
—Hengameh Raissy, Pharm.D., Interim Vice President for Research and Research Professor, Department of Pediatrics, UNM Health Sciences Center
- 12:00 noon **Public Comment***
- 12:15 p.m. **Lunch**
- 1:00 p.m. (10) **Health Care Authority (HCA) Update**
—Dana Flannery, Medicaid Director, HCA
- 2:30 p.m. (11) **Hospital Nursing Updates**
—Nancy Laster, R.N., D.N.P., M.B.A., C.E.N.P., C.P.H.Q., Chief Nursing Officer, Lovelace Westside Hospital; Administrative Director, One Call
—Holly Muller, D.N.P., M.H.A., R.N., C.R.R.N., N.E.A-B.C., S.V.P., P.D.S., Chief Nursing Officer, Presbyterian Healthcare Services
—Brittany Hamilton, M.S.N., M.B.A., R.N., Chief Nursing Officer, Holy Cross Medical Center
- 3:30 p.m. (12) **Nursing School Updates**
—Shawna Kemper, M.S.N., R.N., C.N.E., Director of Nursing, San Juan College
—Dawn Kittner, M.S.N., R.N., C.N.E., Director of Nursing, UNM-Taos
—Terri Tewart, M.S.N., R.N., Dean, School of Sciences, Health, Engineering and Math, Santa Fe Community College

4:30 p.m. **Recess**

Wednesday, July 3

9:00 a.m. (13) **Health Care Workforce Challenges**
—Diane Martinez, Vice President of Human Resources and Administration,
Presbyterian Medical Services
—Larry Martinez, Director of Legislative Affairs, Presbyterian Medical
Services

10:00 a.m. (14) **Primary Care Association Update**
—Yvette Ramirez Ammerman, CEO, New Mexico Primary Care
Association

11:00 a.m. (15) **Health Care Providers' Perspective on Health Care Access**
—Adrienne Enghouse, R.N.
—Carol Goode, Patient
—Regina McGinnis, Physical Therapist
—Nicole Loera, Social Worker
—Gigi Regusis, R.N.
—Vanessa Guterres, Cast Technician
—Laura Rector, R.N.

12:00 noon **Public Comment***

12:15 p.m. **Brainstorming Session**

1:00 p.m. **Adjourn**

*Members of the public may make virtual public comments during the public comment period of the meeting by following the instructions under the "Virtual Public Comment" section of the LHHS [web page](#).

MINUTES
of the
THIRD MEETING
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

July 1-3, 2024
University of New Mexico-Taos
Bataan Hall
121 Civic Plaza Drive
Taos

The third meeting of the Legislative Health and Human Services Committee was called to order by Senator Gerald Ortiz y Pino, chair, on Monday, July 1, 2024, at 9:28 a.m. in Bataan Hall at the University of New Mexico (UNM)-Taos in Taos.

Present

Sen. Gerald Ortiz y Pino, Chair
Rep. Eleanor Chávez
Rep. Pamela Herndon
Rep. Jenifer Jones
Sen. Antoinette Sedillo Lopez (7/2, 7/3)

Absent

Rep. Elizabeth "Liz" Thomson, Vice Chair
Sen. David M. Gallegos
Sen. Martin Hickey

Advisory Members

Rep. John Block (7/1)
Rep. Joanne J. Ferrary (7/1, 7/2)
Sen. Linda M. López (7/2)
Rep. Stefani Lord (7/1)
Rep. Tara L. Lujan (7/1)
Sen. Harold Pope
Sen. Nancy Rodriguez (7/1)
Sen. Elizabeth "Liz" Stefanics (7/2)
Sen. Bill Tallman (7/2, 7/3)

Rep. Kathleen Cates
Rep. Gail Chasey
Sen. Katy M. Duhigg
Rep. Miguel P. García
Sen. Siah Correa Hemphill
Rep. Tara Jaramillo
Rep. D. Wonda Johnson
Rep. Alan T. Martinez
Rep. Cristina Parajón
Sen. Shannon D. Pinto
Rep. Patricia Roybal Caballero
Sen. Gregg Schmedes
Rep. Reena Szczepanski
Rep. Harlan Vincent

Guest Legislators

Sen. Roberto "Bobby" J. Gonzales (7/2, 7/3)
Rep. Kristina Ortez (7/1, 7/3)

(Attendance dates are noted for those members not present for the entire meeting.)

Staff

Zander Dawson, Staff Attorney, Legislative Council Service (LCS)
Andrea Lazarow, Bill Drafter, LCS
Grace Balderamos, Staff, LCS

Guests

The guest list is in the meeting file.

Handouts

Handouts and other written testimony are in the meeting file and posted on the legislature's website.

References to Webcast

The time reference noted next to each agenda item in this document is cross-referenced to the webcast of the committee meeting, which can be found at www.nmlegis.gov, under the "Webcast" tab. The presentations made and committee discussions for agenda items can be found on the recorded webcast for this meeting.

Monday, July 1**Welcome and Introductions (9:28 a.m.)**

Senator Ortiz y Pino welcomed everyone to the meeting.

Welcome to UNM-Taos (9:29 a.m.)

Mary Gutierrez, Ed.D., chancellor, UNM-Taos, welcomed the committee to UNM-Taos and noted that UNM branch campuses are offering more associate and baccalaureate degrees to try to increase the number of health care workers in New Mexico.

Recruiting Health Care Professionals (9:50 a.m.)

Jerry N. Harrison, Ph.D., executive director, New Mexico Health Resources, Inc. (NMHR), provided an overview of NMHR, which is a nonprofit agency that supports efforts to recruit health care professionals to and retain health care providers in New Mexico. NMHR also offers services such as financial aid resources and career counseling. He discussed loan repayment and the difficulties of recruiting health care workers to rural New Mexico. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/1/2024&ItemNumber=2>.

State Health Care Facility Staffing Update (11:31 a.m.)

Patrick M. Allen, secretary, Department of Health (DOH), and Tim Shields, administrator, New Mexico Behavioral Health Institute at Las Vegas, provided information about state health care facilities for skilled and long-term care, rehabilitation, substance abuse treatment and mental health care, including The Meadows at the New Mexico Behavioral Health Institute of Las Vegas, Fort Bayard Medical Center, New Mexico State Veterans' Home, New

Mexico Rehabilitation Center, Turquoise Lodge Hospital and Sequoyah Adolescent Treatment Center. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/1/2024&ItemNumber=3>.

Public Comment (12:36 p.m.)

A list of individuals making public comment is available in the meeting file.

Regulation and Licensing Department (RLD) Update (1:25 p.m.)

Clay Bailey, superintendent, RLD; Melissa Salazar, director, Boards and Commissions Division, RLD; and Todd Stevens, director, Cannabis Control Division, RLD, provided an update about health-care-related licensure in New Mexico, including an updated license count and a description of the department's new automated licensing platform that simplifies the processing of new license applications and license renewals. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/1/2024&ItemNumber=4>.

Legislative Finance Committee (LFC) Report: Hospital Rates and Accountability (2:11 p.m.)

Allegra Hernandez, Ph.D., senior fiscal analyst, LFC, presented a brief about hospital revenue, the range of profitability among hospitals throughout the state and state investments in hospitals. She explained that most of the New Mexico hospitals that experienced a net loss in 2022 are located in nonurban areas and that investor-owned hospitals are near the national average for profitability. She noted that the state continues to increase hospital subsidies and that estimates suggest that government revenue will comprise about 74 percent of hospital revenue in 2025. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/1/2024&ItemNumber=5>.

LFC Report: Physical and Behavioral Health Workforce (3:11 p.m.)

RubyAnn Esquibel, principal analyst, LFC, presented a brief about the health care professional shortage that exists both in the state and nationally. She explained that New Mexico has one of the most severe shortages of mental health care providers in the country, as approximately 40 percent of the state's population is underserved. Data indicate that in New Mexico, Medicaid enrollment increased between 2020 and 2022, but the number of physical and behavioral health care providers that accept Medicaid patients trended downward. She noted that a recent report by the Association of American Medical Colleges estimated that by 2036, the country will have a shortage of between 20,200 and 40,400 primary care providers. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/1/2024&ItemNumber=6>.

Recess

The meeting recessed at 4:01 p.m.

Tuesday, July 2**Reconvene**

The meeting reconvened at 9:17 a.m.

New Mexico Medical Board Update and 2025 Legislative Goals (9:19 a.m.)

Karen Carson, M.D., board chair, New Mexico Medical Board; Amanda Quintana, interim executive director, New Mexico Medical Board; Debbie Dieterich, investigations manager, New Mexico Medical Board; and Monique Parks, licensing manager, New Mexico Medical Board, reviewed licensing statistics for fiscal year 2024, application processing and licensure pathways. They discussed the New Mexico Health Professional Wellness Program, investigations in fiscal years 2023 and 2024 and artificial intelligence in medicine. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/1/2024&ItemNumber=7>.

Higher Education Department (HED) Report: Expanding Behavioral Health Education Opportunities (10:40 a.m.)

Patricia Trujillo, Ph.D., deputy secretary, HED; Jose Eli Fresquez, Ph.D., L.I.S.W., L.C.S.W., Cornerstone to Excellence; Veronica Sanchez, D.S.W., L.I.S.W., L.C.S.W., chief executive officer (CEO), Cornerstone to Excellence; Steve Peterson, Ed.D., commissioner, Accrediting Bureau of Health Education Schools; Ismael Dieppa, Ph.D., L.C.S.W.; and Calico Jones, D.S.W., L.S.W., discussed an upcoming HED report about expanding the behavioral health care workforce in New Mexico and accompanying pilot projects.

UNM Health Care Workforce Report (12:01 p.m.)

Hengameh Raissy, Pharm.D., interim vice president for research and research professor, Department of Pediatrics, UNM Health Sciences Center (HSC), presented the UNM HSC's annual health care workforce report, pursuant to the Health Care Work Force Data Collection, Analysis and Policy Act. Michael Richards, M.D., M.P.A., senior vice president, Clinical Affairs, UNM HSC, discussed drivers of workforce needs, tools for accessing needs and trends in physician employment. Douglas Ziedonis, M.D., M.P.H., executive vice president, UNM HSC and CEO, UNM Health System, discussed UNM's initiatives for expanding and diversifying the state's health care workforce, such as recruiting and retaining health care providers and students interested in becoming health care professionals and increasing the UNM School of Medicine's class size and residency and fellowship numbers. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/1/2024&ItemNumber=9>.

Approval of Minutes (1:37 p.m.)

Upon a motion made and duly seconded, and without any objections, the committee approved the minutes of the June 5-7, 2024 meeting.

Public Comment (1:38 p.m.)

A list of individuals making public comment is available in the meeting file.

Health Care Authority (HCA) Update (2:01 p.m.)

Alanna Dancis, C.N.P., medical director, HCA, and Dana Flannery, Medicaid director, HCA, provided an update on Turquoise Care, which is a Medicaid managed care program that began on July 1, 2024. They discussed managed care organization oversight and accountability, Medicaid rate increases, changes to managed care organization contracts and 1115 Waiver updates. They noted that New Mexico was selected to participate in a four-year federal Certified Community Behavioral Health Clinic Medicaid demonstration program. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/1/2024&ItemNumber=10>.

Hospital Nursing Updates (3:26 p.m.)

Nancy Laster, R.N., D.N.P., M.B.A., C.E.N.P., C.P.H.Q., chief nursing officer, Lovelace Westside Hospital and administrative director, One Call; Holly Muller, D.N.P., M.H.A., R.N., C.R.R.N., N.E.A-B.C., S.V.P., P.D.S., chief nursing officer, Presbyterian Healthcare Services; and Brittany Hamilton, M.S.N., M.B.A., R.N., chief nursing officer, Holy Cross Medical Center, discussed challenges that rural hospitals face, such as limited ground transportation and limited bed availability, including limited bed availability for high-level-care patients. They described initiatives to recruit nurses such as Team Taos, which is an initiative at Holy Cross Medical Center that encourages nurses in Taos and graduates of the UNM-Taos nursing program to practice nursing in Taos. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/1/2024&ItemNumber=11>.

Nursing School Updates (4:14 p.m.)

Shawna Kemper, M.S.N., R.N., C.N.E., director of nursing, San Juan College; Dawn Kittner, M.S.N., R.N., C.N.E., director of nursing, UNM-Taos; and Terri Tewart, M.S.N., R.N., dean, School of Sciences, Health, Engineering and Math, Santa Fe Community College, discussed challenges that nursing schools face, such as difficulty finding faculty, lack of student preparedness and difficulty finding nurses who want to pursue a career in nursing education. They shared their personal experiences about struggling with student retention, including having students who dropped out of nursing school for reasons such as not being able to afford daycare for their young children, being unable to complete assignments because of not having internet access at home and needing to take care of family members who cannot afford to hire a caregiver.

Recess

The meeting recessed at 5:12 p.m.

Wednesday, July 3**Reconvene**

The meeting reconvened at 9:24 a.m.

Brainstorming Session (9:25 a.m.)

Senator Ortiz y Pino led the committee in a brainstorming session focused on potential legislation that could address the issues presented to the committee.

Health Care Workforce Challenges (10:26 a.m.)

Larry Martinez, director of legislative affairs, Presbyterian Medical Services, discussed employee recruitment and retention challenges at Presbyterian Medical Services, such as barriers to recruiting, the lack of affordable housing in many communities in the state and the difficulty in providing competitive wages for employees. He reviewed statistics about services provided by Presbyterian Medical Services in New Mexico and noted the number of vacant positions within Presbyterian Medical Services. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/1/2024&ItemNumber=13>.

Health Care Providers' Perspective on Health Care Access (11:45 a.m.)

Adrienne Enghouse, R.N.; Carol Goode, patient; Regina McGinnis, physical therapist; Nicole Loera, social worker; Gigi Regusis, R.N.; Vanessa Guterres, cast technician; and Laura Rector, R.N., described the mission of the United Health Professionals of New Mexico. They shared their personal experiences with hospital administrations and the statewide health care worker shortage. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/1/2024&ItemNumber=15>.

Public Comment (12:41 p.m.)

A list of individuals making public comment is available in the meeting file.

Adjournment

There being no further business before the committee, the meeting adjourned at 12:49 p.m.

Revised: August 1, 2024

**TENTATIVE AGENDA
for the
FOURTH MEETING
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE**

**July 31-August 2, 2024
Eastern New Mexico University
Campus Union Building Ballroom
1500 South Avenue K
Portales**

Wednesday, July 31

- 9:00 a.m. **Call to Order and Introductions**
—Senator Gerald Ortiz y Pino, Chair, Legislative Health and Human Services Committee (LHHS)
—Representative Elizabeth "Liz" Thomson, Vice Chair, LHHS
- 9:00 a.m. (1) **A. [Welcome to Eastern New Mexico University \(ENMU\)](#)**
—James Johnston, Ph.D., System Chancellor and President, ENMU
 B. Academic Overview
—Jamie Laurenz, Ph.D., Provost and Vice President, Academic Affairs, ENMU
 C. Introducing the School of Social Work
—Melissa Moyer, Ph.D., L.C.S.W., Director, Master of Social Work Program, and Assistant Professor, ENMU
- 10:30 a.m. (2) **[Update: Providing Behavioral Health Care in Southern New Mexico](#)**
—Philip Huston, Executive Director, Carlsbad Lifehouse
- 11:30 a.m. **Public Comment***
- 12:00 noon **Lunch**
- 1:00 p.m. (3) **[Update: Behavioral Health Services Division](#)**
—Nick Boukas, Director, Behavioral Health Services Division, Health Care Authority (HCA)
- 2:30 p.m. (4) **[Kevin S. Settlement Compliance Update and Services for Children in Custody](#)**
—Dana Flannery, Director, Medicaid Program, HCA
- 4:00 p.m. **Recess**

Thursday, August 1

9:00 a.m. **Reconvene**

9:00 a.m. (5) **Center for Excellence in Social Work 2024 Social Workers of New Mexico Survey Report**

—Sreyashi Chakravarty, Ph.D., Co-Investigator and Assistant Professor,
Facundo Valdez School of Social Work (FVSSW), New Mexico
Highlands University (NMHU)

—Anna Nelson, Ph.D., L.C.S.W., Principal Investigator and Director,
Center for Excellence in Social Work, FVSSW, NMHU

—Mónica Rae Otero, P-L.M.S.W., Researcher and Special Projects
Coordinator, Center for Excellence in Social Work, FVSSW, NMHU

10:00 a.m. (6) **Medication-Assisted Treatment (MAT) in Correctional Facilities**

—Patrick Allen, Secretary, Department of Health

—Kris Paulus, L.C.S.W., MAT Program Manager, Roosevelt County
Detention Center

—Grace Philips, Risk Management Director, New Mexico Association of
Counties

—Alisha Tafoya Lucero, Secretary, Corrections Department

12:00 noon **Public Comment***

12:15 p.m. **Lunch**

1:00 p.m. (7) **Falling Colors**

—Tim Harville, Senior Project Manager, Falling Colors

—Jorie Koster-Hale, Chief Executive Officer, Falling Colors

—Reba Serafin, Stakeholder and Provider Relations Specialist, Falling
Colors

—Sam Wolf, Chief Operating Officer and General Counsel, Falling Colors

2:30 p.m. (8) **Metrics That Matter**

—Maggie McCowen, M.B.A., L.I.S.W., Behavioral Health Providers
Association of New Mexico

—Pamela Stanley, L.P.C.C., A.C.T., Associate Principal, Health
Management Associates

3:30 p.m. **Recess**

Friday, August 2

9:00 a.m. **Reconvene**

- 9:00 a.m. (9) **Programs for Families with Children**
—Sarah Dinces, Program Evaluator, Legislative Finance Committee (LFC)
—Kelly Klundt, Principal Analyst, LFC
- 10:30 a.m. (10) **Abuse and Neglect: Prevention and Early Intervention**
—Nathan Eckberg, Senior Analyst, LFC
—Rachel Mercer Garcia, Principal Analyst, LFC
- 12:00 noon **Public Comment***
- 12:15 p.m. **Brainstorming Session**
- 1:00 p.m. **Adjourn**

*Members of the public may make virtual public comments during the public comment period of the meeting by following the instructions under the "Virtual Public Comment" section of the LHHS [web page](#).

MINUTES
of the
FOURTH MEETING
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

July 31-August 2, 2024
Eastern New Mexico University
Campus Union Building Ballroom
1500 South Avenue K
Portales

The fourth meeting of the Legislative Health and Human Services Committee was called to order by Senator Gerald Ortiz y Pino, chair, on Wednesday, July 31, 2024, at 9:10 a.m. in the Campus Union Building Ballroom at Eastern New Mexico University (ENMU) in Portales.

Present

Sen. Gerald Ortiz y Pino, Chair
Rep. Elizabeth "Liz" Thomson, Vice Chair
Rep. Eleanor Chávez
Sen. Martin Hickey (7/31, 8/1)

Absent

Sen. David M. Gallegos
Rep. Pamela Herndon
Rep. Jenifer Jones
Sen. Antoinette Sedillo Lopez

Advisory Members

Rep. Kathleen Cates
Rep. Gail Chasey (7/31, 8/1)
Sen. Linda M. López (8/1, 8/2)
Rep. Alan T. Martinez (8/1, 8/2)
Rep. Harlan Vincent

Rep. John Block
Sen. Katy M. Duhigg
Rep. Joanne J. Ferrary
Rep. Miguel P. García
Sen. Siah Correa Hemphill
Rep. Tara Jaramillo
Rep. D. Wonda Johnson
Rep. Stefani Lord
Rep. Tara L. Lujan
Rep. Cristina Parajón
Sen. Shannon D. Pinto
Sen. Harold Pope
Sen. Nancy Rodriguez
Rep. Patricia Roybal Caballero
Sen. Gregg Schmedes
Sen. Elizabeth "Liz" Stefanics
Rep. Reena Szczepanski
Sen. Bill Tallman

(Attendance dates are noted for those members not present for the entire meeting.)

Staff

Zander Dawson, Staff Attorney, Legislative Council Service (LCS)
Andrea Lazarow, Bill Drafter, LCS
Grace Balderamos, Staff, LCS

Guests

The guest list is in the meeting file.

Handouts

Handouts and other written testimony are in the meeting file and posted on the legislature's website.

References to Webcast

The time reference noted next to each agenda item in this document is cross-referenced to the webcast of the committee meeting, which can be found at www.nmlegis.gov, under the "Webcast" tab. The presentations made and committee discussions for agenda items can be found on the recorded webcast for this meeting.

Wednesday, July 31**Welcome and Introductions (9:10 a.m.)**

Senator Ortiz y Pino welcomed everyone to the meeting. Committee members and staff introduced themselves.

Welcome to ENMU (9:11 a.m.)

James Johnston, Ph.D., system chancellor and president, ENMU, welcomed the committee to ENMU. He noted that student enrollment and retention have increased and that more students are living on campus. Jamie Laurenz, Ph.D., provost and vice president, Academic Affairs, ENMU, discussed the baccalaureate and master's degrees offered by ENMU's Department of Health and Human Services. Adrienne Bratcher, associate professor and department chair, Communicative Disorders, ENMU, discussed the university's nursing and communicative disorders programs. She provided information about ENMU's Speech and Hearing Rehabilitation Outreach Center, which is a teaching clinic on campus for undergraduate and graduate students enrolled in the communicative disorders program. Melissa Moyer, Ph.D., L.C.S.W., director, Master of Social Work Program, and assistant professor, ENMU, provided an overview of the university's social work programs, including the academic coursework and partnerships with AmeriCorps and the Children, Youth and Families Department (CYFD). The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/31/2024&ItemNumber=1>.

Update: Providing Behavioral Health Care in Southern New Mexico (10:39 a.m.)

Philip Huston, executive director, Carlsbad Lifehouse, discussed the behavioral health care climate in southern New Mexico, including funding, understaffing and long wait lists for

treatment. He described services offered by Carlsbad Lifehouse and how they are funded. Carlsbad Lifehouse offers medically-assisted detox, residential treatment, support for sober living, intensive outpatient treatment and counseling for adults with substance use disorder. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/31/2024&ItemNumber=2>.

Public Comment (11:56 a.m.)

A list of individuals making public comment is available in the meeting file.

Update: Behavioral Health Services Division (1:05 p.m.)

Nick Boukas, director, Behavioral Health Services Division, Health Care Authority (HCA), discussed behavioral health care funding, the statewide expansion of medication-assisted treatment (MAT) and updates on the Behavioral Health Services Division. The Behavioral Health Services Division has trained hundreds of certified peer support workers since 2019 to help people with substance use disorders and mental health problems. Mr. Boukas highlighted the success of the 988 Suicide and Crisis Lifeline since it was launched two years ago. Alanna Dancis, medical director, Medical Assistance Division, HCA, reviewed the Medicaid 1115 demonstration waiver's implementation time line and new and upcoming services and programs covered by the waiver. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/31/2024&ItemNumber=3>.

Kevin S. Settlement Compliance Update and Services for Children in Custody (3:43 p.m.)

Dana Flannery, director, Medicaid Program, HCA, discussed care coordination by the HCA and the CYFD for children in state custody. She reviewed the procedures for wellness visits and resources available to staff and children in state custody. She noted that New Mexico has been selected to participate in two learning collaboratives administered by the National Academy for State Health Policy. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/31/2024&ItemNumber=4>.

Recess

The meeting recessed at 4:31 p.m.

Thursday, August 1

Reconvene

The meeting reconvened at 9:12 a.m.

Center for Excellence in Social Work 2024 Social Workers of New Mexico Survey Report (9:13 a.m.)

Anna Nelson, Ph.D., L.C.S.W., principal investigator and director, Center for Excellence in Social Work, Facundo Valdez School of Social Work (FVSSW), New Mexico Highlands University (NMHU); Sreyashi Chakravarty, Ph.D., co-investigator and assistant professor, FVSSW, NMHU; and Mónica Rae Otero, P-L.M.S.W., researcher and special projects coordinator, Center for Excellence in Social Work, FVSSW, NMHU, presented the findings of a survey that was recently conducted among social workers in all counties of New Mexico by the Center of Excellence in Social Work at the FVSSW at NMHU. The survey evaluated the climate and morale of the state's social work workforce. Barriers to participants' professional well-being included experiencing burnout due to the workforce shortage and pay inequity. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/31/2024&ItemNumber=5>.

MAT in Correctional Facilities (10:18 a.m.)

Patrick Allen, secretary, Department of Health (DOH), described the DOH's MAT expansion objectives and budget. The department's objectives include providing direct services at public health offices, increasing access to naloxone and expanding MAT availability to pregnant women and people who have overdosed on opiates. Alisha Tafoya Lucero, secretary, Corrections Department, discussed the expansion of MAT in correctional facilities throughout the state. Grace Philips, risk management director, New Mexico Association of Counties, discussed how county correctional facilities have increased MAT, presented MAT-related data in New Mexico counties and explained how MAT services are funded. Kris Paulus, L.C.S.W., MAT program manager, Roosevelt County Detention Center, described the Roosevelt County Detention Center's experiences with providing MAT since it began offering MAT services in 2021. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/31/2024&ItemNumber=6>.

Approval of Minutes (12:17 p.m.)

Upon a motion made and duly seconded, and without any objections, the committee approved the minutes of the July 1-3, 2024 meeting.

Public Comment (12:18 p.m.)

A list of individuals making public comment is available in the meeting file.

Falling Colors (1:25 p.m.)

Reba Serafin, stakeholder and provider relations specialist, Falling Colors; Jorie Koster-Hale, chief executive officer, Falling Colors; Tim Harville, senior project manager, Falling Colors; and Sam Wolf, chief operating officer and general counsel, Falling Colors, provided a presentation about Falling Colors, which is a public benefit corporation that serves as the Interagency Behavioral Health Purchasing Collaborative's administrative services organization.

Some of Falling Colors' duties include contracting with behavioral health care providers, administering more than 60 behavioral health programs in the state, compiling and reporting behavioral health data and providing behavioral health administrative management. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/31/2024&ItemNumber=7>.

Metrics that Matter (3:07 p.m.)

Maggie McCowen, M.B.A., L.I.S.W., Behavioral Health Providers Association of New Mexico, and Pamela Stanley, L.P.C.C., A.C.T., associate principal, Health Management Associates, discussed a data collection project funded by the Behavioral Health Services Division to identify and evaluate metrics that are specific to behavioral health care with the goal of establishing an alternative behavioral health payment model. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/31/2024&ItemNumber=8>.

Brainstorming Session (4:06 p.m.)

Senator Ortiz y Pino led the committee in a brainstorming session focused on potential legislation that could address the issues presented to the committee.

Recess

The meeting recessed at 4:34 p.m.

Friday, August 2

Reconvene

The meeting reconvened at 9:13 a.m.

Programs for Families with Children (9:14 a.m.)

Sarah Dinces, program evaluator, Legislative Finance Committee (LFC), and Kelly Klundt, principal analyst, LFC, provided an evaluation and funding recap of income support, child care assistance and home visiting programs. Their evaluation showed that although funding for home visiting has increased in recent years, enrollment has decreased, and most families who participate do not complete the program. New Mexico has lower uptake for some income support programs compared to the rest of the nation, and some barriers to enrollment include lack of awareness of programs, belief of ineligibility and fear of losing other forms of assistance. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/31/2024&ItemNumber=9>.

Abuse and Neglect: Prevention and Early Intervention (10:39 a.m.)

Nathan Eckberg, senior fiscal analyst, LFC, and Rachel Mercer Garcia, principal analyst, LFC, discussed child maltreatment prevention and intervention, foster care trends, evidence-based home visiting programs that could prevent maltreatment and repeat maltreatment and different home-visiting models targeted toward various populations. They reviewed the implementation of the federal Family First Prevention Services Act and the federal Comprehensive Addiction and Recovery Act of 2016 around the country and in New Mexico. Kathey Phoenix-Doyle, deputy secretary, Family Services Division, CYFD, answered questions about how the CYFD handles child maltreatment. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=7/31/2024&ItemNumber=10>.

Public Comment (12:28 p.m.)

A list of individuals making public comment is available in the meeting file.

Adjournment

There being no further business before the committee, the meeting adjourned at 12:34 p.m.

Revised: August 23, 2024

**TENTATIVE AGENDA
for the
FIFTH MEETING
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE**

**August 26-28, 2024
New Mexico Institute of Mining and Technology
Raul and Shari Deju University House
1001 Lopezville Road
Socorro**

Monday, August 26

- 9:15 a.m. **Call to Order and Introductions**
—Senator Gerald Ortiz y Pino, Chair, Legislative Health and Human
Services Committee (LHHS)
—Representative Elizabeth "Liz" Thomson, Vice Chair, LHHS
- 9:30 a.m. (1) **[Department of Health \(DOH\) Homelessness Initiatives](#)**
—Patrick M. Allen, Secretary, DOH
—Josh Swatek, Policy Manager, Policy and Communications Division,
DOH
- 10:45 a.m. (2) **[All Payer Claims Database Update](#)**
—Patrick M. Allen, Secretary, DOH
—Heidi Krapfl, Director, Center for Health Protection, Public Health
Division, DOH
—Glidden Martinez, Director, Information Technology Services
Department, DOH
- 12:00 noon **Lunch**
- 1:00 p.m. (3) **[Children's Code Reform Task Force Update](#)**
—Tony Ortíz, J.D., Staff, Children's Code Reform Task Force
—Cristen Conley, Director, Corinne Wolfe Center for Child and Family
Justice; Chair, Children's Code Reform Task Force
—Leslie Jones, J.D., C.W.L.S., Director, Legal Services Division, Office of
Family Representation and Advocacy; Member and Chair, Improving
Responses to Poverty and Substance Misuse Subcommittee, Children's
Code Reform Task Force
- 2:00 p.m. (4) **[LegisStat: Early Childhood Education and Care Department and
Medicaid Home Visiting](#)**
—Kelly Klundt, Principal Analyst, Legislative Finance Committee (LFC)

3:30 p.m. (5) [The Child Welfare Workforce and Leveraging Federal Funds](#)
—Rachel Mercer Garcia, Principal Analyst, LFC

4:45 p.m. **Public Comment***

5:00 p.m. **Recess**

Tuesday, August 27

9:30 a.m. (6) [Cuidando Los Niños](#)
—Trina Jellison, Chief Executive Officer (CEO), Cuidando Los Niños
—Alice Brousseau, President, Board of Directors, Cuidando Los Niños
—Kelcy Flanagan, Vice President, Board of Directors, Cuidando Los Niños

10:30 a.m. (7) [Community Based Coordination Solutions \(CBCS\)](#)
—Enrique Enguidanos, M.D., F.A.C.E.P., M.B.A., CEO and Founder,
CBCS

11:30 a.m. **Public Comment***

12:00 noon **Lunch**

1:00 p.m. (8) [Project ECHO Updates](#)
—Sanjeev Arora, M.D., M.A.C.P., F.A.C.G., Founder and Executive
Director, Project ECHO; Regents Professor, University of New
Mexico (UNM) School of Medicine
—Karla Thornton, M.D., M.P.H., Senior Associate Director, Project ECHO;
Professor, Division of Infectious Diseases, UNM School of Medicine
—Matthew Bouchonville, M.D., C.D.E., Associate Director, Project ECHO;
Associate Professor, Division of Endocrinology, Diabetes and
Metabolism, UNM School of Medicine
—Haven Scogin, Deputy Director, Reentry Division, Corrections
Department

2:30 p.m. (9) [Federal Supplemental Nutrition Assistance Program \(SNAP\)
Enrollment Barriers and Federal Funding Opportunities](#)
—Cody Jeff, Public Benefits Attorney, New Mexico Center on Law and
Poverty
—Shannon Hudson, SNAP and Public Benefits Outreach Manager,
Roadrunner Food Bank

3:30 p.m. **Recess**

Wednesday, August 28

- 9:15 a.m. (10) **Primary Care Association Update**
—Yvette Ramirez Ammerman, CEO, New Mexico Primary Care Association
- 10:30 a.m. (11) **Health Care Authority (HCA) Developmental Disabilities Waiver Update**
—Jennifer Rodriguez, Director, Developmental Disabilities Division, HCA
—Kathy Slater-Huff, Deputy Secretary, HCA
- 12:00 noon **Brainstorming Session**
- 12:45 p.m. **Public Comment***
- 1:00 p.m. **Adjourn**

*Members of the public may make virtual public comments during the public comment period of the meeting by following the instructions under the "Virtual Public Comment" section of the LHHS [web page](#).

MINUTES
of the
FIFTH MEETING
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

August 26-28, 2024
New Mexico Institute of Mining and Technology
Raul and Shari Deju University House
1001 Lopezville Road
Socorro

The fifth meeting of the Legislative Health and Human Services Committee was called to order by Senator Gerald Ortiz y Pino, chair, on Monday, August 26, 2024, at 9:32 a.m. at the New Mexico Institute of Mining and Technology in Socorro.

Present

Sen. Gerald Ortiz y Pino, Chair
Rep. Elizabeth "Liz" Thomson, Vice Chair
Rep. Eleanor Chávez
Rep. Pamelya Herndon
Sen. Martin Hickey
Rep. Jenifer Jones (8/26)
Sen. Antoinette Sedillo Lopez

Absent

Sen. David M. Gallegos

Advisory Members

Rep. Kathleen Cates (8/26, 8/27)
Rep. Gail Chasey
Rep. Joanne J. Ferrary
Rep. Tara Jaramillo
Rep. D. Wonda Johnson (8/27, 8/28)
Sen. Linda M. López
Rep. Tara L. Lujan (8/27)
Sen. Shannon D. Pinto
Sen. Harold Pope
Sen. Nancy Rodriguez (8/26)
Rep. Patricia Roybal Caballero
Sen. Elizabeth "Liz" Stefanics (8/28)
Sen. Bill Tallman (8/26)
Rep. Harlan Vincent

Rep. John Block
Sen. Katy M. Duhigg
Rep. Miguel P. García
Sen. Siah Correa Hemphill
Rep. Stefani Lord
Rep. Alan T. Martinez
Rep. Cristina Parajón
Sen. Gregg Schmedes
Rep. Reena Szczepanski

Guest Legislator

Rep. Micaela Lara Cadena (8/26)

(Attendance dates are noted for those members not present for the entire meeting.)

Staff

Zander Dawson, Staff Attorney, Legislative Council Service (LCS)
Andrea Lazarow, Bill Drafter, LCS
Grace Balderamos, Staff, LCS

Guests

The guest list is in the meeting file.

Handouts

Handouts and other written testimony are in the meeting file and posted on the legislature's website.

References to Webcast

The time reference noted next to each agenda item in this document is cross-referenced to the webcast of the committee meeting, which can be found at www.nmlegis.gov, under the "Webcast" tab. The presentations made and committee discussions for agenda items can be found on the recorded webcast for this meeting.

Monday, August 26**Welcome and Introductions (9:32 a.m.)**

Senator Ortiz y Pino welcomed everyone to the meeting, and committee members and staff introduced themselves.

Department of Health (DOH) Homelessness Initiatives (9:40 a.m.)

Patrick M. Allen, secretary, DOH, and Josh Swatek, policy manager, Policy and Communications Division, DOH, discussed the DOH's mobile homelessness demonstration project aimed at improving engagement with homeless people and evaluating homelessness in 19 rural counties throughout the state. Trauma-informed mobile outreach was used in an effort to reduce geographic and transportation barriers, increase equitable access to services, individualize care and reduce stigma and distrust. The project included a survey administered to homeless individuals who reported not utilizing homeless shelters. Reasons for not using homeless shelters included safety concerns, shelters not allowing pets, accessibility issues and previously having negative experiences at homeless shelters. Community partner organizations that participated in the project facilitated outreach and provided housing case management. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=8/26/2024&ItemNumber=1>.

All Payer Claims Database Update (10:58 a.m.)

Secretary Allen; Heidi Krapfl, director, Center for Health Protection, Public Health Division, DOH; and Glidden Martinez, director, Information Technology Services Department, DOH, provided an update on the all payer claims database, which is a database that contains medical, dental and pharmacy claims, provider files and eligibility files to identify health care

trends and promote government and health care transparency. They noted that the database includes a public portal that contains claims data and a statewide map of health care services available. The public portal allows users to compare costs of medical services, medical procedures and health care providers. The DOH hopes to incorporate Medicare claims data into the all payer claims database, expand the database's reporting to include total costs of care and expand the public portal to include Spanish language translation. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=8/26/2024&ItemNumber=2>.

Public Comment (11:50 a.m.)

A list of individuals making public comment is available in the meeting file.

Children's Code Reform Task Force Update (1:15 p.m.)

Cristen Conley, director, Corinne Wolfe Center for Child and Family Justice, and chair, Children's Code Reform Task Force; Tony Ortíz, J.D., staff, Children's Code Reform Task Force; and Leslie Jones, J.D., C.W.L.S., director, Legal Services Division, Office of Family Representation and Advocacy, and member and chair, Improving Responses to Poverty and Substance Misuse Subcommittee, Children's Code Reform Task Force, summarized a report by the Children's Code Reform Task Force that included proposed legislation, public comment and recommendations for the legislature, judicial branch and state agencies and departments for revising the Children's Code. The report included draft amendments to existing statutes regarding poverty, time limitations and access to deadly weapons. Ms. Conley, Mr. Ortíz and Ms. Jones reviewed new proposed legislation about improving responses to poverty and substance misuse, reinstatement of parental rights when appropriate and crossover youth, which refers to youth in foster care who have juvenile justice charges. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=8/26/2024&ItemNumber=3>.

LegiStat: Early Childhood Education and Care Department (ECECD) and Medicaid Home Visiting (2:36 p.m.)

Kelly Klundt, principal analyst, Legislative Finance Committee (LFC), provided a follow-up to LegiStat hearings in 2022 and 2023 about Medicaid-funded home visiting. She reviewed an LFC evaluation from July 2023 of the state's home visiting program implementation and expansion. Elizabeth Groginsky, secretary, ECECD, described the ECECD's outreach efforts to find families to participate in home visiting since there are not enough New Mexico families enrolled in Medicaid-funded home visiting for the state to receive federal funding for the program. They discussed quality initiatives that could improve outreach, recruitment and enrollment in Medicaid-funded home visiting. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=8/26/2024&ItemNumber=4>.

The Child Welfare Workforce and Leveraging Federal Funds (3:58 p.m.)

Rachel Mercer Gacria, principal analyst, LFC, discussed trends in New Mexico's child welfare workforce and training for the Title IV-E stipend program pursuant to Title IV-E of the federal Social Security Act. She discussed the high turnover rates of child protective services workers, citing exit surveys administered by the Children, Youth and Families Department (CYFD) that found that reasons former employees left the department included feeling unsupported, being underpaid and having too large of a case backlog. She noted that approximately seven percent of CYFD protective services employees have social work degrees. Dr. Mercer Garcia discussed the Title IV-E stipend programs in New Mexico universities and how New Mexico's program compares to others around the country. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=8/26/2024&ItemNumber=5>.

Public Comment (4:54 p.m.)

A list of individuals making public comment is available in the meeting file.

Recess

The meeting recessed at 5:02 p.m.

Tuesday, August 27**Reconvene**

The meeting reconvened at 9:43 a.m.

Cuidando Los Niños (9:44 a.m.)

Trina Jellison, chief executive officer (CEO), Cuidando Los Niños; Alice Brousseau, president, Board of Directors, Cuidando Los Niños; and Kelcy Flanagan, vice president, Board of Directors, Cuidando Los Niños, provided information about Cuidando Los Niños, a nonprofit organization in Albuquerque that provides trauma-informed support services to homeless families. Cuidando Los Niños offers education programs, supportive housing, workforce development, nutrition services, advocacy and transportation services. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=8/26/2024&ItemNumber=6>.

Community Based Coordination Solutions (CBCS) (10:34 a.m.)

Enrique Enguidanos, M.D., F.A.C.E.P., M.B.A., CEO and founder, CBCS, gave a presentation on CBCS, which is an organization that operates in several states and contracts with health care systems, health care foundations, insurers and managed care organizations to care for patients with both complex medical conditions and social circumstances such as being homeless, having substance use disorders or having behavioral health problems. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=8/26/2024&ItemNumber=7>.

Public Comment (11:47 a.m.)

A list of individuals making public comment is available in the meeting file.

Project ECHO Updates (12:48 p.m.)

Sanjeev Arora, M.D., M.A.C.P., F.A.C.G., founder and executive director, Project ECHO, and regents professor, University of New Mexico (UNM) School of Medicine (SOM); Karla Thornton, M.D., M.P.H., senior associate director, Project ECHO, and professor, Division of Infectious Diseases, UNM SOM; Matthew Bouchonville, M.D., C.D.E., associate director, Project ECHO, and associate professor, Division of Endocrinology, Diabetes and Metabolism, UNM SOM; and Haven Scogin, deputy director, Reentry Division, Corrections Department, gave a presentation about the growth of Project ECHO. Project ECHO now has 65 active health care programs and 26 active education programs, and by June 2025, there will be 12 more health care programs and six more education programs. They provided information about Project ECHO's new initiatives for treatment and management of type two diabetes, prediabetes, hepatitis C, syphilis and COVID-19. Project ECHO and the Corrections Department administer the New Mexico Peer Education Project to address prisoner health as a community health issue. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=8/26/2024&ItemNumber=8>.

Approval of Minutes (2:42 p.m.)

Upon a motion made and without any objections, the committee approved the minutes of the July 31-August 2, 2024 meeting.

Federal Supplemental Nutrition Assistance Program (SNAP) Enrollment Barriers and Federal Funding Opportunities (2:45 p.m.)

Cody Jeff, public benefits attorney, New Mexico Center on Law and Poverty; Shannon Hudson, SNAP and public benefits outreach manager, Roadrunner Food Bank; and Jason Riggs, director, Advocacy and Public Policy, Roadrunner Food Bank, discussed food insecurity in New Mexico. They explained how SNAP is funded and described the SNAP Outreach Program, a federal SNAP program that reaches out to people who do not participate in SNAP but may be eligible for SNAP. They provided information about the Roadrunner Food Bank. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=8/26/2024&ItemNumber=9>.

Recess

The meeting recessed at 3:54 p.m.

Wednesday, August 28**Reconvene**

The meeting reconvened at 9:22 a.m.

Primary Care Association Update (9:25 a.m.)

Yvette Ramirez Ammerman, CEO, New Mexico Primary Care Association, discussed challenges faced by primary care providers, such as employee retention, increased operational costs and difficulty recruiting clinicians to rural health care centers. She noted that community health centers serve more than 60 percent of New Mexicans living beneath 100 percent of the federal poverty level. She explained how community health centers become federally qualified health centers. There are 16 private, nonprofit federally qualified health center organizations in the state, and they serve 32 counties. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=8/26/2024&ItemNumber=10>.

Health Care Authority (HCA) Developmental Disabilities Waiver (DD Waiver) Update (10:55 a.m.)

Jennifer Rodriguez, director, Developmental Disabilities Division, HCA, and Kathy Slater-Huff, deputy secretary, HCA, provided a presentation about the DD Waiver. They explained the HCA's strategies to reduce the waiver wait list and increase the waiver provider capacity. They described the waiver's rate increases, costs and sustainability. Dan Lanari, division director, Division of Health Improvement, DOH, explained the DD Waiver investigation process. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=8/26/2024&ItemNumber=11>.

Public Comment (1:11 p.m.)

A list of individuals making public comment is available in the meeting file.

Brainstorming Session (1:40 p.m.)

Senator Ortiz y Pino led the committee in a brainstorming session focused on potential legislation that could address the issues presented to the committee.

Adjournment

There being no further business before the committee, the meeting adjourned at 2:28 p.m.

Revised: September 20, 2024

**TENTATIVE AGENDA
for the
SIXTH MEETING
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE**

**September 23-25, 2024
Western New Mexico University
J. Cloyd Miller Library
1000 West College Avenue
Silver City**

Monday, September 23

- 9:15 a.m. **Call to Order and Introductions**
—Senator Gerald Ortiz y Pino, Chair, Legislative Health and Human Services Committee (LHHS)
—Representative Elizabeth "Liz" Thomson, Vice Chair, LHHS
- 9:30 a.m. (1) **Hospital Finance Report**
—Allegra Hernandez, Ph.D., Senior Fiscal Analyst, Legislative Finance Committee (LFC)
- 10:30 a.m. (2) **State Budget Report: Revenue Outlook**
—Jennifer Faubion, Economist, LFC
- 11:45 a.m. **Public Comment***
- 12:00 noon **Lunch**
- 1:00 p.m. (3) **Expanding the Rural Health Care Workforce**
—Kimberly Petrovic, Ph.D., M.S.N., M.A., R.N., Associate Dean, School of Nursing and Kinesiology, Western New Mexico University (WNMU)
—Victor Stephen Gonzales, Jr., M.S.N., R.N., Healthcare Workforce Programs Director, WNMU
- 2:30 p.m. (4) **New Mexico Primary Care Training Consortium (NMPCTC)**
—Mary Alice Scott, Ph.D., Executive Director, NMPCTC
—Dan Otero, D.B.A., Chief Executive Officer (CEO), Hidalgo Medical Services
—Robert Whitaker, CEO, Gila Regional Medical Center
—John Andazola, M.D., Secretary, Board of Directors, NMPCTC
- 4:00 p.m. **Recess**

Tuesday, September 24

- 9:00 a.m. (5) [Welcome to WNMU](#)
—Joseph Shepard, Ph.D., M.B.A., President, WNMU
- 9:15 a.m. (6) [Silver City Health Care Providers](#)
—Dan Otero, D.B.A., CEO, Hidalgo Medical Services
—Teresa Arizaga, M.D., Chief Behavioral Health Officer, Hidalgo Medical Services
—Mick McMillan, Chief Operations Officer, Southwest Bone and Joint Institute
—Robert Whitaker, CEO, Gila Regional Medical Center
- 10:30 a.m. (7) [Supporting Caregivers and Direct Support Workers](#)
—Meggin Lorino, M.S.W., Executive Director, New Mexico Association for Home and Hospice Care
—Adrienne R. Smith, President and CEO, New Mexico Caregivers Coalition
- 11:45 a.m. **Public Comment***
- 12:00 noon **Lunch**
- 1:00 p.m. (8) [New Mexico Academy of Physician Assistants](#)
—Stephanie Richmond, President, Board of Directors, New Mexico Academy of Physician Assistants
- 2:30 p.m. (9) [New Mexico Hospital Association \(NMHA\)](#)
—Troy Clark, President and CEO, NMHA
—Robert Whitaker, CEO, Gila Regional Medical Center
—Sandra Emanuel, L.C.S.W., CEO, Peak Behavioral Health
- 4:00 p.m. **Recess**

Wednesday, September 25

- 9:00 a.m. (10) [Department of Health \(DOH\) Psilocybin Report](#)
—Lawrence Leeman, M.D., M.P.H., Professor, University of New Mexico School of Medicine; Medical Director, Milagro Program
—Miranda Durham, M.D., Chief Medical Officer, DOH
—Gary J. French, M.D., Medical Director, Center for Medical Cannabis, DOH
—Arya Lamb, Director, Policy and Communications Division, DOH

10:30 a.m. (11) **Health Care Authority (HCA) Social Safety-Net Programs**
—Kyra Ochoa, Deputy Secretary, HCA
—Niki Kozlowski, Director, Income Support Division, HCA

12:00 noon **Public Comment***

12:15 p.m. **Brainstorming Session**

1:00 p.m. **Adjourn**

*Members of the public may make virtual public comments during the public comment period of the meeting by following the instructions under the "Virtual Public Comment" section of the LHHS [web page](#).

**MINUTES
of the
SIXTH MEETING
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE**

**September 23-25, 2024
Western New Mexico University
J. Cloyd Miller Library
1000 West College Avenue
Silver City**

The sixth meeting of the Legislative Health and Human Services Committee was called to order by Senator Gerald Ortiz y Pino, chair, on Monday, September 23, 2024, at 9:22 a.m. at Western New Mexico University (WNMU) in Silver City.

Present

Sen. Gerald Ortiz y Pino, Chair
Rep. Elizabeth "Liz" Thomson, Vice Chair
Rep. Eleanor Chávez
Rep. Pamelya Herndon
Rep. Jenifer Jones (9/23, 9/24)
Sen. Antoinette Sedillo Lopez

Absent

Sen. David M. Gallegos
Sen. Martin Hickey

Advisory Members

Rep. John Block
Rep. Gail Chasey
Rep. Joanne J. Ferrary
Sen. Siah Correa Hemphill (9/23, 9/25)
Sen. Shannon D. Pinto (9/24)
Sen. Nancy Rodriguez
Rep. Patricia Roybal Caballero
Rep. Harlan Vincent

Rep. Kathleen Cates
Sen. Katy M. Duhigg
Rep. Miguel P. García
Rep. Tara Jaramillo
Rep. D. Wonda Johnson
Sen. Linda M. López
Rep. Stefani Lord
Rep. Tara L. Lujan
Rep. Alan T. Martinez
Rep. Cristina Parajón
Sen. Harold Pope
Sen. Gregg Schmedes
Sen. Elizabeth "Liz" Stefanics
Rep. Reena Szczepanski
Sen. Bill Tallman

Guest Legislator

Rep. Luis M. Terrazas (9/23, 9/24)

(Attendance dates are noted for those members not present for the entire meeting.)

Staff

Zander Dawson, Staff Attorney, Legislative Council Service (LCS)
Grace Balderamos, Staff, LCS

Guests

The guest list is in the meeting file.

Handouts

Handouts and other written testimony are in the meeting file and posted on the legislature's website.

References to Webcast

The time reference noted next to each agenda item in this document is cross-referenced to the webcast of the committee meeting, which can be found at www.nmlegis.gov, under the "Webcast" tab. The presentations made and committee discussions for agenda items can be found on the recorded webcast for this meeting.

Monday, September 23**Welcome and Introductions (9:22 a.m.)**

Senator Ortiz y Pino welcomed everyone to the meeting. Committee members introduced themselves.

Hospital Finance Report (9:33 a.m.)

Allegra Hernandez, Ph.D., senior fiscal analyst, Legislative Finance Committee (LFC), presented a report about public funding of New Mexico hospitals. Although the state legislature has invested hundreds of millions of dollars in hospitals in recent years, most allocated funds have not been encumbered, expended or budgeted. Dr. Hernandez explained the implications of the Health Care Delivery and Access Act (HCDAA) and noted that the number of hospitals owned by private equity firms is increasing, which could decrease the long-term viability of New Mexico hospitals. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=9/23/2024&ItemNumber=1>.

State Budget Report: Revenue Outlook (10:20 a.m.)

Jennifer Faubion, economist, LFC, presented the consensus revenue estimate of the General Fund as of August 2024 that was conducted by the Consensus Revenue Estimating Group, which comprises the LFC, Department of Finance and Administration, Taxation and Revenue Department and Department of Transportation. The LFC report about the consensus revenue estimate included a financial summary of the General Fund that outlined the state's financial health and quantified the state's revenues, reserves and spending. Ms. Faubion

explained the economic and revenue forecasts detailed in the LFC report. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=9/23/2024&ItemNumber=2>.

Approval of Minutes (11:40 a.m.)

Upon a motion made and without any objections, the committee approved the minutes of the August 26-28, 2024 meeting.

Public Comment (11:40 a.m.)

A list of individuals making public comment is available in the meeting file.

Expanding the Rural Health Care Workforce (1:09 p.m.)

Kimberly Petrovic, Ph.D., M.S.N., M.A., R.N., associate dean, School of Nursing and Kinesiology, WNMU, and Victor Stephen Gonzales, Jr., M.S.N., R.N., healthcare workforce programs director, WNMU, described measures taken by WNMU to broaden southwestern New Mexico's health care workforce, such as recruiting local high school students to participate in WNMU health care programs and offering workforce development training to students to become certified nursing assistants, phlebotomy technicians and pharmacy technicians. The WNMU School of Nursing and Kinesiology hopes to establish an institute of health and human performance in the near future. They noted that WNMU-Deming now houses its health programs in the newly built John Arthur and Janette Smith Educational Center. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=9/23/2024&ItemNumber=3>.

New Mexico Primary Care Training Consortium (NMPCTC) (2:25 p.m.)

Mary Alice Scott, Ph.D., executive director, NMPCTC; Dan Otero, D.B.A., chief executive officer (CEO), Hidalgo Medical Services (HMS); Robert Whitaker, CEO, Gila Regional Medical Center; and John Andazola, M.D., secretary, Board of Directors, NMPCTC, discussed graduate medical education funding gaps in rural, medically underserved parts of New Mexico, resident physician retention and the national and statewide shortage of primary care physicians. They recommended the creation of a permanent state fund for critical access hospitals, federally qualified health centers and independent psychiatric facilities. They provided information about residency programs in New Mexico and compared rural residency programs in New Mexico to other rural residency programs in the country. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=9/23/2024&ItemNumber=4>.

Recess

The meeting recessed at 4:14 p.m.

Tuesday, September 24

Reconvene

The meeting reconvened at 9:07 a.m.

Welcome to WNMU (9:08 a.m.)

Joseph Shepard, Ph.D., M.B.A., president, WNMU, welcomed the committee to WNMU and thanked the committee for meeting in Silver City. He described the challenges of recruiting medical professionals to Silver City and summarized WNMU's health care programs.

Silver City Health Care Providers (9:20 a.m.)

Dr. Otero and Teresa Arizaga, M.D., chief behavioral health officer, HMS, provided information about the medical and behavioral health and crisis intervention services offered by HMS, which serves Grant County and Hidalgo County. Dr. Otero emphasized that patients are never denied medical treatment if they are unable to pay. Mr. Whitaker discussed challenges faced by Gila Medical Services, a county-owned critical access hospital in Silver City. Mike McMillan, chief operations officer, Southwest Bone and Joint Institute, provided an overview of the Southwest Bone and Joint Institute and the Gila Multi-Specialty Independent Practice Association. Donald Stinar, M.D., described his personal experience as a private practitioner in Silver City. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=9/23/2024&ItemNumber=6>.

Supporting Caregivers and Direct Support Workers (10:59 a.m.)

Meggin Lorino, M.S.W., executive director, New Mexico Association for Home and Hospice Care, provided an overview of personal care, home health care and hospice services offered by the New Mexico Association for Home and Hospice Care. She compared caregiver and direct support worker rates and wages in New Mexico to those in other states. Adrienne R. Smith, president and CEO, New Mexico Caregivers Coalition, provided information about the New Mexico Caregivers Coalition and discussed federal and state initiatives to collect data about payment for caregivers and direct support workers. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=9/23/2024&ItemNumber=7>.

Public Comment (11:58 a.m.)

A list of individuals making public comment is available in the meeting file.

New Mexico Academy of Physician Assistants (1:20 p.m.)

Stephanie Richmond, president, Board of Directors, New Mexico Academy of Physician Assistants, and Isaac Saucedo, chief medical officer, HMS, explained physician assistants' scope of practice in New Mexico and how that scope of practice compares to other states. They described medical liability implications, reviewed current physician assistant supervision and

oversight requirements and expressed support for optimal team practice. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=9/23/2024&ItemNumber=8>.

New Mexico Hospital Association (NMHA) (2:20 p.m.)

Troy Clark, president and CEO, NMHA; Mr. Whitaker; and Sandra Emanuel, L.C.S.W., CEO, Peak Behavioral Health, discussed hospital finances and the HCDA. Mr. Clark noted that hospitals are an economic driver, as hospitals are the largest employers in most New Mexican communities that have hospitals. They described challenges faced by urban and rural hospitals, such as rural hospitals having difficulty recruiting and retaining health care professionals and urban hospitals having patient volumes beyond the hospitals' capacity. Other difficulties facing hospitals include high inflation for the costs of medications and supplies, unaffordable malpractice insurance and high operation costs. They praised the HCDDA as a help for sustainable Medicaid reimbursement rates. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=9/23/2024&ItemNumber=9>.

Recess

The meeting recessed at 3:59 p.m.

Wednesday, September 25

Reconvene

The meeting reconvened at 9:15 a.m.

Department of Health (DOH) Psilocybin Report (9:17 a.m.)

Lawrence Leeman, M.D., M.P.H., professor, University of New Mexico School of Medicine, and medical director, Milagro Program; Gary J. French, M.D., medical director, Center for Medical Cannabis, DOH; Arya Lamb, director, Policy and Communications Division, DOH; and Miranda Durham, M.D., chief medical officer, DOH, discussed the medical use of psilocybin and psilocybin-assisted therapy. Dr. Leeman and Dr. French compared psilocybin mushrooms and synthetic psilocybin, addressed safety concerns, explained therapeutic models and discussed current research. They reviewed the legal landscape, equity and ethics, costs, funding and program considerations of medical psilocybin use. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=9/23/2024&ItemNumber=10>.

Health Care Authority (HCA) Social Safety-Net Programs (10:44 a.m.)

Kyra Ochoa, deputy secretary, HCA, and Niki Kozlowski, director, Income Support Division (ISD), HCA, provided an update on the ISD. They described the ISD's efforts to reduce the backlogs of Medicaid and Supplemental Nutrition Assistance Program (SNAP) applications and recertifications. SNAP has become more accessible to New Mexicans because more people are eligible to participate in SNAP, and the minimum monthly SNAP benefits for elderly and disabled people have increased. Ms. Ochoa and Ms. Kozlowski stated that the HCA has partnered with six community action agencies to help to provide services such as housing assistance and crisis and emergency services to poor and rural areas throughout the state. The community action agencies are funded by the Community Services Block Grant, which provides federal funding to help administer support services to poor and rural communities. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=9/23/2024&ItemNumber=11>.

Public Comment (12:13 p.m.)

A list of individuals making public comment is available in the meeting file.

Brainstorming Session (12:39 p.m.)

Senator Ortiz y Pino led the committee in a brainstorming session focused on potential legislation that could address the issues presented to the committee.

Adjournment

There being no further business before the committee, the meeting adjourned at 12:51 p.m.

Revised: October 18, 2024

**TENTATIVE AGENDA
for the
SEVENTH MEETING
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE**

**October 21-24, 2024
Rio Rancho Public School District Training Center
500 Laser Road NE
Rio Rancho**

Monday, October 21

- 9:15 a.m. **Call to Order and Introductions**
—Senator Gerald Ortiz y Pino, Chair, Legislative Health and Human Services Committee (LHHS)
—Representative Elizabeth "Liz" Thomson, Vice Chair, LHHS
- 9:30 a.m. (1) **Issues Affecting People with Disabilities**
—Senator Leo Jaramillo
—TBD
- 10:30 a.m. (2) **Health Care Authority (HCA) Developmental Disabilities Supports Division Updates**
—Kari Armijo, Secretary, HCA
- 12:00 noon **Lunch**
- 1:00 p.m. (3) **Pueblo of Santa Ana Health Care Status Update**
—Myron Armijo, Governor, Pueblo of Santa Ana
- 2:00 p.m. (4) **Anna, Age Eight Institute Blueprint Project**
—Katherine Ortega Courtney, Ph.D., Co-Director, Anna, Age Eight Institute; Co-Developer, 100% New Mexico Initiative
—Veronica Krupnick, Leadership Analyst, Office of House Majority Floor Leader
- 3:00 p.m. (5) **Partners for Reentry Opportunity in Workforce Development**
—Nina Chavez, Director, Government Relations, Goodwill Industries of New Mexico (GINM)
—Sesha Lee, Chief Services Officer, GINM
—Ralph Martinez, Formerly Incarcerated Individual, Community Leader
—Roger Gonzales, President and Chief Executive Officer, Gonzales Strategic Group

4:15 p.m. **Public Comment***

4:30 p.m. **Recess**

Tuesday, October 22

9:15 a.m. (6) **Hole in the Heart**
—Sandra Sanchez Fahrlender, Founder and President, Hole in the Heart

10:30 a.m. (7) **Independent Living Resource Center**
—Kate Unna, Senior Program Officer, Independent Living Resource Center

11:45 a.m. **Public Comment***

12:00 noon **Lunch**

1:00 p.m. (8) **Department of Health (DOH) Respiratory Illness Update**
—Patrick Allen, Secretary, DOH
—Daniel Sosin, M.D., M.P.H., Medical Epidemiologist, DOH
—Erin Phipps, D.V.M., M.P.H., State Public Health Veterinarian, DOH
—Miranda Durham, M.D., M.B.A., Chief Medical Officer, DOH

2:15 p.m. (9) **DOH School-Based Health Center Update**
—Patrick Allen, Secretary, DOH
—Kristin Oreskovich, D.N.P., C.P.N.P., Clinical Operations Manager,
School-Based Health Center Program, DOH
—Nancy Rodriguez, Executive Director, New Mexico Alliance for
School-Based Health Care

3:30 p.m. (10) **Abrazos Family Support Services**
—April Spaulding, Executive Director, Abrazos Family Support Services

4:30 p.m. **Recess**

Wednesday, October 23

9:15 a.m. (11) **New Mexico Alliance of Health Councils (NMAHC)**
—Valeria Alarcón, Executive Director, NMAHC

10:30 a.m. (12) **Dona Ana County Kevin S. Pilot Program**
—Rosenda Chavez-Lara, Family Law Attorney, Former Guardian Ad Litem
—Brian Kavanaugh, Chief Executive Officer (CEO), Family and Youth
Innovations Plus
—Jennifer Raes, L.C.S.W.

- 11:45 a.m. **Public Comment***
- 12:00 noon **Lunch**
- 1:00 p.m. (13) [New Mexico Chiropractic Association](#)
—TBD
- 2:30 p.m. (14) [Hunger in New Mexico](#)
—Jill Dixon, Executive Director, The Food Depot
—Katy Anderson, Vice President, Strategy, Partnerships and Advocacy,
Roadrunner Food Bank
- 3:30 p.m. (15) [Developmental Disabilities Council Update](#)
—Alice Liu McCoy, Executive Director, Developmental Disabilities
Council
- 4:30 p.m. **Recess**

Thursday, October 24

- 8:15 a.m. (16) [HCA Budget Request Preview](#)
—Eric Chenier, Principal Analyst, Legislative Finance Committee (LFC)
- 9:00 a.m. (17) [DOH Budget Request Preview](#)
—Kelly Klundt, Principal Analyst, LFC
- 9:45 a.m. (18) [Children, Youth and Families Department Budget Request Preview](#)
—Rachel Mercer-Garcia, Principal Analyst, LFC
- 10:30 a.m. (19) [HCA Health Care Workforce Update](#)
—Alex Castillo Smith, Deputy Secretary, HCA
—Elisa Wrede, Senior Manager, Primary Care Innovation, HCA
- 12:00 noon **Lunch**
- 1:00 p.m. (20) [Rightway Healthcare](#)
—James Powell, Vice President, Enterprise Partnerships, Rightway
Healthcare
—Ashley Elizabeth Hasle, Senior Vice President of Growth, Rightway
Healthcare
- 2:00 p.m. (21) [ArrayRx](#)
—Trevor Douglass, D.C., M.P.H., Director, Oregon Prescription Drug
Program; Director, Pharmacy Policy and Programs, Office of Delivery
Systems Improvement, Oregon Health Authority

3:00 p.m. (22) **Capital Rx**
—Anthony J. Loiacono, CEO, Capital Rx
—Lloyd D. Fiorini, General Counsel and Chief Compliance Officer, Capital Rx
—Louanne Cunico, Vice President of Pharmacy Services and Pharmacy Director, Presbyterian Health Plan

4:00 p.m. **Public Comment***

4:15 p.m. **Adjourn**

*Members of the public may make virtual public comments during the public comment period of the meeting by following the instructions under the "Virtual Public Comment" section of the LHHS [web page](#).

**MINUTES
of the
SEVENTH MEETING
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE**

**October 21-24, 2024
Rio Rancho Public School District Training Center
500 Laser Road NE
Rio Rancho**

The seventh meeting of the Legislative Health and Human Services Committee was called to order by Senator Gerald Ortiz y Pino, chair, on Monday, October 21, 2024, at 9:31 a.m. at the Rio Rancho Public School District Training Center in Rio Rancho.

Present

Sen. Gerald Ortiz y Pino, Chair
Rep. Elizabeth "Liz" Thomson, Vice Chair
Rep. Eleanor Chávez
Rep. Pamelya Herndon
Sen. Martin Hickey (10/22, 10/24)
Sen. Antoinette Sedillo Lopez

Absent

Sen. David M. Gallegos
Rep. Jenifer Jones

Advisory Members

Rep. Kathleen Cates
Rep. Gail Chasey
Rep. Joanne J. Ferrary
Rep. D. Wonda Johnson (10/24)
Sen. Linda M. López
Rep. Alan T. Martinez
Rep. Cristina Parajón (10/21)
Sen. Shannon D. Pinto (10/21, 10/22, 10/24)
Sen. Harold Pope
Sen. Nancy Rodriguez (10/21)
Sen. Bill Tallman (10/21, 10/22)

Rep. John Block
Sen. Katy M. Duhigg
Rep. Miguel P. García
Sen. Siah Correa Hemphill
Rep. Tara Jaramillo
Rep. Stefani Lord
Rep. Tara L. Lujan
Rep. Patricia Roybal Caballero
Sen. Gregg Schmedes
Sen. Elizabeth "Liz" Stefanics
Rep. Reena Szczepanski
Rep. Harlan Vincent

(Attendance dates are noted for those members not present for the entire meeting.)

Staff

Zander Dawson, Staff Attorney, Legislative Council Service (LCS)
Andrea Lazarow, Bill Drafter, LCS

Guests

The guest list is in the meeting file.

Handouts

Handouts and other written testimony are in the meeting file and posted on the legislature's website.

References to Webcast

The time reference noted next to each agenda item in this document is cross-referenced to the webcast of the committee meeting, which can be found at www.nmlegis.gov, under the "Webcast" tab. The presentations made and committee discussions for agenda items can be found on the recorded webcast for this meeting.

Monday, October 21

Welcome and Introductions (9:31 a.m.)

Senator Ortiz y Pino welcomed everyone to the meeting. Committee members introduced themselves.

Issues Affecting People with Disabilities (9:39 a.m.)

Senator Leo Jaramillo and Representative Susan K. Herrera provided overviews of health care and behavioral health care in their respective districts. Nanette Martinez de Rodriguez, city councilor, District 2, City of Espanola, and director, Adult Services, Las Cumbres Community Services, discussed services offered by Las Cumbres Community Services in Santa Fe, Rio Arriba, Los Alamos, Taos and Bernalillo counties. Jim Copeland, executive director, Association of Developmental Disabilities Community Providers, shared common concerns of health care providers who treat patients with developmental disabilities.

Health Care Authority (HCA) Developmental Disabilities Supports Division Updates (10:44 a.m.)

Kari Armijo, secretary, HCA; Jennifer Rodriguez, director, Developmental Disabilities Supports Division, HCA; and Dan Lanari, director, Health Improvement Division, HCA, provided a presentation on the HCA's efforts to support health care provider capacity, reduce administrative burdens on health care providers, ensure updated rates and timely payments, reduce renewal processing time for waiver applications, improve wellness visits and provide additional resources for direct-support professionals. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=2>.

Approval of Minutes (1:05 p.m.)

Upon a motion made, and without any objections, the committee approved the minutes of the September 23-25, 2024 meeting.

Pueblo of Santa Ana Health Care Status Update (1:11 p.m.)

Myron Armijo, governor, Pueblo of Santa Ana; Kevin C. Montoya, lieutenant governor, Pueblo of Santa Ana; Carrie Brauer, program manager, Pueblo of Santa Ana Senior Center; and

Miriam Campos Marchetti, director, Pueblo of Santa Ana Health and Human Services Department, explained that insufficient federal and state funding to the pueblo makes it difficult to provide adequate, comprehensive health care. The lack of accessible and affordable healthy food contributes to the high prevalence of type 2 diabetes, hypertension, heart disease and other chronic diseases in the pueblo. However, many senior citizens participate in and enjoy health and wellness activities at the Pueblo of Santa Ana Senior Center, and the Pueblo of Santa Ana Health and Human Services Department offers several health resources to the community.

Anna, Age Eight Institute Blueprint Project (2:10 p.m.)

Katherine Ortega Courtney, Ph.D., co-director, Anna, Age Eight Institute, and co-developer, 100% New Mexico Initiative; Veronica Krupnick, leadership analyst, Office of House Majority Floor Leader; Melissa Moyer, Ph.D., L.C.S.W., director, Master of Social Work Program, and assistant professor, Eastern New Mexico University; Diego Lopez, executive director, Hands Across Cultures, and president, Rio Arriba Community Health Council; and Kristen Trujillo, executive director, San Martin de Porres Soup Kitchen, and team lead, 100% Food Security Action, Rio Arriba Community Health Council, described the Anna, Age Eight Institute's two-year-long child welfare blueprint project, which comprises a series of focus groups and town halls to hear about New Mexicans' experiences with child welfare. When the project is complete, a task force will be created to provide recommendations based on the project's findings.

Partners for Reentry Opportunity in Workforce Development (3:22 p.m.)

Nina Chavez, director, Government Relations, Goodwill Industries of New Mexico (GINM); Sessa Lee, chief services officer, GINM; and Roger Gonzales, president and chief executive officer (CEO), Gonzales Strategic Group, discussed challenges of and strategies for formerly incarcerated individuals when reintegrating into the workforce. According to research from the Legislative Finance Committee (LFC) and the Corrections Department, most people who are released from New Mexico prisons desire to work but can face barriers to reentering the workforce, such as lack of housing, behavioral health needs and child care needs. The panel recommended providing recurring funding to state-administered workforce reentry programs and creating a reentry task force. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=5>.

Public Comment (4:09 p.m.)

A list of individuals making public comment is available in the meeting file.

Recess

The meeting recessed at 4:14 p.m.

Tuesday, October 22

Reconvene

The meeting reconvened at 9:31 a.m.

Hole in the Heart (9:37 a.m.)

Sandra Sanchez Fahrlander, founder and president, Hole in the Heart; Bob Fahrlander, co-founder and treasurer, Hole in the Heart; Kelsey Leibenhaut, M.S.N.; and Crystal Avila Schroeder, M.D., comprised a panel of parents of children born with congenital heart defects. Mr. Fahrlander and Ms. Sanchez Fahrlander, a married couple, shared their story of founding Hole in the Heart, a nonprofit agency that advocates for families of children with congenital heart defects, after raising their son who was diagnosed with a congenital heart defect as a teenager. The panel recommended passing legislation that would mandate that echocardiograms and electrocardiograms be administered to newborn infants who are at risk of being born with or developing cardiac disease. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=6>.

Independent Living Resource Center (10:31 a.m.)

Kate Unna, senior program officer, Independent Living Resource Center, provided an overview of the Independent Living Resource Center, a private, nonprofit agency that provides resources to disabled people who live independently. The Independent Living Resource Center offers independent living services, nursing home transition services and personal attendant services. The center advocates for at-home accessibility and helps pay for and install home and vehicle modifications and adaptive equipment for people with disabilities.

Brainstorming Session (12:04 p.m.)

Senator Ortiz y Pino led the committee in a brainstorming session focused on potential legislation that could address the issues presented to the committee.

Public Comment (12:37 p.m.)

A list of individuals making public comment is available in the meeting file.

Department of Health (DOH) Respiratory Illness Update (1:15 p.m.)

Patrick Allen, secretary, DOH; Daniel Sosin, M.D., M.P.H., medical epidemiologist, DOH; Erin Phipps, D.V.M., M.P.H., state public health veterinarian, DOH; and Miranda Durham, M.D., M.B.A., chief medical officer, DOH, discussed COVID-19, influenza and respiratory syncytial virus in New Mexico, including incidence rates during the fall and winter months, outbreak readiness and vaccination coverage rates. They noted that the DOH has a vaccination campaign to address the growing prominence of vaccine hesitancy and described new tools to track diseases across the state. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=8>.

DOH School-Based Health Center Update (2:37 p.m.)

Kristin Oreskovich, D.N.P., C.P.N.P., clinical operations manager, School-Based Health Center Program, DOH, and Secretary Allen provided a time line of and described the expansion of school-based health centers. The DOH and the Public Education Department have partnered

to create an educational and health data matching project to ensure long-term sustainability of school-based health centers. Nancy Rodriguez, executive director, New Mexico Alliance for School-Based Health Care, discussed state and national trends of school-based health centers. Goals for growing school-based health centers include providing telehealth services, creating mobile units to reach rural areas and providing services to early childhood campuses. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=9>.

Abrazos Family Support Services (3:55 p.m.)

April Spaulding, executive director, Abrazos Family Support Services, provided a presentation about Abrazos Family Support Services, a nonprofit organization in the Town of Bernalillo that provides services to people with developmental delays and disabilities. Abrazos Family Support Services offers respite services for caregivers of disabled people, applied behavior analysis for autistic people, early intervention services for families with babies or toddlers and family living services to provide full-time, in-home care for adults. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=10>.

Recess

The meeting recessed at 5:16 p.m.

Wednesday, October 23

Reconvene

The meeting reconvened at 9:34 a.m.

New Mexico Alliance of Health Councils (NMAHC) (9:35 a.m.)

Valeria Alarcón, executive director, NMAHC; Heather Maxey, health council and public health specialist, NMAHC; and Gerilyn Antonio, M.P.H., tribal liaison, NMAHC, discussed the impact of county health councils and tribal health councils. The NMAHC is a 501(c)(3) organization that represents, advocates for and provides services to New Mexico's 33 county health councils and 10 tribal health councils. The panel reviewed the history and sources of funding for health councils and explained the NMAHC's community health improvement plan. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=11>.

Dona Ana County *Kevin S.* Pilot Program (10:37 a.m.)

Rosenda Chavez-Lara, family law attorney and former guardian ad litem, provided an update on the Coordinated Action Pilot Program in Dona Ana County. The pilot program

involves a collaboration between behavioral health providers and child welfare professionals to evaluate current practices and provide recommendations based on the pilot program's findings to meet the needs of children and families involved with protective services. Jennifer Raes, L.C.S.W., shared her personal experience as a social worker for the Children, Youth and Families Department (CYFD) and offered strategies on how the CYFD could be improved. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=12>.

Public Comment (11:57 a.m.)

A list of individuals making public comment is available in the meeting file.

New Mexico Chiropractic Association (1:38 p.m.)

Robert Jones, D.C., former president, American Chiropractic Association; J.C. Moore, D.C.-A.P.C., president, New Mexico Chiropractic Association; and Michael Pridham, D.C.-A.P.C., described the current scope of practice of chiropractic physicians in New Mexico, which is one of the largest scopes of practice in the country. They suggested that expanding chiropractic physicians' scope of practice could potentially help with the statewide primary care provider shortage. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=13>.

Hunger in New Mexico (2:20 p.m.)

Jill Dixon, executive director, The Food Depot, and Katy Anderson, vice president, Strategy, Partnerships and Advocacy, Roadrunner Food Bank, stated that one in seven New Mexicans experiences food insecurity. The Roadrunner Food Bank has a coalition called the Roadrunner's Coalition to End Hunger. The coalition plans to publish a blueprint in the fall of 2025 for ending hunger in New Mexico. Ms. Dixon and Ms. Anderson recommended that the legislature allocate \$10 million in the HCA's fiscal year 2026 budget for food banks. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=14>.

Developmental Disabilities Council Update (3:30 p.m.)

Joe Turk, legal director, Office of Guardianship, Developmental Disabilities Council; Vashad Frink, job trainee, New Mexico Center for Self Advocacy, Developmental Disabilities Council, and lead ambassador, New Mexico Supported Decision-Making; and Eli Fresquez, Accessible New Mexico, discussed supported decision making in New Mexico. Supported decision making is an alternative to guardianship and promotes the ability of individuals with

mental or developmental disabilities to make their own choices. They provided information about other states' supported decision making laws. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=15>.

Recess

The meeting recessed at 4:44 p.m.

Thursday, October 24

Reconvene

The meeting reconvened at 8:59 a.m.

HCA Budget Request Preview (9:01 a.m.)

Eric Chenier, principal analyst, LFC, discussed the HCA's budget request for fiscal year 2026. The HCA is in its first fiscal year and requests \$2.25 billion. The authority receives significant federal funding, and its budget for fiscal year 2025 is approximately \$12.2 billion. The HCA's budget is likely to increase in coming years with the enactment of the Health Care Delivery and Access Act (HCDAA). Budget drivers include medical inflation, rate adjustments, services for developmentally disabled people and projected decreases in federal matching. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=16>.

DOH Budget Request Preview (9:01 a.m.)

Kelly Klundt, principal analyst, LFC, reviewed the DOH's budget request for fiscal year 2026. The department's requests total \$243.9 million, and most of the requests are for operational costs such as personnel pay, rent and utilities. The DOH oversees fewer divisions and programs because many of the department's former divisions and programs were transferred to the HCA. Other budget requests are for money for public health mobile unit staffing, a climate health program, the DOH hotline and operational costs for the New Mexico Behavioral Health Institute at Las Vegas. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=17>.

CYFD Budget Request Preview (9:01 a.m.)

Rachel Mercer-Garcia, principal analyst, LFC, presented on the CYFD's budget request for fiscal year 2026. The CYFD's requests total \$412.7 million. Most of the requests are for costs of protective services, filling 101 more caseworker positions, maintaining group homes that are ineligible for federal funding, implementing *Kevin S.* requirements and creating a new workforce training program. The budget request includes a proposal for creating a new family

services program and staffing and operational needs for the program. The CYFD hopes to develop a child welfare training academy and maintain staffing at the receiving center for 24 hours per day. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=18>.

HCA Health Care Workforce Update (10:39 a.m.)

Alex Castillo Smith, deputy secretary, HCA, and Elisa Wrede, strategic planning director, HCA, discussed rural health care workforce development, Medicaid increases as of fiscal year 2025 and implications of the enactment of the HCDA for hospitals. They reviewed outcomes from the Rural Health Care Delivery Fund from fiscal year 2024 and described the funding for recipients. Crisis services have increased throughout the state, and three new, accredited, rural primary care residencies have opened in New Mexico since 2019. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=19>.

Public Comment (11:43 a.m.)

A list of individuals making public comment is available in the meeting file.

Rightway Healthcare (12:17 p.m.)

Scott Musial, chief pharmacy officer and general manager, Pharmacy Benefits Management, Rightway Healthcare; James Powell, vice president, Enterprise Partnerships, Rightway Healthcare; and Ashley Elizabeth Hasle, senior vice president of growth, Rightway Healthcare, described Rightway Healthcare's mission of supporting rural pharmacies and providing services to areas of the country that are pharmacy deserts, such as New Mexico. Rightway Healthcare provides full-service pharmacy benefits management (PBM). The panel explained Rightway Healthcare's PBM model. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=20>.

ArrayRx (1:10 p.m.)

Trevor Douglass, D.C., M.P.H., director, Oregon Prescription Drug Program, and director, Pharmacy Policy and Programs, Office of Delivery Systems Improvement, Oregon Health Authority, provided information about ArrayRx, which was formerly called the Northwest Prescription Drug Consortium. ArrayRx originated in Oregon and Washington and now has other member states. ArrayRx offers PBM services, drug purchasing services, prescription drug voucher services and state-sponsored prescription drug discount cards. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=21>.

Capital Rx (1:50 p.m.)

Louanne Cunico, vice president of pharmacy services and pharmacy director, Presbyterian Health Plan, and Lloyd D. Fiorini, general counsel and chief compliance officer, Capital Rx, presented about Capital Rx, which provides PBM services. Capital Rx is the fastest growing health care company in the country, serving more than 65,000 in-network pharmacies. Capital Rx operates a cloud-based platform for pharmacy administration that handles details such as claims, prior authorization, data exchange and invoicing. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=10/21/2024&ItemNumber=22>.

Adjournment

There being no further business before the committee, the meeting adjourned at 2:59 p.m.

Revised: November 20, 2024

**TENTATIVE AGENDA
for the
EIGHTH MEETING
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE**

**November 19-22, 2024
State Capitol, Room 307
Santa Fe**

Tuesday, November 19

- 8:45 a.m. **Call to Order and Introductions**
—Senator Gerald Ortiz y Pino, Chair, Legislative Health and Human
Services Committee (LHHS)
—Representative Elizabeth "Liz" Thomson, Vice Chair, LHHS
- 9:00 a.m. (1) **[New Mexico Justice Reinvestment Initiative Working Group: Summary
of Findings and Recommendations](#)**
—Colleen Bogonovich, Senior Policy Specialist, Crime and Justice Institute
—Melanie Pitkin, Policy Specialist, Crime and Justice Institute
- 10:00 a.m. (2) **[Legislative Finance Committee \(LFC\) Report: Developmental
Disabilities Waiver Program](#)**
—Sarah Dinces, Ph.D., Program Evaluator, LFC
—Drew Weaver, Program Evaluator, LFC
- 12:00 noon **Working Lunch**
(3) **[Council of State Governments Youth Justice Summit](#)**
—TBD
- 1:00 p.m. (4) **[Health Care Workforce Growth Plan](#)**
—Michael Richards, M.D., M.P.H., Interim Executive Vice President for
Health Sciences, University of New Mexico (UNM) Health Sciences;
Chief Executive Officer (CEO), UNM Health System
—Patricia W. Finn, M.D., Dean, UNM School of Medicine
—Garnett Stokes, Ph.D., President, UNM
- 2:30 p.m. (5) **[LFC Report: Behavioral Health Gaps](#)**
—Eric Chenier, Principal Analyst, LFC
- 3:45 p.m. (6) **[LFC Report: Prescription Drug Pricing Data](#)**
—RubyAnn Esquibel, Principal Analyst, LFC

4:30 p.m. **Public Comment***

4:45 p.m. **Recess**

Wednesday, November 20

8:45 a.m. **Reconvene**

9:00 a.m. (7) **[Opioid Settlement and Affordable Housing](#)**

A. Opioid Settlement Funding

—Barbara Bencomo, Chief Administrative Officer, City of Las Cruces

—Shauna Hartley, L.C.S.W., Consultant, The Opioid Remediation Collaborative

—Stanford Kemp, Deputy Director, Behavioral Health and Wellness Division, City of Albuquerque

—Wayne Lindstrom, Deputy County Manager for Behavioral Health, Bernalillo County

B. Preserving Affordable Housing and Ensuring Stability for Residents of Manufactured Home Communities

—Maria Griego, Director, Economic Equity, New Mexico Center on Law and Poverty

11:30 a.m. **Working Lunch**

(8) **[Update: New Mexico Medical Board \(NMMB\)](#)**

—Karen Carson, M.D., Chair, NMMB

—Monique Parks, Interim Executive Director, NMMB

1:00 p.m. (9) **[The Path Forward: Data-Informed Recommendations for Improving Behavioral Health Outcomes in New Mexico](#)**

—Jorie Koster-Hale, CEO, Falling Colors

—Kyle Kleisinger, Public Health Data Analyst, Falling Colors

—Sam Wolf, Chief Operating Officer and General Counsel, Falling Colors

2:30 p.m. (10) **[New Mexico Medical Society \(NMMS\) Legislative Priorities](#)**

—Angelina Villas-Adams, M.D., President, NMMS

—Carrie Robin Brunder, Lobbyist, NMMS

3:30 p.m. (11) **[Study Summary: Financial Support for Rural Hospitals: Actionable Recommendations](#)**

—Sam Howarth, Ph.D., Consultant

4:30 p.m. **Recess**

Thursday, November 21

8:45 a.m. **Reconvene**

- 9:00 a.m. (12) [Licensing Portability](#)
—Razan Badr, Policy Analyst, Health Program, National Conference of State Legislatures (NCSL)
—Kelsie George, M.P.P., Senior Policy Specialist, Health Program, NCSL
- 10:00 a.m. (13) [Dental Health](#)
—Tom Schripsema, D.D.S., Executive Director, New Mexico Dental Association
—Christine Nathe, R.D.H., M.S., Professor and Director, Division of Dental Hygiene, and Vice Chair, Department of Dental Medicine, UNM
—Henry Chu, D.D.S., P.A., Associate Professor and Director, Special Care Clinic, Department of Dental Medicine, UNM
- 11:30 a.m. **Public Comment***
- 12:00 noon **Working Lunch**
- (14) [National Student Speech Language Hearing Association \(NSSLHA\)](#)
—Adrienne McElroy-Bratcher, SLP.D., Co-Advisor, NSSLHA; Professor, Communicative Disorders (CDIS), Department of Health and Human Services, Eastern New Mexico University
- 1:00 p.m. (15) [Health Care Cost Drivers](#)
- A. Global Budgeting Issues**
—Donna Kinzer, Consultant, Kinzer Consulting; Former Executive Director, Maryland Health Services Cost Review Commission
—Dorothy Moller, Health Policy Consultant, DMoller Associates
- B. Simplifying Hospital Payment and Accountability Systems**
—Miriam Laugesen, Ph.D., Associate Professor, Department of Health Policy and Management, Mailman School of Public Health, Columbia University
—Michael Gusmano, Ph.D., Professor, College of Health, and Associate Dean for Academic Programs, Lehigh University
- C. Collecting New Mexico Hospital Data**
—Gabriel R. Sanchez, Ph.D., Professor, Political Science Department, and Executive Director, Center for Social Policy, UNM
- D. The Need for a New Mexico Health Expenditure Database**
—Suzan Reagan, Senior Program Manager, Bureau of Business and Economic Research, UNM
—Kramer Winingham, Ph.D., Program Director, Arrowhead Center, New Mexico State University
- 4:00 p.m. (16) [Prison Rape Elimination Act Task Force Recommendations](#)
—Roman Varela, M.B.A., Administrator, Prison Rape Elimination Act, Bernalillo County Metropolitan Detention Center
—Alexandria Taylor, M.P.A., L.M.S.W., Executive Director, New Mexico Coalition of Sexual Assault Programs

4:30 p.m. **Recess**

Friday, November 22

8:45 a.m. **Reconvene**

- 9:00 a.m. (17) **Update: Office of Superintendent of Insurance (OSI)**
A. Update: The Health Care Consolidation Oversight Act
—Senator Katy M. Duhigg
—Representative Reena Szczepanski
—Alice T. Kane, Superintendent, OSI
—Jane Wishner, Health Policy Consultant
B. Update: The Prescription Drug Price Transparency Act and Health Insurance Mental Health Coverage
—Alejandro Amparan, Director, Pharmacy Benefits Management and Drug Compliance, OSI
—Viara Ianakieva, Director, Life and Health Division, OSI

10:30 a.m. (18) **Medicaid Forward**
—Representative Reena Szczepanski

11:30 a.m. (19) **Report: Senate Memorial 5 Task Force (SM5 Task Force)**
—Senator Linda M. López, Chair, SM5 Task Force

12:30 p.m. **Public Comment***

12:45 p.m. **Working Lunch**
(20) **Youth Risk and Resiliency Survey Update**
—José A. Acosta M.D., M.B.A., M.P.H., Director, Public Health Division, Department of Health

1:45 p.m. (21) **Consideration of Legislation for Endorsement**

3:00 p.m. **Adjourn**

*Members of the public may make virtual public comments during the public comment period of the meeting by following the instructions under the "Virtual Public Comment" section of the LHHS [web page](#).

MINUTES
of the
EIGHTH MEETING
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

November 19-22, 2024
State Capitol, Room 307
Santa Fe

The eighth meeting of the Legislative Health and Human Services Committee (LHHS) was called to order by Senator Gerald Ortiz y Pino, chair, on Tuesday, November 19, 2024, at 9:04 a.m. in Room 307 of the State Capitol in Santa Fe.

Present

Sen. Gerald Ortiz y Pino, Chair
Rep. Elizabeth "Liz" Thomson, Vice Chair
Rep. Eleanor Chávez
Rep. Pamelya Herndon
Sen. Martin Hickey (11/19)
Rep. Jenifer Jones (11/20, 11/21, 11/22)
Sen. Antoinette Sedillo Lopez (11/19, 11/20, 11/21)

Absent

Sen. David M. Gallegos

Advisory Members

Rep. John Block (11/19, 11/20)
Rep. Kathleen Cates
Rep. Gail Chasey
Rep. Joanne J. Ferrary
Rep. Miguel P. García (11/20, 11/22)
Sen. Linda M. López
Rep. Tara L. Lujan (11/20)
Rep. Alan T. Martinez
Sen. Shannon D. Pinto
Sen. Harold Pope
Sen. Elizabeth "Liz" Stefanics

Sen. Katy M. Duhigg
Sen. Siah Correa Hemphill
Rep. Tara Jaramillo
Rep. D. Wonda Johnson
Rep. Stefani Lord
Rep. Cristina Parajón
Sen. Nancy Rodriguez
Rep. Patricia Roybal Caballero
Sen. Gregg Schmedes
Rep. Reena Szczepanski
Sen. Bill Tallman
Rep. Harlan Vincent

(Attendance dates are noted for members not present for the entire meeting.)

Staff

Zander Dawson, Staff Attorney, Legislative Council Service (LCS)
Andrea Lazarow, Bill Drafter, LCS
Grace Balderamos, Staff, LCS

Minutes Approval

Because the committee will not meet again this year, the minutes for this meeting have not been officially approved by the committee.

Guests

The guest list is in the meeting file.

Handouts

Handouts and other written testimony are in the meeting file and posted on the legislature's website.

References to Webcast

The time reference noted next to each agenda item in this document is cross-referenced to the webcast of the committee meeting, which can be found at www.nmlegis.gov, under the "Webcast" tab. The presentations made and committee discussions for agenda items can be found on the recorded webcast for this meeting.

Tuesday, November 19

Welcome and Introductions (9:04 a.m.)

Senator Ortiz y Pino welcomed everyone to the meeting. Committee members and staff introduced themselves.

New Mexico Justice Reinvestment Initiative Working Group: Summary of Findings and Recommendations (9:09 a.m.)

Colleen Bogonovich, senior policy specialist, Crime and Justice Institute, and Melanie Pitkin, policy specialist, Crime and Justice Institute, explained that insufficient services for behavioral health and addiction in New Mexico divert law enforcement resources away from public safety threats, and they provided recommendations for reducing recidivism and shifting resources to improve public health responses and public safety. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=1>.

Legislative Finance Committee (LFC) Report: Developmental Disabilities Waiver (DD Waiver) Program (10:09 a.m.)

Sarah Dinces, Ph.D., program evaluator, LFC, and Drew Weaver, program evaluator, LFC, provided a follow-up to an LFC evaluation conducted in 2018 on the cost-effectiveness of the DD Waiver and Mi Via Self-Directed Waiver programs. In fiscal year 2024, it cost almost \$800 million to provide waivers to approximately 7,849 New Mexicans. As waiver costs increase, the number of new waiver recipients is limited. Dr. Dinces and Mr. Weaver offered recommendations to the legislature and the Developmental Disabilities Supports Division of the Health Care Authority (HCA) and the Health Improvement Division of the HCA. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=2>.

Public Comment (11:36 a.m.)

A list of individuals who made public comment is available in the meeting file.

Council of State Governments Youth Justice Summit (12:18 p.m.)

Nina Salomon, Council of State Governments Justice Center, and Christina Gilbert, Council of State Governments Justice Center, provided a presentation about the Councils of State Governments Youth Justice Summit, which is a conference that examines recidivism trends and advocates for youth and families affected by the juvenile justice system. The summit's mission is to decrease juvenile incarceration and increase public safety. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=3>.

Health Care Workforce Growth Plan (1:13 p.m.)

Michael Richards, M.D., M.P.H., interim executive vice president for health sciences, University of New Mexico (UNM) Health Sciences, and chief executive officer (CEO), UNM Health System; Patricia W. Finn, M.D., dean, UNM School of Medicine; and Garnett Stokes, Ph.D., president, UNM, provided a presentation about UNM's role in expanding the health care workforce in New Mexico. They discussed the growth of inpatient and outpatient care in the UNM health system and noted that the UNM School of Medicine needs new facilities. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=4>.

LFC Report: Behavioral Health Gaps (2:32 p.m.)

Eric Chenier, principal analyst, LFC, discussed the state's trends in spending on behavioral health care and substance use treatment. He presented data on grants for behavioral health care in various New Mexico counties and discussed local behavioral health collaboratives. Mr. Chenier provided information about federal grant funding and highlighted the growth of Medicaid spending on behavioral health services. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=5>.

LFC Report: Prescription Drug Pricing Data (3:18 p.m.)

RubyAnn Esquibel, principal analyst, LFC, explained fiscal impacts of rising pharmaceutical costs and presented Medicaid pharmaceutical cost data. Pharmacy costs for Medicaid in New Mexico have increased. Ms. Esquibel noted that medical prescription costs are increasing more quickly than point-of-sale prescription costs. She reviewed laws that other states have passed to try to lower prescription drug costs. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=6>.

Public Comment (4:21 p.m.)

A list of individuals who made public comment is available in the meeting file.

Recess

The meeting recessed at 4:30 p.m.

Wednesday, November 20**Reconvene**

The meeting reconvened at 9:17 a.m.

Opioid Settlement and Affordable Housing (9:19 a.m.)

Barbara Bencomo, chief administrative officer, City of Las Cruces; Shauna Hartley, L.C.S.W., consultant, The Opioid Remediation Collaborative; Stanford Kemp, deputy director, Behavioral Health and Wellness Division, City of Albuquerque; and Wayne Lindstrom, deputy county manager, Behavioral Health, Bernalillo County, provided an update on opioid settlement funds in Bernalillo County, the City of Albuquerque, the City of Las Cruces and Dona Ana County. They provided information about the Opioid Remediation Collaborative of New Mexico, which is composed of Cibola, Valencia, Guadalupe, Catron, Socorro, Sierra and Hidalgo counties. Maria Griego, director, Economic Equity, New Mexico Center on Law and Poverty, provided a presentation about preserving affordable housing and ensuring stability for residents of manufactured home communities. She described the Mobile Home Park Act and highlighted the challenges faced by people who live in mobile homes. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=7>.

Update: New Mexico Medical Board (NMMB) (12:28 p.m.)

Karen Carson, M.D., chair, NMMB, and Monique Parks, interim executive director, NMMB, described the NMMB's mission and presented licensing statistics. They reviewed application processing times and procedures, explained the board's complaint investigation process and described telehealth and telemedicine in the state. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=8>.

The Path Forward: Data-Informed Recommendations for Improving Behavioral Health Outcomes in New Mexico (1:24 p.m.)

Jorie Koster-Hale, CEO, Falling Colors; Kyle Kleisinger, public health data analyst, Falling Colors; and Sam Wolf, chief operating officer and general counsel, Falling Colors, shared information about Falling Colors' data collection and financial processing systems. They compared the models and roles of managed care and administrative services organizations. The

panel recommended that the legislature pilot a comprehensive, interagency behavioral health report and dashboard for effective data analysis. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=9>.

New Mexico Medical Society (NMMS) Legislative Priorities (2:43 p.m.)

Angelina Villas-Adams, M.D., president, NMMS, and Carrie Robin Brunder, lobbyist, NMMS, described challenges faced by physicians who practice medicine in New Mexico. According to the Workforce Solutions Department, in April 2024, there were 2,200 posted job openings in New Mexico for physicians. Dr. Villas-Adams and Ms. Brunder noted that, while major costs of independent practice are not recognized in payment structures, health care provided by independent practitioners is more cost-efficient than hospital care. They recommended the creation of a permanent trust fund for Medicaid. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=10>.

Study Summary: Financial Support for Rural Hospitals: Actionable Recommendations (3:57 p.m.)

Sam Howarth, Ph.D., consultant, presented his findings and recommendations from a research report he conducted for the LHHS regarding how the legislative and executive branches can ensure the fiscal stability of rural hospitals in New Mexico. His recommendations were to provide stopgap funding to the state's neediest rural hospitals, develop a health care planning collaborative within the HCA, develop a health collaborative work team within the HCA and ensure that the HCA receives enough funding to carry out the recommendations. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=11>.

Public Comment

There was no public comment.

Recess

The meeting recessed at 4:20 p.m.

Thursday, November 21

Reconvene

The meeting reconvened at 9:17 a.m.

Licensing Portability (9:18 a.m.)

Kelsie George, M.P.P., senior policy specialist, Health Program, National Conference of State Legislatures (NCSL), and Razan Badr, policy analyst, Health Program, NCSL, provided a

presentation about health care professional licensure portability. They explained models of interstate licensure compacts, discussed licensure reciprocity and endorsement and reviewed implications of universal licensure. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=12>.

Dental Health (10:13 a.m.)

Tom Schripsema, D.D.S., executive director, New Mexico Dental Association; Christine Nathe, R.D.H., M.S., professor and director, Division of Dental Hygiene, and vice chair, Department of Dental Medicine, UNM; and Henry Chu, D.D.S., P.A., associate professor and director, Special Care Clinic, Department of Dental Medicine, UNM, provided an update on UNM's dental residency and dental hygiene program. They provided information about Touro College of Dental Medicine's Albuquerque clinic that will open in May 2025. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=13>.

National Student Speech Language Hearing Association (NSSLHA) (12:05 p.m.)

Adrienne McElroy-Bratcher, SLP.D., co-advisor, NSSLHA, and professor, Communicative Disorders, Department of Health and Human Services, Eastern New Mexico University, provided an overview of the NSSLHA, which is a student organization for pre-professional students who want to study communication sciences and disorders. Dr. McElroy-Bratcher outlined the licensure, scope of practice, education and supervision responsibilities of speech-language pathology assistants in New Mexico. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=14>.

Public Comment (12:31 p.m.)

A list of individuals who made public comment is available in the meeting file.

Health Care Cost Drivers (1:02 p.m.)

Michael Gusmano, Ph.D., professor, College of Health, and associate dean for academic programs, Lehigh University, provided an overview of hospital costs throughout the country. Donna Kinzer, consultant, Kinzer Consulting, and former executive director, Maryland Health Services Cost Review Commission, provided information about Maryland's global hospital payments model. Dorothy Moller, health policy consultant, DMoller Associates, provided a presentation on rural health care networking and resource sharing. Miriam Laugesen, Ph.D., associate professor, Department of Health Policy and Management, Mailman School of Public Health, Columbia University, provided examples of how hospital payment and accountability systems can be simplified. Gabriel R. Sanchez, Ph.D., professor, Political Science Department, and executive director, Center for Social Policy, UNM, explained how surveys and focus groups can be used to support hospital cost reform. Suzan Reagan, senior program manager, Bureau of

Business and Economic Research, UNM, and Kramer Winingham, Ph.D., program director, Arrowhead Center, New Mexico State University, emphasized the need for the creation of a state health expenditure database because not all expenditures are included in the state's all-payer claims database. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=15>.

Prison Rape Elimination Act (PREA) Task Force Recommendations (3:21 p.m.)

Representative Chasey; Senator Pope; Roman Varela, M.B.A., administrator, PREA, Bernalillo County Metropolitan Detention Center; and Alexandria Taylor, M.P.A., L.M.S.W., executive director, New Mexico Coalition of Sexual Assault Programs, described the upcoming report of findings and recommendations by the PREA Task Force that was created pursuant to House Memorial 40 (2023) and House Memorial 45 (2024) regarding New Mexico's compliance with the federal PREA of 2003.

Recess

The meeting recessed at 3:57 p.m.

Friday, November 22

Reconvene

The meeting reconvened at 9:08 a.m.

Update: Office of Superintendent of Insurance (OSI) (9:10 a.m.)

Senator Duhigg; Representative Szczepanski; Alice T. Kane, superintendent of insurance, OSI; and Jane Wishner, health policy consultant, discussed the background and objectives of the Health Care Consolidation Oversight Act. They proposed legislation for the 2025 legislative session to address policy issues regarding enforcement and penalties. Viara Ianakieva, director, Life and Health Division, OSI, and Alejandro Amparan, director, Pharmacy Benefits Management and Drug Compliance, OSI, discussed the implementation of the Prescription Drug Price Transparency Act, pharmacy benefits management reporting requirements and insurance coverage for mental health care. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=17>.

Report: Senate Memorial 5 Task Force (SM5 Task Force) (11:51 a.m.)

Senator López, chair, SM5 Task Force, and Rachel Mercer Garcia, principal analyst, LFC, provided an update on potential recommendations of the SM5 Task Force, which was created pursuant to Senate Memorial 5 (2024) to restructure the Children, Youth and Families Department. The task force will present its findings and recommendations to the legislature and the governor during the 2025 legislative session. Topics addressed will include compliance,

oversight, access to services, prevention and early intervention programs, juvenile justice and the department's workforce. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=19>.

Public Comment (12:27 p.m.)

A list of individuals who made public comment is available in the meeting file.

Approval of Minutes (12:55 p.m.)

Upon a motion made and without any objections, the committee approved the minutes of the October 21-24, 2024 meeting.

Youth Risk and Resiliency Survey Update (1:07 p.m.)

José A. Acosta M.D., M.B.A., M.P.H., director, Public Health Division, Department of Health (DOH); Dylan Pell, M.P.H., mental health epidemiologist, DOH; and Josh Swatek, policy manager, Policy and Communications Division, DOH, provided a presentation on New Mexico's results of the 2023 edition of the Youth Risk and Resiliency Survey, which is administered biennially to public school students in middle school and high school by the federal Centers for Disease Control and Prevention's Youth Risk Behavior Surveillance System. Survey findings included decreases in suicide attempts and feelings of sadness and hopelessness compared to 2021 survey results and decreases in vaping, cannabis use and prescription opioid misuse compared to 2019 survey results. The presentation materials can be found here:

<https://www.nmlegis.gov/Committee/Handouts?CommitteeCode=LHHS&Date=11/19/2024&ItemNumber=20>.

Consideration of Legislation for Endorsement (1:53 p.m.)

Committee members discussed legislation for endorsement. The endorsed legislation can be found here:

https://www.nmlegis.gov/Committee/endorsed_legislation?CommitteeCode=LHHS&Year=2025.

Adjournment

There being no further business before the committee, the meeting adjourned at 3:19 p.m.

ENDORSED LEGISLATION

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SENATE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO PUBLIC FUNDS; CREATING THE BEHAVIORAL HEALTH TRUST FUND AND THE BEHAVIORAL HEALTH PROGRAM FUND; MAKING A TRANSFER FROM THE GENERAL FUND TO THE BEHAVIORAL HEALTH TRUST FUND.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. [NEW MATERIAL] BEHAVIORAL HEALTH TRUST FUND.--

A. The "behavioral health trust fund" is created as a nonreverting fund in the state treasury. The fund consists of distributions, appropriations, gifts, grants and donations. Income from investment of the fund shall be credited to the fund. Money in the fund shall be expended only as provided in this section.

B. The state investment officer shall invest money in the fund in accordance with the prudent investor rule as set forth in Chapter 6, Article 8 NMSA 1978 and in consultation

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1 with the health care authority.

2 C. The state investment officer shall report
3 quarterly to the legislative finance committee and the state
4 investment council on the investments made pursuant to this
5 section. An annual report shall be submitted no later than
6 October 1 of each year to the legislative finance committee,
7 the revenue stabilization and tax policy committee and any
8 other appropriate interim committees.

9 D. On July 1, 2026 and each July 1 thereafter, a
10 distribution shall be made from the behavioral health trust
11 fund to the behavioral health program fund in an amount equal
12 to five percent of the average of the year-end market values of
13 the trust fund for the immediately preceding three calendar
14 years. If, on July 1 of a year, the trust fund has been in
15 effect for less than three calendar years, the distribution
16 shall be in an amount equal to five percent of the average of
17 the year-end market values of the trust fund for the
18 immediately preceding number of calendar years that the trust
19 fund has been in effect. For fiscal year 2026, any unexpended
20 or unencumbered balance remaining after the distribution is
21 made in that fiscal year shall be included in the calculation
22 of state reserves.

23 SECTION 2. [NEW MATERIAL] BEHAVIORAL HEALTH PROGRAM
24 FUND.--

25 A. The "behavioral health program fund" is created

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1 in the state treasury. The fund consists of distributions,
2 appropriations, gifts, grants, donations and income from
3 investment of the fund. The health care authority shall
4 administer the fund. Money in the fund is subject to
5 appropriation by the legislature to provide money for services
6 and programs related to behavioral health, including:

7 (1) mental health and substance abuse
8 treatment, intervention and prevention;

9 (2) necessary infrastructure, technology and
10 workforce supports that facilitate the delivery of behavioral
11 health services and programs;

12 (3) matching funds for federal, local and
13 private money and grants related to behavioral health services
14 and programs;

15 (4) offsetting costs incurred to comply with
16 federal requirements related to behavioral health services and
17 programs; and

18 (5) implementation of regional behavioral
19 health plans throughout the state.

20 B. Expenditures from the fund shall be by warrant
21 of the secretary of finance and administration pursuant to
22 vouchers signed by the secretary of health care authority or
23 the secretary's authorized representative. Any unexpended or
24 unencumbered balance remaining at the end of a fiscal year
25 shall revert to the behavioral health trust fund."

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SECTION 3. TRANSFER.--One billion dollars
(\$1,000,000,000) is transferred from the general fund to the
behavioral health trust fund.

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO PUBLIC ASSISTANCE; REQUIRING THE HEALTH CARE
AUTHORITY TO DEVELOP ANNUAL FEDERAL SUPPLEMENTAL NUTRITION
ASSISTANCE PROGRAM STATE OUTREACH PLANS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. A new section of the Public Assistance Act is
enacted to read:

"[NEW MATERIAL] FEDERAL SUPPLEMENTAL NUTRITION ASSISTANCE
PROGRAM OUTREACH PLANS.--

A. The authority shall develop annual federal
supplemental nutrition assistance program state outreach plans
to promote access to the benefits of the federal supplemental
nutrition assistance program. Each year, the authority shall
submit the annual state outreach plan to the food and nutrition
service of the United States department of agriculture on or

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1 before the deadline specified by the food and nutrition
2 service. Upon approval of an annual state outreach plan, the
3 authority shall maximize federal funding for the plan by
4 submitting a request to the food and nutrition service for all
5 available matching funding that the federal government offers
6 for state outreach plans. The authority may seek matching
7 federal funds, gifts, grants and donations to develop and
8 implement an annual state outreach plan.

9 B. The authority may partner with one or more
10 counties, municipalities, tribal governments or nonprofit
11 organizations for purposes of developing and implementing an
12 annual state outreach plan. The authority may contractually
13 require an entity with which the authority partners for
14 services related to developing or implementing an annual state
15 outreach plan to seek gifts, grants or donations to fund the
16 development or implementation of the annual state outreach
17 program.

18 C. The authority shall be exempt from implementing
19 an annual state outreach plan if the authority does not receive
20 enough state, local, private or federal funds to cover the
21 implementation and administration costs of the annual state
22 outreach plan."

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

DISCUSSION DRAFT

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO ACCESSIBILITY; ENACTING THE TRAVELING WITH DIGNITY
ACT; REQUIRING ALL FACILITIES THAT RECEIVE STATE FUNDING TO
INSTALL UNIVERSAL ADULT CHANGING STATIONS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. ~~[NEW MATERIAL]~~ SHORT TITLE.--This act may be
cited as the "Traveling with Dignity Act".

SECTION 2. ~~[NEW MATERIAL]~~ UNIVERSAL ADULT CHANGING
STATIONS REQUIRED IN STATE-FUNDED FACILITIES.--

A. As used in this section:

(1) "commercial place of public amusement"
means an auditorium, a convention center, a cultural complex,
an exhibition hall, a permanent amusement park, a sports arena,
a theater or a movie house for which the maximum occupancy is
determined to be two thousand five hundred or more people;

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1 (2) "covered facility" means a public building
2 or commercial place of public amusement that:

3 (a) houses an entity or program that
4 receives state funding to cover any portion of the entity or
5 program's operating costs; and

6 (b) receives at least two thousand five
7 hundred visitors per year, as measured by the tourism
8 department;

9 (3) "public building" means a building owned
10 by the state that is open to the public, including a state park
11 that has permanent sanitary facilities;

12 (4) "sanitary facility" means a restroom
13 equipped with a flush toilet and proper drainage for all
14 toilets, sinks, basins, bathtubs and showers; and

15 (5) "universal adult changing station" means a
16 powered, height-adjustable and adult-sized changing table that
17 is installed in a single-occupancy restroom that is universal
18 to gender and available to the public.

19 B. By July 1, 2032, each covered facility shall
20 install and maintain at least one universal adult changing
21 station that is universally accessible to all genders when the
22 facility is open to the public.

23 C. After July 1, 2025:

24 (1) each covered facility that undergoes a
25 renovation that is estimated to cost more than ten thousand

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1 dollars (\$10,000) shall install and maintain at least one
2 universal adult changing station that is universally accessible
3 to all genders when the facility is open to the public; and

4 (2) any newly constructed facility that
5 receives state funding for construction or operating costs
6 shall be built with at least one universal adult changing
7 station that is universally accessible to all genders when the
8 facility is open to the public.

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SENATE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO PHARMACEUTICAL BENEFITS; AMENDING THE PHARMACY BENEFITS MANAGER REGULATION ACT TO RESTRICT THE TYPES OF FEES THAT PHARMACY BENEFITS MANAGERS CAN COLLECT; DECLARING CERTAIN ACTIONS MADE BY PHARMACY BENEFITS MANAGERS AS UNFAIR OR DECEPTIVE TRADE PRACTICES.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. Section 59A-61-2 NMSA 1978 (being Laws 2014, Chapter 14, Section 2, as amended) is amended to read:

"59A-61-2. DEFINITIONS.--As used in the Pharmacy Benefits Manager Regulation Act:

A. "bona fide service fee" means a fee charged by a pharmacy benefits manager that is:

(1) a flat dollar amount;

(2) consistent with fair market value; and

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1 (3) solely related to the provision of
2 pharmacy benefits management services;

3 B. "conflict of interest" means a situation in
4 which a pharmacy benefits manager or pharmacy benefits manager
5 affiliate derives any kind of remuneration, other than the
6 collection of a bona fide service fee, from providing pharmacy
7 benefits management services;

8 ~~[A.]~~ C. "maximum allowable cost" means the maximum
9 amount that a pharmacy benefits manager will reimburse a
10 pharmacy for the cost of a generic drug;

11 ~~[B.]~~ D. "maximum allowable cost list" means a
12 searchable, electronic and internet-based listing of drugs used
13 by a pharmacy benefits manager setting the maximum allowable
14 cost on which reimbursement to a pharmacy or pharmacist is
15 made;

16 ~~[C.]~~ E. "obsolete" means a product that is listed
17 in national drug pricing compendia but is no longer available
18 to be dispensed based on the expiration date of the last lot
19 manufactured;

20 ~~[D.]~~ F. "pharmacist" means an individual licensed
21 as a pharmacist by the board of pharmacy;

22 ~~[E.]~~ G. "pharmacy" means a licensed place of
23 business where drugs are compounded or dispensed and pharmacist
24 services are provided;

25 ~~[F.]~~ H. "pharmacy benefits management" means a

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1 service provided to or conducted by a health plan as defined in
2 Section 59A-16-21.1 NMSA 1978, [~~or~~] health insurer or other
3 third party that involves:

- 4 (1) prescription drug claim administration;
- 5 (2) pharmacy network management;
- 6 (3) negotiation and administration of
7 prescription drug discounts, rebates and other benefits;
- 8 (4) design, administration or management of
9 prescription drug benefits;
- 10 (5) formulary management;
- 11 (6) payment of claims to pharmacies for
12 dispensing prescription drugs;
- 13 (7) negotiation or administration of contracts
14 relating to pharmacy operations or prescription benefits; or
- 15 (8) any other service determined by the
16 superintendent as specified by rule to be a pharmacy benefits
17 management activity;

18 [~~G.~~] I. "pharmacy benefits manager" means an entity
19 that provides pharmacy benefits management services;

20 [~~H.~~] J. "pharmacy benefits manager affiliate" means
21 a pharmacy or pharmacist that directly or indirectly, through
22 one or more intermediaries, owns or controls, is owned or
23 controlled by or is under common ownership or control with a
24 pharmacy benefits manager;

25 [~~I.~~] K. "pharmacy services administrative

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1 organization" means an entity that contracts with a pharmacy or
2 pharmacist to act as the pharmacy or pharmacist's agent with
3 respect to matters involving a pharmacy benefits manager or
4 third-party payor, including negotiating, executing or
5 administering contracts with the pharmacy benefits manager or
6 third-party payor; and

7 ~~[J-]~~ L. "superintendent" means the superintendent
8 of insurance."

9 SECTION 2. Section 59A-61-3 NMSA 1978 (being Laws 2014,
10 Chapter 14, Section 3, as amended) is amended to read:

11 "59A-61-3. LICENSURE--INITIAL APPLICATION--ANNUAL RENEWAL
12 REQUIRED--REVOCATION.--

13 A. A person shall not operate as a pharmacy
14 benefits manager or provide pharmacy benefits management
15 services unless licensed by the superintendent in accordance
16 with the Pharmacy Benefits Manager Regulation Act and
17 applicable federal and state laws. A licensee shall renew the
18 licensee's pharmacy benefits manager license annually.

19 B. An initial application and a renewal application
20 for licensure as a pharmacy benefits manager shall be made on a
21 form and in a manner provided for by the superintendent, but at
22 a minimum shall require:

23 (1) the identity of the pharmacy benefits
24 manager;

25 (2) the name and business address of the

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1 contact person for the pharmacy benefits manager;

2 (3) where applicable, the federal employer
3 identification number for the pharmacy benefits manager; and

4 (4) any other information specified in rules
5 promulgated by the superintendent.

6 C. The superintendent shall enforce and promulgate
7 rules to implement the provisions of the Pharmacy Benefits
8 Manager Regulation Act and may suspend or revoke a license
9 issued to a pharmacy benefits manager or deny an application
10 for a license or renewal of a license if:

11 (1) the pharmacy benefits manager is operating
12 in contravention of its application;

13 (2) the pharmacy benefits manager has failed
14 to continuously meet or comply with the requirements for
15 issuance or maintenance of a license; ~~[or]~~

16 (3) the pharmacy benefits manager has a
17 conflict of interest; or

18 [~~(3)~~] (4) the pharmacy benefits manager has
19 failed to comply with applicable state or federal laws or
20 rules.

21 D. If the license of a pharmacy benefits manager is
22 revoked, the pharmacy benefits manager shall proceed,
23 immediately following the effective date of the order of
24 revocation, to conclude its affairs, notify each pharmacy in
25 its network and conduct no further pharmacy benefits management

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1 services in the state, except as may be essential to the
2 orderly conclusion of its affairs. The superintendent may
3 permit further operation of the pharmacy benefits manager if
4 the superintendent finds it to be in the best interest of
5 patients. A pharmacy benefits manager's failure to comply with
6 the superintendent's order to conclude the pharmacy benefits
7 manager's affairs shall constitute an unfair or deceptive trade
8 practice pursuant to the Unfair Practices Act.

9 E. A person whose pharmacy benefits manager license
10 has been denied, suspended or revoked may seek review of the
11 denial, suspension or revocation pursuant to the provisions of
12 Chapter 59A, Article 4 NMSA 1978.

13 F. Nothing in the Pharmacy Benefits Manager
14 Regulation Act shall be construed to authorize a pharmacy
15 benefits manager to transact the business of insurance."

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

AN ACT

RELATING TO VITAL STATISTICS; ALLOWING PHYSICIAN ASSISTANTS TO
CERTIFY THE DEATH OF A PATIENT.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. Section 24-14-20 NMSA 1978 (being Laws 1961,
Chapter 44, Section 18, as amended) is amended to read:

"24-14-20. DEATH REGISTRATION.--

A. A death certificate for each death that occurs
in this state shall be filed within five days after the death
and prior to final disposition. The death certificate shall be
registered by the state registrar if it has been completed and
filed in accordance with this section, subject to the exception
provided in Section 24-14-24 NMSA 1978; provided that:

(1) if the place of death is unknown but the
dead body is found in this state, a death certificate shall be

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1 filed with a local registrar within ten days after the
2 occurrence. The place where the body is found shall be shown
3 as the place of death. If the date of death is unknown, it
4 shall be approximated by the state medical investigator; and

5 (2) if death occurs in a moving conveyance in
6 the United States and the body is first removed from the
7 conveyance in this state, the death shall be registered in this
8 state and the place where the body is first removed shall be
9 considered the place of death. When a death occurs on a moving
10 conveyance while in international waters or air space or in a
11 foreign country or its air space and the body is first removed
12 from the conveyance in this state, the death shall be
13 registered in this state, but the certificate shall show the
14 actual place of death insofar as can be determined by the state
15 medical investigator.

16 B. The funeral service practitioner or person
17 acting as a funeral service practitioner who first assumes
18 custody of a dead body shall:

19 (1) file the death certificate;
20 (2) obtain the personal data from the next of
21 kin or the best qualified person or source available; and
22 (3) obtain the medical certification of cause
23 of death.

24 C. The medical certification shall be completed and
25 signed within forty-eight hours after death by the physician,

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1 ~~[or]~~ nurse practitioner or physician assistant in charge of the
2 patient's care for the illness or condition that resulted in
3 death, except when inquiry is required by law. Except as
4 provided in Subsection D of this section, in the absence of the
5 physician, ~~[or]~~ nurse practitioner or physician assistant, or
6 with the physician's, ~~[or]~~ the nurse practitioner's or the
7 physician assistant's approval, the medical certification may
8 be completed and signed by the physician's associate physician,
9 ~~[or]~~ the nurse practitioner's associate nurse practitioner, the
10 physician assistant's associate physician assistant, the chief
11 medical officer of the institution in which death occurred or
12 the physician who performed an autopsy on the decedent;
13 provided that the individual has access to the medical history
14 of the case and views the deceased at or after death and that
15 death is due to natural causes.

16 D. Unless there is reasonable cause to believe that
17 the death is not due to natural causes, a registered nurse
18 employed by a nursing home or a hospice agency may pronounce
19 the death of a resident of the nursing home and a registered
20 nurse employed by a hospital may pronounce the death of a
21 patient of the hospital. The nurse shall have access to the
22 medical history of the case and view the deceased at or after
23 death, and the individual who completes the medical
24 certification shall not be required to view the deceased at or
25 after death. The death shall be pronounced pursuant to

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1 procedures or facility protocols prescribed by the hospital for
2 patients or by the physician who is the medical director of the
3 nursing home for residents. The procedures or facility
4 protocols shall ensure that the medical certification of death
5 is completed in accordance with the provisions of Subsection C
6 of this section.

7 E. For purposes of this section:

8 (1) "hospital" means a public hospital, profit
9 or nonprofit private hospital or a general or special hospital
10 that is licensed as a hospital by the [~~department of~~] health
11 care authority;

12 (2) "nurse practitioner" means a registered
13 nurse who is licensed by the board of nursing for advanced
14 practice as a certified nurse practitioner and whose name and
15 pertinent information are entered on the list of certified
16 nurse practitioners maintained by the board of nursing; and

17 (3) "nursing home" means any nursing
18 institution or facility required to be licensed under state law
19 as a nursing facility by the [~~public health division of the~~
20 ~~department of~~] health care authority, whether proprietary or
21 nonprofit, including skilled nursing home facilities.

22 F. When death occurs without medical attendance as
23 set forth in Subsection C or D of this section or when death
24 occurs more than ten days after the decedent was last treated
25 by a physician, the case shall be referred to the state medical

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1 investigator for investigation to determine and certify the
2 cause of death.

3 G. An amended death certificate based on an
4 anatomical observation shall be filed within thirty days of the
5 completion of an autopsy."

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO LICENSURE; AMENDING THE PHYSICIAN ASSISTANT ACT TO ELIMINATE CERTAIN REQUIREMENTS REGARDING THE SUPERVISION OF PHYSICIAN ASSISTANTS BY PHYSICIANS; REPEALING SECTION 61-6C-8 NMSA 1978 (BEING LAWS 1973, CHAPTER 361, SECTION 6, AS AMENDED).

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. Section 61-6-19 NMSA 1978 (being Laws 1989, Chapter 269, Section 15, as amended) is amended to read:

"61-6-19. FEES.--

A. Except as provided in Section 61-1-34 NMSA 1978, the board shall impose the following fees:

(1) an application fee not to exceed five hundred dollars (\$500) for licensure by endorsement as provided in Section 61-6-13 NMSA 1978;

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1 (2) an application fee not to exceed five
2 hundred dollars (\$500) for licensure by examination as provided
3 in Section 61-6-11 NMSA 1978;

4 (3) a triennial renewal fee not to exceed five
5 hundred dollars (\$500);

6 (4) a fee of twenty-five dollars (\$25.00) for
7 placing a physician's license or a physician assistant's
8 license on inactive status;

9 (5) a late fee not to exceed one hundred
10 dollars (\$100) for physicians who renew their license within
11 forty-five days after the required renewal date;

12 (6) a late fee not to exceed two hundred
13 dollars (\$200) for physicians who renew their licenses between
14 forty-six and ninety days after the required renewal date;

15 (7) a reinstatement fee not to exceed seven
16 hundred dollars (\$700) for reinstatement of a revoked,
17 suspended or inactive license;

18 (8) a reasonable administrative fee for
19 verification and duplication of license or registration and
20 copying of records;

21 (9) a reasonable publication fee for the
22 purchase of a publication containing the names of all
23 practitioners licensed under the Medical Practice Act;

24 (10) an impaired physician fee not to exceed
25 one hundred fifty dollars (\$150) for a three-year period;

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1 (11) an interim license fee not to exceed one
2 hundred dollars (\$100);

3 (12) a temporary license fee not to exceed one
4 hundred dollars (\$100);

5 (13) a postgraduate training license fee not
6 to exceed fifty dollars (\$50.00) annually;

7 (14) an application fee not to exceed one
8 hundred fifty dollars (\$150) for physician assistants applying
9 for initial licensure;

10 (15) a licensure fee not to exceed one hundred
11 fifty dollars (\$150) for physician assistants biennial license
12 renewal [~~and registration of supervising or collaborating~~
13 ~~licensed physician~~];

14 (16) a late fee not to exceed fifty dollars
15 (\$50.00) for physician assistants who renew their licensure
16 within forty-five days after the required renewal date;

17 (17) a late fee not to exceed seventy-five
18 dollars (\$75.00) for physician assistants who renew their
19 licensure between forty-six and ninety days after the required
20 renewal date;

21 (18) a reinstatement fee not to exceed one
22 hundred dollars (\$100) for physician assistants who reinstate
23 an expired license;

24 (19) a fee not to exceed three hundred dollars
25 (\$300) annually for a physician supervising a clinical

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1 pharmacist;

2 (20) an application and renewal fee for a
3 telemedicine license not to exceed nine hundred dollars (\$900);

4 (21) a reasonable administrative fee, not to
5 exceed the current cost of application and license or renewal
6 for a license, that may be charged for reprocessing
7 applications and renewals that include minor but significant
8 errors and that would otherwise be subject to investigation and
9 possible disciplinary action; and

10 (22) a reasonable fee as established by the
11 department of public safety for nationwide and statewide
12 criminal history screening of applicants and licensees.

13 B. All fees are nonrefundable and shall be used by
14 the board to carry out its duties efficiently."

15 SECTION 2. Section 61-6C-3 NMSA 1978 (being Laws 2022,
16 Chapter 39, Section 31) is amended to read:

17 "61-6C-3. LICENSURE AS A PHYSICIAN ASSISTANT--SCOPE OF
18 PRACTICE--BIENNIAL REGISTRATION OF SUPERVISION--LICENSE
19 RENEWAL--FEES.--

20 A. The board may license as a physician assistant a
21 qualified person who has graduated from a physician assistant
22 program accredited by the national accrediting body as
23 established by rule of the board in accordance with the State
24 Rules Act and has passed a physician assistant national
25 certifying examination as established by rule. The board may

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1 also license as a physician assistant a person who passed the
2 physician assistant national certifying examination
3 administered by the national commission on certification of
4 physician assistants prior to 1986.

5 B. A person shall not perform, attempt to perform
6 or hold the person's own self out as a physician assistant
7 without first applying for and obtaining a license from the
8 board.

9 C. Physician assistants may prescribe, administer,
10 dispense and distribute dangerous drugs other than controlled
11 substances in Schedule I of the Controlled Substances Act
12 pursuant to rules adopted by the board after consultation with
13 the board of pharmacy [~~if the prescribing, administering,~~
14 ~~dispensing and distributing are done with the supervision of a~~
15 ~~licensed physician or in collaboration with a licensed~~
16 ~~physician~~]. The distribution process shall comply with state
17 laws concerning prescription packaging, labeling and
18 recordkeeping requirements.

19 D. A physician assistant shall perform only the
20 acts and duties that are within the physician assistant's scope
21 of practice.

22 E. An applicant for licensure as a physician
23 assistant shall complete application forms supplied by the
24 board and shall pay a licensing fee as provided in Section
25 61-6-19 NMSA 1978.

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1 F. A physician assistant shall biennially submit
2 proof of current certification by the national commission on
3 certification of physician assistants or another certifying
4 agency designated by the board [~~and shall renew the license and~~
5 ~~registration of supervision of the physician assistant with the~~
6 ~~board~~].

7 G. A physician assistant [~~shall not practice~~
8 ~~medicine until the physician assistant has established a~~
9 ~~supervising or collaborating relationship with a licensed~~
10 ~~physician in accordance with rules promulgated by the board~~]
11 may practice independently and make decisions regarding the
12 health care needs of a patient and carry out health regimens,
13 including the prescription and distribution of dangerous drugs
14 other than controlled substances in Schedule I of the
15 Controlled Substances Act.

16 H. Each biennial renewal of licensure shall be
17 accompanied by a fee as provided in Section 61-6-19 NMSA 1978."

18 SECTION 3. Section 61-6C-7 NMSA 1978 (being Laws 1973,
19 Chapter 361, Section 5, as amended) is amended to read:

20 "61-6C-7. PHYSICIAN ASSISTANTS--RULES.--The board may
21 promulgate rules in accordance with the State Rules Act and
22 enforce those rules in accordance with the Uniform Licensing
23 Act for:

24 A. education, skill and experience for licensure of
25 a person as a physician assistant and providing forms and

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1 procedures for biennial license renewal;

2 B. examining and evaluating an applicant for
3 licensure as a physician assistant as to skill, knowledge and
4 experience of the applicant in the field of medical care;

5 C. establishing when and for how long physician
6 assistants are permitted to prescribe, administer, dispense and
7 distribute dangerous drugs other than controlled substances in
8 Schedule I of the Controlled Substances Act pursuant to rules
9 adopted by the board after consultation with the board of
10 pharmacy; and

11 ~~[D. Allowing a supervising or collaborating~~
12 ~~licensed physician to temporarily delegate supervision or~~
13 ~~collaboration responsibilities for a physician assistant to~~
14 ~~another licensed physician;~~

15 ~~E. Establishing when a physician assistant may~~
16 ~~engage in the practice of medicine in collaboration with a~~
17 ~~licensed physician; and~~

18 ~~F.]~~ D. carrying out all other provisions of the
19 Physician Assistant Act."

20 SECTION 4. REPEAL.--Section 61-6C-8 NMSA 1978 (being Laws
21 1973, Chapter 361, Section 6, as amended) is repealed.

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO LICENSURE; AMENDING THE PHYSICIAN ASSISTANT ACT TO
ALLOW CERTAIN EXPERIENCED PHYSICIAN ASSISTANTS TO SUPERVISE
NEWLY LICENSED PHYSICIAN ASSISTANTS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. Section 61-6C-2 NMSA 1978 (being Laws 1989,
Chapter 9, Section 2, as amended) is amended to read:

"61-6C-2. DEFINITIONS.--As used in the Physician
Assistant Act:

- A. "administer" means to apply a prepackaged drug
directly to the body of a patient by any means;
- B. "board" means the New Mexico medical board;
- C. "dispense" means to deliver a drug directly to a
patient and includes the compounding, labeling and repackaging
of a drug from a bulk or original container;

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1 D. "distribute" means to administer or supply
2 directly to a patient under the direct care of the distributing
3 physician assistant one or more doses of drugs prepackaged by a
4 licensed pharmacist and excludes the compounding or repackaging
5 from a bulk or original container;

6 E. "licensed physician" means a [~~medical or~~
7 ~~osteopathic~~] physician with a current license to practice
8 medicine; [and]

9 F. "prescribe" means to issue an order individually
10 for the person for whom prescribed, either directly from the
11 prescriber to the pharmacist or indirectly by means of a
12 written order signed by the prescriber, bearing the name and
13 address of the prescriber, the prescriber's license
14 classification, the name and address of the patient, the name
15 of the drug prescribed, directions for use and the date of
16 issue; and

17 G. "supervising physician assistant" means a
18 physician assistant who has:

19 (1) a license to practice medicine;

20 (2) completed three or more years of clinical
21 practice as a physician assistant; and

22 (3) received approval to supervise a newly
23 licensed physician assistant pursuant to rules promulgated by
24 the board."

25 SECTION 2. Section 61-6C-6 NMSA 1978 (being Laws 2017,
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1 Chapter 103, Section 6) is amended to read:

2 "61-6C-6. PHYSICIAN ASSISTANT SUPERVISION AND
3 COLLABORATION [WITH LICENSED PHYSICIANS]--SCOPE OF PRACTICE--
4 MEDICAL MALPRACTICE INSURANCE.--

5 A. A physician assistant may perform the acts and
6 duties that are within the physician assistant's scope of
7 practice in collaboration with a licensed physician, if the
8 physician assistant has:

9 (1) completed three years of clinical practice
10 as a physician assistant with the supervision of a licensed
11 physician or supervising physician assistant; and

12 (2) complied with rules adopted by the board
13 establishing qualifications for when a physician assistant may
14 engage in the practice of medicine in collaboration with a
15 licensed physician.

16 B. A physician assistant practicing in
17 collaboration with a licensed physician shall, at a minimum,
18 maintain a policy of malpractice liability insurance that will
19 qualify the physician assistant under the provisions of the
20 Medical Malpractice Act."

21 **SECTION 3.** Section 61-6C-7 NMSA 1978 (being Laws 1973,
22 Chapter 361, Section 5, as amended) is amended to read:

23 "61-6C-7. PHYSICIAN ASSISTANTS--RULES.--The board may
24 promulgate rules in accordance with the State Rules Act and
25 enforce those rules in accordance with the Uniform Licensing

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1 Act for:

2 A. education, skill and experience for licensure of
3 a person as a physician assistant and providing forms and
4 procedures for biennial license renewal;

5 B. examining and evaluating an applicant for
6 licensure as a physician assistant as to skill, knowledge and
7 experience of the applicant in the field of medical care;

8 C. establishing when and for how long physician
9 assistants are permitted to prescribe, administer, dispense and
10 distribute dangerous drugs other than controlled substances in
11 Schedule I of the Controlled Substances Act pursuant to rules
12 adopted by the board after consultation with the board of
13 pharmacy;

14 D. allowing a supervising [~~or collaborating~~]
15 licensed physician or supervising physician assistant to
16 temporarily delegate supervision [~~or collaboration~~]
17 responsibilities for a physician assistant to another licensed
18 physician or supervising physician assistant;

19 E. allowing a collaborating licensed physician to
20 temporarily delegate collaboration responsibilities to another
21 licensed physician;

22 [~~E.~~] F. establishing when a physician assistant may
23 engage in the practice of medicine in collaboration with a
24 licensed physician; [~~and~~

25 ~~F.~~] G. establishing an approval process for

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1 supervising physician assistants to supervise newly licensed
2 physician assistants; and

3 H. carrying out all other provisions of the
4 Physician Assistant Act."

5 SECTION 4. Section 61-6C-8 NMSA 1978 (being Laws 1973,
6 Chapter 361, Section 6, as amended) is amended to read:

7 "61-6C-8. SUPERVISING OR COLLABORATING LICENSED
8 PHYSICIAN--RESPONSIBILITY--SUPERVISING PHYSICIAN ASSISTANT
9 RESPONSIBILITY.--

10 A. As a condition of licensure, all physician
11 assistants practicing in New Mexico shall be supervised by a
12 licensed physician or supervising physician assistant. The
13 physician assistant shall inform the board of the name of the
14 licensed physician or supervising physician assistant under
15 whose supervision the physician assistant will practice. All
16 supervising physicians and supervising physician assistants
17 shall be licensed pursuant to the Medical Practice Act and
18 approved by the board.

19 B. Every licensed physician or supervising
20 physician assistant supervising a physician assistant shall be
21 individually responsible and liable for the performance of the
22 acts and omissions delegated to the physician assistant the
23 physician or supervising physician assistant supervises.
24 Nothing in this section shall be construed to relieve the
25 physician assistant of responsibility and liability for the

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1 acts and omissions of the physician assistant.

2 C. Rules promulgated in accordance with the State
3 Rules Act pursuant to the Physician Assistant Act shall:

4 (1) require that a physician assistant whose
5 practice is a specialty care, as defined by the board, shall be
6 supervised by a licensed physician or supervising physician
7 assistant in accordance with requirements established by the
8 board; and

9 (2) allow a physician assistant whose practice
10 is primary care, as defined by the board, to collaborate with a
11 licensed physician in accordance with requirements established
12 by the board for different practice settings.

13 [~~G.~~] D. A physician assistant shall be supervised
14 by [~~or collaborate with~~] a licensed physician or supervising
15 physician assistant in accordance with rules adopted by the
16 board.

17 E. A physician assistant shall collaborate with a
18 licensed physician in accordance with rules adopted by the
19 board."

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HOUSE BILL
57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025
INTRODUCED BY

FOR THE INDIAN AFFAIRS COMMITTEE AND
THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT
MAKING AN APPROPRIATION TO THE DEPARTMENT OF HEALTH FOR COUNTY
AND TRIBAL HEALTH COUNCILS STATEWIDE.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. APPROPRIATION.--

A. The following amounts are appropriated from the
general fund to the department of health for expenditure in
fiscal year 2026 for the following purposes:

(1) forty-three million dollars (\$43,000,000)
to fund and support county and tribal health councils statewide
to carry out the functions as provided for in the County and
Tribal Health Councils Act. Funding may be used to:

- (a) provide salaries and benefits for
staff positions;
- (b) expand county and tribal health

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1 council capacity to provide services;

2 (c) expand county and tribal health
3 council operations and functions;

4 (d) assist in the coordination and
5 navigation of essential services through key collaborations
6 with state agencies, health care management organizations and
7 organizations that serve medicaid and medicare recipients;

8 (e) increase community outreach and
9 engagement programs to improve community awareness and
10 understanding of county and tribal health council services;

11 (f) increase public health intervention,
12 prevention and education efforts;

13 (g) facilitate collaboration and
14 networking with health care stakeholders across the state;

15 (h) support policy and advocacy efforts
16 aimed at advancing health equity;

17 (i) pay for the costs of running county
18 and tribal health councils, including: 1) overhead expenses
19 for offices and health hub locations; 2) travel reimbursements;
20 and 3) supplies; and

21 (j) cover other indirect expenses
22 incurred by county and tribal health councils; and

23 (2) one million dollars (\$1,000,000) for the
24 department of health to contract with a nonprofit organization
25 to provide training, technical assistance and other supports to

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1 county and tribal health councils.

2 B. Any unexpended or unencumbered balance remaining
3 at the end of fiscal year 2026 shall revert to the general
4 fund.

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

DISCUSSION DRAFT

FOR THE INDIAN AFFAIRS COMMITTEE AND

THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO TAXATION; INCREASING AND INDEXING LIQUOR EXCISE TAX RATES ON ALCOHOLIC BEVERAGES FOR CERTAIN MANUFACTURERS AND PRODUCERS; IMPOSING A LIQUOR EXCISE SURTAX ON RETAILERS; CHANGING CURRENT DISTRIBUTIONS OF THE LIQUOR EXCISE TAX FROM PERCENTAGES TO DOLLAR AMOUNTS AND INDEXING THE AMOUNTS FOR INFLATION; DISTRIBUTING THE REMAINDER OF THE REVENUE FROM THE LIQUOR EXCISE TAX AND ALL OF THE REVENUE FROM THE NEW LIQUOR EXCISE SURTAX TO A NEW ALCOHOL HARMS ALLEVIATION FUND; CREATING THE ALCOHOL HARMS ALLEVIATION FUND.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. Section 7-1-6.40 NMSA 1978 (being Laws 1997, Chapter 182, Section 1, as amended) is amended to read:

"7-1-6.40. DISTRIBUTION OF LIQUOR EXCISE TAX--LOCAL DWI GRANT FUND--CERTAIN MUNICIPALITIES--DRUG COURT FUND--ALCOHOL

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1 HARMS ALLEVIATION FUND--DISTRIBUTION OF THE LIQUOR EXCISE
2 SURTAX TO THE ALCOHOL HARMS ALLEVIATION FUND.--

3 A. A distribution pursuant to Section 7-1-6.1 NMSA
4 1978 [~~in an amount equal to forty-five percent~~] of the net
5 receipts attributable to the liquor excise tax shall be made as
6 follows:

7 (1) prior to July 1, 2031:

8 (a) to the local DWI grant fund, in an
9 amount equal to two million five hundred thousand dollars
10 (\$2,500,000) monthly;

11 [~~B. A distribution pursuant to Section~~
12 ~~7-1-6.1 NMSA 1978 of twenty thousand seven hundred fifty~~
13 ~~dollars (\$20,750) monthly from the net receipts attributable to~~
14 ~~the liquor excise tax shall be made] (b) to a municipality
15 that is located in a class A county and that has a population
16 according to the most recent federal decennial census of more
17 than thirty thousand but less than sixty thousand and shall be
18 used by the municipality only for the provision of alcohol
19 treatment and rehabilitation services for street inebriates, in
20 an amount equal to twenty-five thousand dollars (\$25,000)
21 monthly; and~~

22 [~~G. Beginning July 1, 2019, a~~
23 ~~distribution pursuant to Section 7-1-6.1 NMSA 1978 in an amount~~
24 ~~equal to five percent of the net receipts attributable to the~~
25 ~~liquor excise tax shall be made] (c) to the drug court fund,~~

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1 in an amount equal to three hundred thousand dollars (\$300,000)
2 monthly; and

3 (2) on and after July 1, 2031, in amounts
4 calculated pursuant to Subsection B of this section.

5 B. No later than April 30, 2028 and April 30 of
6 each third year thereafter, the department shall calculate the
7 amounts to be distributed pursuant to Paragraph (1) of
8 Subsection A of this section as of July 1 of that year. The
9 distribution amounts shall be equal to the product, rounded to
10 the nearest whole cent, of the distributions provided in
11 Paragraph (1) of Subsection A of this section, multiplied by a
12 fraction with a numerator equal to the consumer price index for
13 the previous calendar year and a denominator equal to the
14 consumer price index for the calendar year 2025; provided that
15 the amount of distribution shall not be less than the
16 distribution made on July 1 of the previous year.

17 C. After the distributions are made pursuant to
18 Subsection A of this section, a distribution pursuant to
19 Section 7-1-6.1 NMSA 1978 shall be made to the alcohol harms
20 alleviation fund in an amount equal to the remainder of the net
21 receipts attributable to the liquor excise tax.

22 D. A distribution pursuant to Section 7-1-6.1 NMSA
23 1978 shall be made to the alcohol harms alleviation fund in an
24 amount equal to the net receipts attributable to the liquor
25 excise surtax.

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1 E. As used in this section, "consumer price index"
2 means the consumer price index for all urban consumers
3 published by the United States department of labor."

4 SECTION 2. Section 7-17-2 NMSA 1978 (being Laws 1966,
5 Chapter 49, Section 2, as amended) is amended to read:

6 "7-17-2. DEFINITIONS.--As used in the Liquor Excise Tax
7 Act:

8 A. "alcoholic beverages" means distilled or
9 rectified spirits, potable alcohol, brandy, whiskey, rum, gin,
10 aromatic bitters or any similar beverage, including blended or
11 fermented beverages, dilutions or mixtures of one or more of
12 the foregoing containing more than one-half of one percent
13 alcohol by volume, but "alcoholic beverages" does not include
14 medicinal bitters;

15 B. "barrel" means the equivalent of thirty-one
16 gallons;

17 [~~B-~~] C. "beer" means an alcoholic beverage obtained
18 by the fermentation of any infusion or decoction of barley,
19 malt and hops or other cereals in water and includes porter,
20 beer, ale and stout;

21 [~~G-~~] D. "cider" means an alcoholic beverage made
22 from the normal alcoholic fermentation of the juice of sound,
23 ripe apples or pears that contains not less than one-half of
24 one percent of alcohol by volume and not more than eight and
25 one-half percent of alcohol by volume;

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1 E. "consumer price index" means the consumer price
2 index for all urban consumers published by the United States
3 department of labor;

4 F. "craft distiller" means a craft distiller
5 licensed pursuant to Section 60-6A-6.1 NMSA 1978;

6 [~~D-~~] G. "department" means the taxation and revenue
7 department, the secretary of taxation and revenue or any
8 employee of the department exercising authority lawfully
9 delegated to that employee by the secretary;

10 [~~E-~~] H. "fortified wine" means wine containing more
11 than fourteen percent alcohol by volume when bottled or
12 packaged by the manufacturer, but "fortified wine" does not
13 include:

14 (1) wine that is sealed or capped by cork
15 closure and aged two years or more;

16 (2) wine that contains more than fourteen
17 percent alcohol by volume solely as a result of the natural
18 fermentation process and that has not been produced with the
19 addition of wine spirits, brandy or alcohol; or

20 (3) vermouth and sherry;

21 [~~F-~~] I. "microbrewer" means a person who produces
22 less than two hundred thousand barrels of beer per year;

23 [~~G-~~] J. "person" includes, to the extent permitted
24 by law, a federal, state or other governmental unit or
25 subdivision or an agency, department, institution or

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1 instrumentality thereof;

2 [H.] K. "small winegrower" means a winegrower who
3 produces less than one million five hundred thousand liters of
4 wine in a year;

5 [I.] L. "spirituous liquors" means alcoholic
6 beverages, except fermented beverages such as wine, beer, cider
7 and ale;

8 [J.] M. "wholesaler" means a person holding a
9 license issued under Section 60-6A-1 NMSA 1978 or a person
10 selling alcoholic beverages that were not purchased from a
11 person holding a license issued under Section 60-6A-1 NMSA
12 1978;

13 [K.] N. "wine" means an alcoholic beverage other
14 than cider that is obtained by the fermentation of the natural
15 sugar contained in fruit or other agricultural products, with
16 or without the addition of sugar or other products, and that
17 does not contain more than twenty-one percent alcohol by
18 volume; and

19 [L.] O. "winegrower" means a person licensed
20 pursuant to Section 60-6A-11 NMSA 1978."

21 **SECTION 3.** Section 7-17-5 NMSA 1978 (being Laws 1993,
22 Chapter 65, Section 8, as amended) is amended to read:

23 "7-17-5. IMPOSITION AND RATE OF LIQUOR EXCISE TAX.--

24 A. There is imposed on a wholesaler who sells
25 alcoholic beverages on which the tax imposed by this section

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1 has not been paid an excise tax, to be referred to as the
2 "liquor excise tax", at the [following] rates provided in
3 Subsections B through F of this section on alcoholic beverages
4 sold.

5 ~~[(1) on spirituous liquors, except as provided~~
6 ~~in Paragraph (9) of this subsection, one dollar sixty cents~~
7 ~~(\$1.60) per liter;~~

8 ~~(2) on beer, except as provided in Paragraph~~
9 ~~(5) of this subsection, forty-one cents (\$.41) per gallon;~~

10 ~~(3) on wine, except as provided in Paragraphs~~
11 ~~(4) and (6) of this subsection, forty-five cents (\$.45) per~~
12 ~~liter;~~

13 ~~(4) on fortified wine, one dollar fifty cents~~
14 ~~(\$1.50) per liter;~~

15 ~~(5) on beer manufactured or produced by a~~
16 ~~microbrewer and sold in this state, provided that proof is~~
17 ~~furnished to the department that the beer was manufactured or~~
18 ~~produced by a microbrewer, eight cents (\$.08) per gallon on the~~
19 ~~first thirty thousand barrels sold, twenty-eight cents (\$.28)~~
20 ~~per gallon for all barrels sold over thirty thousand barrels~~
21 ~~but less than sixty thousand barrels and forty-one cents (\$.41)~~
22 ~~per gallon for sixty thousand or more barrels sold;~~

23 ~~(6) on wine manufactured or produced by a~~
24 ~~small winegrower and sold in this state, provided that proof is~~
25 ~~furnished to the department that the wine was manufactured or~~

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1 ~~produced by a small winegrower:~~

2 ~~(a) ten cents (\$.10) per liter on the~~
3 ~~first eighty thousand liters sold;~~

4 ~~(b) twenty cents (\$.20) per liter on~~
5 ~~each liter sold over eighty thousand liters but not over nine~~
6 ~~hundred fifty thousand liters; and~~

7 ~~(c) thirty cents (\$.30) per liter on~~
8 ~~each liter sold over nine hundred fifty thousand liters but not~~
9 ~~over one million five hundred thousand liters;~~

10 ~~(7) on cider, except as provided in Paragraph~~
11 ~~(8) of this subsection, forty-one cents (\$.41) per gallon;~~

12 ~~(8) on cider manufactured or produced by a~~
13 ~~small winegrower and sold in this state, provided that proof is~~
14 ~~furnished to the department that the cider was manufactured or~~
15 ~~produced by a small winegrower, eight cents (\$.08) per gallon~~
16 ~~on the first thirty thousand barrels sold, twenty-eight cents~~
17 ~~(\$.28) per gallon for all barrels sold over thirty thousand~~
18 ~~barrels but less than sixty thousand barrels and forty-one~~
19 ~~cents (\$.41) per gallon for sixty thousand or more barrels~~
20 ~~sold; and~~

21 ~~(9) on spirituous liquors manufactured or~~
22 ~~produced by a craft distiller licensed pursuant to Section~~
23 ~~60-6A-6.1 NMSA 1978, provided that proof is provided to the~~
24 ~~department that the spirituous liquors were manufactured or~~
25 ~~produced by a craft distiller, for products up to ten percent~~

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1 ~~alcohol by volume, eight cents (\$.08) per liter for the first~~
2 ~~two hundred fifty thousand liters sold and twenty-eight cents~~
3 ~~(\$.28) per liter for the next two hundred fifty thousand liters~~
4 ~~sold and for products over ten percent alcohol by volume,~~
5 ~~thirty-two cents (\$.32) per liter on the first one hundred~~
6 ~~seventy-five thousand liters sold and sixty-five cents (\$.65)~~
7 ~~per liter on the next two hundred thousand liters sold.]~~

8 B. Prior to July 1, 2031, the liquor excise tax
9 imposed on spirituous liquors is as follows:

10 (1) if manufactured or produced by a craft
11 distiller; provided that proof is provided to the department
12 that the spirituous liquors were manufactured or produced by a
13 craft distiller:

14 (a) for products up to ten percent
15 alcohol by volume: 1) eight cents (\$.08) per liter for the
16 first two hundred fifty thousand liters sold; 2) twenty-eight
17 cents (\$.28) per liter for the next two hundred fifty thousand
18 liters sold; and 3) three dollars thirty-eight cents (\$3.38)
19 for each liter sold thereafter; and

20 (b) for products over ten percent
21 alcohol by volume: 1) thirty-two cents (\$.32) per liter on the
22 first one hundred seventy-five thousand liters sold; 2) sixty-
23 five cents (\$.65) per liter on the next two hundred thousand
24 liters sold; and 3) three dollars thirty-eight cents (\$3.38)
25 for each liter sold thereafter; and

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1 (2) for all other spirituous liquors, three
2 dollars thirty-eight cents (\$3.38) per liter sold.

3 C. Prior to July 1, 2031, the liquor excise tax
4 imposed on beer and cider is as follows:

5 (1) if manufactured or produced by a
6 microbrewer or small winegrower and sold in this state;
7 provided that proof is furnished to the department that the
8 beer or cider was manufactured or produced by a microbrewer or
9 small winegrower:

10 (a) eight cents (\$.08) per gallon on the
11 first thirty thousand barrels sold;

12 (b) twenty-eight cents (\$.28) per gallon
13 for all barrels sold over thirty thousand barrels but less than
14 sixty thousand barrels; and

15 (c) eighty-seven cents (\$.87) per gallon
16 for sixty thousand or more barrels sold; and

17 (2) for all other beer and cider, eighty-seven
18 cents (\$.87) per gallon sold.

19 D. Prior to July 1, 2031, the liquor excise tax
20 imposed on wine is as follows:

21 (1) if manufactured or produced by a small
22 winegrower and sold in this state; provided that proof is
23 furnished to the department that the wine was manufactured or
24 produced by a small winegrower:

25 (a) ten cents (\$.10) per liter on the

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1 first eighty thousand liters sold;

2 (b) twenty cents (\$.20) per liter on
3 each liter sold over eighty thousand liters but not over nine
4 hundred fifty thousand liters; and

5 (c) thirty cents (\$.30) per liter on
6 each liter sold over nine hundred fifty thousand liters but not
7 over one million five hundred thousand liters; and

8 (2) for all other wine, ninety-five cents
9 (\$.95) per liter sold.

10 E. Prior to July 1, 2031, the liquor excise tax
11 imposed on fortified wine is three dollars seventeen cents
12 (\$3.17) per liter sold.

13 F. No later than April 30, 2028 and April 30 of
14 each third year thereafter, the department shall calculate the
15 rates of the liquor excise tax to be imposed as of July 1 of
16 that year. The rates of the liquor excise tax shall be equal
17 to the product, rounded down to the nearest whole cent, of the
18 rates provided in Subsections B through E of this section,
19 multiplied by a fraction with a numerator equal to the consumer
20 price index for the previous calendar year and a denominator
21 equal to the consumer price index for the calendar year 2025;
22 provided that the rate of the tax shall not be less than the
23 rate imposed on July 1 of the previous year.

24 ~~[B-]~~ G. The volume of wine transferred from one
25 winegrower to another winegrower for processing, bottling or

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1 storage and subsequent return to the transferor shall be
2 excluded pursuant to Section 7-17-6 NMSA 1978 from the taxable
3 volume of wine of the transferee. Wine transferred from an
4 initial winegrower to a second winegrower remains a tax
5 liability of the transferor, provided that if the wine is
6 transferred to the transferee for the transferee's use or for
7 resale, the transferee then assumes the liability for the tax
8 due pursuant to this section.

9 ~~[G.]~~ H. A transfer of wine from a winegrower to a
10 wholesaler for distribution of the wine transfers the liability
11 for payment of the liquor excise tax to the wholesaler upon the
12 sale of the wine by the wholesaler."

13 **SECTION 4.** A new section of the Liquor Excise Tax Act,
14 Section 7-17-5.2 NMSA 1978, is enacted to read:

15 "7-17-5.2. [NEW MATERIAL] IMPOSITION AND RATE OF LIQUOR
16 EXCISE SURTAX.--

17 A. In addition to the liquor excise tax, there is
18 imposed on a retailer who sells alcoholic beverages on which
19 the surtax imposed by this section has not been paid an excise
20 surtax, to be referred to as the "liquor excise surtax", at the
21 rate of twelve percent on alcoholic beverages sold.

22 B. As used in this section, "retailer" means a
23 person having a place of business in New Mexico who sells,
24 offers for sale or possesses for the purpose of selling
25 alcoholic beverages in New Mexico."

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1 SECTION 5. Section 7-17-6 NMSA 1978 (being Laws 1984,
2 Chapter 85, Section 4, as amended) is amended to read:

3 "7-17-6. DEDUCTION--INTERSTATE SALES--WINEGROWER-TO-
4 WINEGROWER TRANSFERS.--

5 A. A wholesaler may deduct the liters of spirituous
6 liquors, gallons of beer and liters of wine sold and shipped to
7 a person in another state from the units of alcoholic beverages
8 subject to the [~~tax~~] taxes imposed by the Liquor Excise Tax
9 Act; provided that the department may require the wholesaler to
10 submit evidence satisfactory to the department that the units
11 have been sold and shipped to a person in another state.

12 B. A winegrower may deduct the liters of wine
13 transferred to the winegrower from another winegrower for
14 processing, bottling or storage and subsequent return to the
15 transferor from the units of wine subject to the [~~liquor excise~~
16 ~~tax~~] taxes imposed by the Liquor Excise Tax Act on the licensed
17 premises of the winegrower."

18 SECTION 6. Section 7-17-9 NMSA 1978 (being Laws 1966,
19 Chapter 49, Section 7, as amended) is amended to read:

20 "7-17-9. EXEMPTION--CERTAIN SALES TO OR BY
21 INSTRUMENTALITIES OF ARMED FORCES.--Exempted from the [~~tax~~
22 ~~imposed by Section 7-17-5 NMSA 1978~~] taxes imposed by the
23 Liquor Excise Tax Act are alcoholic beverages sold to or by any
24 instrumentality of the armed forces of the United States
25 engaged in resale activities."

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1 SECTION 7. Section 7-17-10 NMSA 1978 (being Laws 1966,
2 Chapter 49, Section 8, as amended) is amended to read:

3 "7-17-10. DATE PAYMENT DUE.--The [~~tax~~] taxes imposed by
4 the Liquor Excise Tax Act [~~is~~] are to be paid on or before the
5 twenty-fifth day of the month following the month in which the
6 taxable event occurs."

7 SECTION 8. Section 7-17-11 NMSA 1978 (being Laws 1969,
8 Chapter 80, Section 1, as amended) is amended to read:

9 "7-17-11. REFUND OR CREDIT OF [~~TAX~~] TAXES.--The
10 department shall allow a claim for refund or credit as provided
11 in Sections 7-1-26 and 7-1-29 NMSA 1978 for the [~~tax imposed by~~
12 ~~Section 7-17-5 NMSA 1978~~] taxes imposed by the Liquor Excise
13 Tax Act and paid on alcoholic beverages destroyed in shipment,
14 spoiled or otherwise damaged as to be unfit for sale or
15 consumption upon submission of proof satisfactory to the
16 department of such destruction, spoilage or damage."

17 SECTION 9. Section 7-17-12 NMSA 1978 (being Laws 1984,
18 Chapter 85, Section 8, as amended) is amended to read:

19 "7-17-12. INTERPRETATION OF ACT--ADMINISTRATION AND
20 ENFORCEMENT OF [~~TAX~~] TAXES.--

21 A. The department shall interpret the provisions of
22 the Liquor Excise Tax Act.

23 B. The department shall administer and enforce the
24 collection of the [~~liquor excise tax~~] taxes imposed by the
25 Liquor Excise Tax Act, and the Tax Administration Act applies

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1 to the administration and enforcement of the [~~tax~~] taxes."

2 SECTION 10. [NEW MATERIAL] ALCOHOL HARMS ALLEVIATION
3 FUND.--

4 A. The "alcohol harms alleviation fund" is created
5 as a nonreverting fund in the state treasury. The fund
6 consists of appropriations, distributions, gifts, grants,
7 donations and bequests made to the fund and income from
8 investment of the fund. The department of finance and
9 administration shall administer the fund. Money in the fund is
10 subject to appropriation by the legislature for alcohol harms
11 prevention, treatment and recovery services to individuals
12 throughout New Mexico, including individuals harmed by a person
13 in need of those services; provided that twenty-five percent of
14 money appropriated from the fund in any year shall be for
15 Indian nations, tribes and pueblos to implement alcohol harms
16 prevention programs and treatment, including culturally
17 relevant practices. When appropriating the funds, the
18 legislature shall prioritize community-based initiatives that
19 address the needs of populations and communities that are
20 disproportionately impacted by excessive alcohol use and are
21 working to reduce health disparities.

22 B. Money in the fund shall be expended by warrant
23 of the secretary of finance and administration pursuant to
24 vouchers signed by the secretary or the secretary's authorized
25 representative.

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1 SECTION 11. Section 60-6A-11.1 NMSA 1978 (being Laws
2 2011, Chapter 109, Section 1) is amended to read:

3 "60-6A-11.1. DIRECT WINE SHIPMENT PERMIT--AUTHORIZATION--
4 RESTRICTIONS.--

5 A. A licensee with a winegrower's license or a
6 person licensed in a state other than New Mexico that holds a
7 winery license may apply to the director for and the director
8 may issue to the applicant a direct wine shipment permit. An
9 application for a direct wine shipment permit shall include:

10 (1) contact information for the applicant in a
11 form required by the department;

12 (2) an annual application fee of fifty dollars
13 (\$50.00) if the applicant does not hold a winegrower's license;

14 (3) the number of the applicant's winegrower's
15 license if the applicant is located in New Mexico or a copy of
16 the applicant's winery license if the applicant is located in a
17 state other than New Mexico; and

18 (4) any other information or documents
19 required by the director. Upon approval of an applicant for a
20 permit, the director shall forward to the taxation and revenue
21 department the name of each permittee and the contact
22 information for the permittee.

23 B. A direct wine shipment permit shall be valid for
24 a permit year. A permittee shall renew a direct wine shipment
25 permit annually as required by the department to continue

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1 making direct shipments of wine to New Mexico residents.

2 C. A permittee may ship:

3 (1) not more than two nine-liter cases of wine
4 monthly to a New Mexico resident who is twenty-one years of age
5 or older for the recipient's personal consumption or use, but
6 not for resale; and

7 (2) wine directly to a New Mexico resident
8 only in containers that are conspicuously labeled with the
9 words:

10 "CONTAINS ALCOHOL
11 SIGNATURE OF PERSON 21 YEARS OR OLDER REQUIRED
12 FOR DELIVERY".

13 D. A permittee shall:

14 (1) register with the taxation and revenue
15 department for the payment of the liquor excise tax, liquor
16 excise surtax and gross receipts taxes due on the sales of wine
17 pursuant to the permittee's activities in New Mexico;

18 (2) submit to the jurisdiction of New Mexico
19 courts to resolve legal actions that arise from the shipping by
20 the permittee of wine into New Mexico to New Mexico residents;

21 (3) monthly, by the twenty-fifth day of each
22 month following the month in which the permittee was issued a
23 direct wine shipment permit, pay to the taxation and revenue
24 department the liquor excise tax, [~~due~~] liquor excise surtax
25 and [~~the~~] gross receipts tax due; and

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1 (4) submit to an audit by an agent of the
2 taxation and revenue department of the permittee's records of
3 the wine shipped pursuant to this section to New Mexico
4 residents upon notice and during usual business hours.

5 E. As used in this section:

6 (1) "permit year" means the period between
7 July 1 and June 30 of a year; and

8 (2) "permittee" means a person that is the
9 holder of a direct wine shipment permit."

10 SECTION 12. EFFECTIVE DATE.--The effective date of the
11 provisions of this act is July 1, 2026.

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HOUSE JOINT RESOLUTION

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

A JOINT RESOLUTION

PROPOSING TO AMEND THE CONSTITUTION OF NEW MEXICO BY ADDING A
NEW SECTION OF ARTICLE 2 THAT PROVIDES THE PEOPLE OF THE STATE
WITH ENVIRONMENTAL RIGHTS, INCLUDING THE RIGHT TO CLEAN AND
HEALTHY AIR, WATER, SOIL AND ENVIRONMENTS, HEALTHY NATIVE
FLORA, FAUNA AND ECOSYSTEMS, A SAFE CLIMATE AND THE
PRESERVATION OF THE NATURAL, CULTURAL, SCENIC AND HEALTHFUL
QUALITIES OF THE ENVIRONMENT, AND DIRECTS THE STATE, COUNTIES
AND MUNICIPALITIES TO SERVE AS TRUSTEES OF THE NATURAL
RESOURCES OF NEW MEXICO FOR THE BENEFIT OF ALL THE PEOPLE.

BE IT RESOLVED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. It is proposed to amend Article 2 of the
constitution of New Mexico by adding a new section to read:

"A. The people of the state shall have a right to
clean and healthy air, water, soil and environments; healthy

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1 native flora, fauna and ecosystems; a safe climate; and the
2 preservation of the natural, cultural, scenic and healthful
3 qualities of the environment. The state shall protect these
4 rights equitably for all people regardless of race, ethnicity,
5 tribal affiliation, gender, socioeconomics or geography.

6 B. The state, counties and municipalities shall
7 serve as trustees of the natural resources of New Mexico and
8 shall conserve, protect and maintain these resources for the
9 benefit of all the people, including present and future
10 generations.

11 C. The provisions of this section are self-
12 executing. Monetary damages shall not be awarded for a
13 violation of this section. This section is enforceable against
14 the state, counties and municipalities."

15 SECTION 2. The amendment proposed by this resolution
16 shall be submitted to the people for their approval or
17 rejection at the next general election or at any special
18 election prior to that date that may be called for that
19 purpose.

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO PHARMACIES; AMENDING THE PHARMACY ACT TO PROVIDE
FOR CUSTODIAL CARE FACILITIES ACQUIRING AND POSSESSING
CONTROLLED SUBSTANCES FOR WITHDRAWAL MANAGEMENT.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. A new section of the Pharmacy Act is enacted
to read:

"~~[NEW MATERIAL]~~ CUSTODIAL CARE FACILITIES--ACQUIRING AND
POSSESSING CONTROLLED SUBSTANCES.--

A. A licensed custodial care facility that is
authorized to provide medically monitored withdrawal management
that is under the supervision of a consulting pharmacist and
has nursing staff on-site twenty-four hours per day, three
hundred sixty-five days per year, may acquire, stock, maintain
and have in the facility's possession dangerous drugs,

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1 including controlled substances to be used for withdrawal
2 management purposes.

3 B. As used in this section, "controlled substance"
4 means a drug, substance or immediate precursor enumerated in
5 Schedules III and V of the Controlled Substances Act."

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO HEALTH; REQUIRING THE DEPARTMENT OF HEALTH TO PAY
LICENSED BOARDING HOMES FOR HOUSING PEOPLE DISCHARGED FROM THE
NEW MEXICO BEHAVIORAL HEALTH INSTITUTE AT LAS VEGAS OR THE
UNIVERSITY OF NEW MEXICO ADULT PSYCHIATRIC CENTER; MAKING AN
APPROPRIATION.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. A new section of the Public Health Act is
enacted to read:

"NEW MATERIAL PAYMENT TO LICENSED BOARDING HOMES.--

A. Beginning January 1, 2026, the department of
health shall pay each boarding home that admits a person who is
discharged from the New Mexico behavioral health institute at
Las Vegas or the university of New Mexico adult psychiatric
center two hundred dollars (\$200) for each month that the

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1 person is a resident of the boarding home.

2 B. The department of health shall promulgate rules
3 for the payment of boarding homes. At a minimum, the rules
4 shall address:

5 (1) the documentation required to be submitted
6 by the boarding home to be eligible for payment; and

7 (2) safeguards to prevent fraud.

8 C. For the purposes of this section, "boarding
9 home" means a facility licensed by the department of health as
10 a boarding home."

11 SECTION 2. APPROPRIATION.--Two hundred fifty thousand
12 dollars (\$250,000) is appropriated from the general fund to the
13 department of health for expenditure in fiscal year 2026 to pay
14 licensed boarding homes for housing people released from the
15 New Mexico behavioral health institute at Las Vegas or the
16 university of New Mexico adult psychiatric center. Any
17 unexpended or unencumbered balance remaining at the end of
18 fiscal year 2026 shall revert to the general fund.

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SENATE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO PRESCRIPTION DRUGS; EXPANDING THE PRESCRIPTION DRUG DONATION PROGRAM TO ALLOW MORE DONORS AND RECIPIENTS TO PARTICIPATE IN THE DONATION, COLLECTION AND REDISTRIBUTION OF UNUSED PRESCRIPTION DRUGS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. Section 26-1-3.2 NMSA 1978 (being Laws 2011, Chapter 119, Section 1) is amended to read:

"26-1-3.2. PRESCRIPTION DRUG DONATION.--

A. As used in this section:

~~[(1) "clinic" means a facility licensed pursuant to Section 61-11-14 NMSA 1978 in which one or more licensed practitioners diagnose and treat patients and in which drugs are stored, dispensed or administered for the diagnosis and treatment of the facility's patients; provided that~~

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1 ~~"clinic" does not include the privately owned practice of a~~
2 ~~licensed practitioner or group of licensed practitioners exempt~~
3 ~~under Section 61-11-22 NMSA 1978;~~

4 ~~(2)]~~ (1) "donor" means ~~[an individual]~~ a
5 person who donates unused prescription drugs to ~~[a clinic or a~~
6 ~~participating practitioner for the purpose of redistribution to~~
7 ~~established patients of that clinic or practitioner;~~

8 ~~(3)~~ ~~"participating practitioner" means a~~
9 ~~licensed practitioner who is authorized to prescribe drugs and~~
10 ~~who registers with the board, and is subject to rules~~
11 ~~promulgated by the board, to participate in the collection of~~
12 ~~donated drugs, prescribed for use by established patients of~~
13 ~~that practitioner and donated for the purpose of redistribution~~
14 ~~to established patients of that practitioner]~~ an eligible
15 recipient for the purpose of redistribution to patients;

16 (2) "eligible recipient" means a person who
17 registers with the board to participate in the collection of
18 donated drugs and is:

19 (a) licensed pursuant to Section
20 61-11-14 NMSA 1978 to receive and distribute prescription
21 drugs;

22 (b) a health care facility licensed by
23 the health care authority pursuant to the Health Care Code; or

24 (c) a practitioner licensed to prescribe
25 prescription drugs;

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1 [~~(4)~~ "recipient"] (3) "patient" means an
2 individual who voluntarily receives donated prescription drugs;
3 and

4 [~~(5)~~] (4) "tamper-evident" means a device or
5 process that makes unauthorized access to protected
6 pharmaceutical packaging easily detected.

7 B. The board shall adopt and promulgate rules for
8 the donation of unused prescription drugs. Any person,
9 including persons from other states, may [be donated] donate
10 unexpired and unused prescription drugs to [a clinic or a
11 participating practitioner, and a clinic or a participating
12 practitioner] an eligible recipient, and an eligible recipient
13 may accept and redistribute the donated prescription drugs in
14 accordance with rules promulgated by the board. Donated
15 prescription drugs shall only be redistributed to a patient if
16 the drugs will not expire before the patient is able to
17 completely use the drugs, based on the directions for use given
18 by the patient's prescribing health care professional.

19 C. The board shall promulgate rules to establish:

20 (1) procedures to allow the donation and
21 redistribution of certain prescription drugs, including
22 refrigerated drugs, that:

23 (a) ensure that the redistribution
24 process is consistent with public health and safety standards;
25 [~~and~~]

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[bracketed material] = delete

1 (b) exclude controlled substances; and
2 (c) allow in-state and out-of-state
3 pharmacies that are experienced in managing donated
4 prescription drugs to distribute donated prescription drugs to
5 patients, either at a physical pharmacy location or through a
6 mail-order pharmacy;

7 (2) standards and procedures for accepting,
8 storing, labeling and redistributing donated prescription
9 drugs;

10 (3) standards and procedures for inspecting
11 donated prescription drugs to determine that the packaging is
12 tamper-evident and that the donated prescription drugs are
13 unadulterated, safe and suitable for redistribution;

14 (4) a form to be signed by the [~~recipient~~]
15 patient specifying:

16 (a) knowledge that the donor [~~is not a~~
17 ~~pharmacist and~~] took reasonable care of the donated
18 prescription drug;

19 (b) knowledge that the [~~donor is known~~
20 ~~to the clinic or the participating practitioner~~] donated
21 prescription drugs have been inspected prior to being dispensed
22 and that there is no reason to believe that the donated
23 prescription drug was improperly handled or stored;

24 (c) that any person who exercises
25 reasonable care in donating, accepting or redistributing

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1 pursuant to this section shall be immune from civil or criminal
2 liability or professional disciplinary action of any kind for
3 any related injury, death or loss; and

4 (d) that the immunity provided by this
5 section shall not decrease or increase the civil or criminal
6 liability of a drug manufacturer, distributor or dispenser that
7 would have existed but for the donation;

8 (5) [~~a form to be signed~~] information required
9 to be provided by the donor verifying that:

10 (a) the donated prescription drug has
11 been properly stored and the container has not been opened or
12 tampered with;

13 (b) the donated prescription drug has
14 not been adulterated or misbranded; and

15 (c) the donor is voluntarily donating
16 the prescription drug;

17 (6) a handling fee not to exceed [~~twenty~~
18 ~~dollars (\$20.00)~~] the reasonable costs of participating in the
19 collection of donated prescription drugs that may be charged to
20 the [~~recipient~~] patient by the [~~clinic or the participating~~
21 ~~practitioner~~] eligible recipient to cover the costs of
22 inspecting, storing, labeling and redistributing the donated
23 prescription drug; and

24 (7) any other standards deemed necessary by
25 the board.

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1 D. The board shall maintain and publish a current
2 listing of [~~clinics and participating practitioners~~] eligible
3 recipients.

4 E. Before redistributing donated prescription
5 drugs, the [~~clinic or the participating practitioner~~] eligible
6 recipient shall:

7 (1) comply with all applicable federal laws
8 and the laws of the state that deal with the inspection,
9 storage, labeling and redistribution of donated prescription
10 drugs; and

11 (2) examine the donated prescription drug to
12 determine that it has not been adulterated or misbranded and
13 certify that the drug has been stored in compliance with the
14 requirements of the product label.

15 F. Any person who exercises reasonable care in
16 donating, accepting or redistributing prescription drugs
17 pursuant to this section shall be immune from civil or criminal
18 liability or professional disciplinary action of any kind for
19 any related injury, death or loss.

20 G. The immunity provided by this section shall not
21 decrease or increase the civil or criminal liability of a drug
22 manufacturer, distributor or dispenser that would have existed
23 but for the donation.

24 H. A manufacturer shall not be liable for failure
25 to transfer or communicate product consumer information or the

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1 expiration date of the donated prescription drug pursuant to
2 this section.

3 I. This section does not restrict the authority of
4 an appropriate governmental agency to regulate or ban the use
5 of any prescription drugs."

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HOUSE BILL
57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025
INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO HEALTH; PREVENTING THE RESTRICTION OF MEDICATION-ASSISTED TREATMENT FOR MINORS IN INPATIENT AND OUTPATIENT SUBSTANCE ABUSE TREATMENT FACILITIES AND PROGRAMS THAT ARE OPERATED OR FUNDED BY THE STATE; CREATING THE EVIDENCE-BASED ADDICTION TREATMENT FOR MINORS FUND; MAKING AN APPROPRIATION.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. ~~[NEW MATERIAL]~~ DEFINITIONS.--As used in Sections 1 through 3 of this act:

A. "evidence-based" means a course of treatment that is supported by research, clinical expertise and the needs of a patient;

B. "inpatient substance abuse treatment facility" means a residential facility that operates twenty-four hours per day and provides intensive management of symptoms related

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1 to addiction and monitoring of the physical and mental
2 complications resulting from substance use;

3 C. "medication-assisted treatment" means the use of
4 federal-food-and-drug-administration-approved prescription
5 drugs for the treatment of substance use disorder;

6 D. "minor" means an individual who is under
7 eighteen years of age; and

8 E. "outpatient substance abuse treatment program"
9 means a program that offers resources, counseling and substance
10 abuse treatment on an outpatient basis.

11 SECTION 2. [NEW MATERIAL] MEDICATION-ASSISTED TREATMENT
12 FOR MINORS IN INPATIENT SUBSTANCE ABUSE TREATMENT FACILITIES
13 AND OUTPATIENT SUBSTANCE ABUSE TREATMENT PROGRAMS.--

14 A. By the end of fiscal year 2026, the department
15 of health and the children, youth and families department shall
16 not operate or contract with an inpatient substance abuse
17 treatment facility or outpatient substance abuse treatment
18 program that has policies or procedures that restrict the use
19 of medication-assisted treatment for the treatment of substance
20 use disorder in minor patients.

21 B. Beginning July 1, 2027, an inpatient substance
22 abuse treatment facility or outpatient substance abuse
23 treatment program that has policies or procedures that restrict
24 the use of medication-assisted treatment for the treatment of
25 substance use disorder in minor patients shall not be eligible

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1 for reimbursement from the state's medicaid program for
2 services rendered to minors.

3 C. No later than December 1, 2025, the health care
4 authority shall promulgate rules for the operation of
5 medication-assisted treatment programs in inpatient substance
6 abuse treatment facilities and outpatient substance abuse
7 treatment programs in consultation with the department of
8 health, the children, youth and families department, inpatient
9 substance abuse treatment facility administrators, outpatient
10 substance abuse treatment program administrators and health
11 care providers with experience treating substance use disorder
12 among minor patients.

13 D. Beginning October 1, 2025 and annually
14 thereafter, the health care authority shall report to the
15 interim legislative health and human services committee on the
16 availability of medication-assisted treatment for minor
17 patients at inpatient substance abuse treatment facilities and
18 outpatient substance abuse treatment programs.

19 SECTION 3. [NEW MATERIAL] EVIDENCE-BASED ADDICTION
20 TREATMENT FOR MINORS FUND--CREATED.--

21 A. The "evidence-based addiction treatment for
22 minors fund" is created as a nonreverting fund in the state
23 treasury. The fund consists of appropriations, gifts, grants
24 and donations. The health care authority shall administer the
25 fund, and money in the fund is appropriated to the health care

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1 authority to assist the children, youth and families
2 department, the department of health and licensed substance
3 abuse treatment providers to establish and operate medication-
4 assisted treatment programs for minors. Disbursements from the
5 fund shall be made by warrants of the secretary of finance and
6 administration pursuant to vouchers signed by the secretary of
7 health care authority.

8 B. No later than December 1, 2025, the health care
9 authority shall promulgate rules for the disbursement of money
10 from the fund, including eligibility criteria for receiving
11 money from the fund.

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HOUSE JOINT RESOLUTION

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

DISCUSSION DRAFT

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

A JOINT RESOLUTION

PROPOSING TO AMEND THE CONSTITUTION OF NEW MEXICO BY ADDING A
NEW SECTION TO PROVIDE FOR THE CREATION OF A CHILDREN, YOUTH
AND FAMILIES COMMISSION AND AN EXECUTIVE DIRECTOR TO DIRECT THE
ACTIVITIES OF THE CHILDREN, YOUTH AND FAMILIES DEPARTMENT, AS
PROVIDED BY LAW.

BE IT RESOLVED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. It is proposed to amend the constitution of
New Mexico by adding a new section to read:

"A. The "children, youth and families commission"
and "children, youth and families department" are created and
shall each have such powers and duties as provided by law.

B. Beginning January 1, 2026, the children, youth
and families commission shall consist of three members who
shall be appointed for six-year terms. The governor, the

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1 president pro tempore of the senate and the speaker of the
2 house of representatives shall each appoint one member as
3 provided by law. For the initial appointment of commission
4 members, one member appointed by the governor shall be
5 appointed for a term of two years, one member appointed by the
6 speaker of the house of representatives shall be appointed for
7 a term of four years and one member appointed by the president
8 pro tempore of the senate shall be appointed for a term of six
9 years. Vacancies on the commission shall be filled by the
10 original appointing authority, and a person appointed to fill a
11 vacancy shall serve for the remainder of the unexpired term.
12 Members of the children, youth and families commission shall
13 only be removed as provided by law.

14 C. The legislature shall provide by law for
15 professional qualifications for members of the children, youth
16 and families commission.

17 D. Beginning July 1, 2026, the children, youth and
18 families commission shall hire an executive director to oversee
19 the children, youth and families department."

20 SECTION 2. The amendment proposed by this resolution
21 shall be submitted to the people for their approval or
22 rejection at the next general election or at any special
23 election prior to that date that may be called for that
24 purpose.

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SENATE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO LICENSES; REQUIRING A SPACE ON LICENSE APPLICATION AND LICENSE RENEWAL FORMS FOR APPLICANTS TO STATE A DESIRE TO MAKE AN ANATOMICAL GIFT; REQUIRING THE MOTOR VEHICLE DIVISION OF THE TAXATION AND REVENUE DEPARTMENT TO MAINTAIN APPLICATIONS WITH THOSE COMPLETED STATEMENTS IN A STATEWIDE DONOR REGISTRY.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. A new section of Chapter 17, Article 3 NMSA 1978 is enacted to read:

"[NEW MATERIAL] DONOR REGISTRY.--

A. In addition to other requirements established for a blank application furnished by the director of the department of game and fish pursuant to Section 17-3-5 NMSA 1978, the director shall include on each blank application a space to show whether the applicant is a donor as provided in

underscored material = new
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1 the Jonathan Spradling Revised Uniform Anatomical Gift Act.

2 B. The applicant may indicate the applicant's donor
3 status on the space provided on the application if the
4 applicant has not already marked the applicant's donor status
5 on an application form for a driver's license pursuant to
6 Section 66-5-10 NMSA 1978. If the applicant desires to be a
7 new donor, the form shall be signed by the donor in the
8 presence of a witness who shall also sign the form in the
9 donor's presence.

10 C. The director of the department of game and fish
11 shall, by January 1, 2026, include the following donor
12 statement on each license application form:

13 "I, _____, hereby make an
14 (Name of applicant/donor)
15 anatomical gift effective upon my death. A
16 medical evaluation at the time of my death shall
17 determine the organs and tissues suitable for
18 donation.

19 _____
20 (Signature of donor)

21 _____
22 (Signature of parent or guardian is required if the donor
23 is under fifteen years of age.)".

24 D. A license vendor that issues a hunting or
25 fishing license pursuant to Chapter 17, Article 3 NMSA 1978

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1 shall submit a copy of each application form or its image of a
2 person who wishes to be a donor to the division.

3 E. The division shall maintain each application it
4 receives from a license vendor pursuant to this section in the
5 statewide donor registry that it maintains pursuant to Section
6 66-5-10 NMSA 1978. Authorized hospital or organ and tissue
7 donor program personnel, immediately prior to or after a
8 donor's death, may request verification of the donor's status
9 from the division and may obtain a copy of the application from
10 the division.

11 F. For the purposes of this section, "division"
12 means the motor vehicle division of the taxation and revenue
13 department."

14 SECTION 2. A new section of the Concealed Handgun Carry
15 Act is enacted to read:

16 "[NEW MATERIAL] DONOR REGISTRY.--

17 A. The department shall include on any concealed
18 handgun license application form or concealed handgun license
19 renewal application form a space to show whether the applicant
20 is a donor as provided in the Jonathan Spradling Revised
21 Uniform Anatomical Gift Act.

22 B. The applicant may indicate the applicant's donor
23 status on the space provided on the application if the
24 applicant has not already marked the applicant's donor status
25 on an application form for a driver's license pursuant to

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1 Section 66-5-10 NMSA 1978. If the applicant desires to be a
2 new donor, the form shall be signed by the donor in the
3 presence of a witness who shall also sign the form in the
4 donor's presence.

5 C. The department shall, by January 1, 2026,
6 include the following donor statement on each concealed handgun
7 license application form and concealed handgun license renewal
8 application form:

9 "I, _____, hereby make an
10 (Name of applicant/donor)

11 anatomical gift effective upon my death. A
12 medical evaluation at the time of my death shall
13 determine the organs and tissues suitable for
14 donation.

15 _____
16 (Signature of donor)

17 _____
18 (Signature of parent or guardian is required if the donor
19 is under fifteen years of age.)".

20 D. The department shall submit a copy of each
21 application form that has a completed donor statement to the
22 division.

23 E. The division shall maintain each application it
24 receives from the department pursuant to this section in the
25 statewide donor registry that it maintains pursuant to Section

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underscored material = new
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1 66-5-10 NMSA 1978. Authorized hospital or organ and tissue
2 donor program personnel, immediately prior to or after a
3 donor's death, may request verification of the donor's status
4 from the division and may obtain a copy of the application from
5 the division.

6 F. For the purposes of this section, "division"
7 means the motor vehicle division of the taxation and revenue
8 department."

9 SECTION 3. Section 29-19-5 NMSA 1978 (being Laws 2003,
10 Chapter 255, Section 5, as amended) is amended to read:

11 "29-19-5. APPLICATION FORM--SCREENING OF APPLICANTS--
12 FEE--LIMITATIONS ON LIABILITY.--

13 A. [~~Effective July 1, 2003~~] Applications for
14 concealed handgun licenses shall be made readily available at
15 locations designated by the department. Applications for
16 concealed handgun licenses shall be completed, under penalty of
17 perjury, on a form designed and provided by the department and
18 shall include:

19 (1) the applicant's name, current address,
20 date of birth, place of birth, social security number, height,
21 weight, gender, hair color, eye color and driver's license
22 number or other state-issued identification number;

23 (2) a statement that the applicant is aware
24 of, understands and is in compliance with the requirements for
25 licensure set forth in the Concealed Handgun Carry Act;

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1 (3) a statement that the applicant has been
2 furnished a copy of the Concealed Handgun Carry Act and is
3 knowledgeable of its provisions; ~~and~~

4 (4) a conspicuous warning that the application
5 form is executed under penalty of perjury and that a materially
6 false answer or the submission of a materially false document
7 to the department may result in denial or revocation of a
8 concealed handgun license and may subject the applicant to
9 criminal prosecution for perjury as provided in Section 30-25-1
10 NMSA 1978; and

11 (5) a space, as required by Section 2 of this
12 2025 act, to show whether the applicant is a donor as provided
13 in the Jonathan Spradling Revised Uniform Anatomical Gift Act.

14 B. The applicant shall submit to the department:

- 15 (1) a completed application form;
- 16 (2) a nonrefundable application fee in an
17 amount not to exceed one hundred dollars (\$100);
- 18 (3) two full sets of fingerprints;
- 19 (4) a certified copy of a certificate of
20 completion for a firearms training course approved by the
21 department;
- 22 (5) two color photographs of the applicant;
- 23 (6) a certified copy of a birth certificate or
24 proof of United States citizenship, if the applicant was not
25 born in the United States; and

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1 (7) proof of residency in New Mexico.

2 C. A law enforcement agency may fingerprint an
3 applicant and may charge a reasonable fee.

4 D. Upon receipt of the items listed in Subsection B
5 of this section, the department shall make a reasonable effort
6 to determine if an applicant is qualified to receive a
7 concealed handgun license. The department shall conduct an
8 appropriate check of available records and shall forward the
9 applicant's fingerprints to the federal bureau of investigation
10 for a national criminal background check. The department shall
11 comply with the license-issuing requirements set forth in
12 Section 29-19-7 NMSA 1978. However, the department shall
13 suspend or revoke a license if the department receives
14 information that would disqualify an applicant from receiving a
15 concealed handgun license after the thirty-day time period has
16 elapsed.

17 E. A state or local government agency shall comply
18 with a request from the department pursuant to the Concealed
19 Handgun Carry Act within thirty days of the request."

20 SECTION 4. A new section of the Uniform Licensing Act is
21 enacted to read:

22 "[NEW MATERIAL] LICENSE APPLICATION OR RENEWAL FORMS--
23 ANATOMICAL GIFT DONOR REGISTRY.--

24 A. Each board shall include on any license
25 application form or license renewal application form it issues

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1 a space to show whether the applicant is a donor as provided in
2 the Jonathan Spradling Revised Uniform Anatomical Gift Act.

3 B. The applicant may indicate the applicant's donor
4 status on the space provided on the application if the
5 applicant has not already marked the applicant's donor status
6 on an application form for a driver's license pursuant to
7 Section 66-5-10 NMSA 1978. If the applicant desires to be a
8 new donor, the form shall be signed by the donor in the
9 presence of a witness who shall also sign the form in the
10 donor's presence.

11 C. Each board that issues a license shall, by
12 January 1, 2026, include the following donor statement on each
13 license application and license renewal form:

14 "I, _____, hereby make an
15 (Name of applicant/donor)
16 anatomical gift effective upon my death. A
17 medical evaluation at the time of my death shall
18 determine the organs and tissues suitable for
19 donation.

20 _____
21 (Signature of donor)

22 _____
23 (Signature of parent or guardian is required if the donor
24 is under fifteen years of age.)".

25 D. Each board that issues a license pursuant to the

underscored material = new
[bracketed material] = delete

1 Uniform Licensing Act shall submit a copy of each application
2 form that has a completed donor statement to the division.

3 E. The division shall maintain each application it
4 receives from a board pursuant to this section in the statewide
5 donor registry that it maintains pursuant to Section 66-5-10
6 NMSA 1978. Authorized hospital or organ and tissue donor
7 program personnel, immediately prior to or after a donor's
8 death, may request verification of the donor's status from the
9 division and may obtain a copy of the application from the
10 division.

11 F. For the purposes of this section, "division"
12 means the motor vehicle division of the taxation and revenue
13 department."

14 SECTION 5. A new section of the Optometry Act is enacted
15 to read:

16 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
17 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
18 or license renewal application form issued by the board shall
19 include a space, as required by the Uniform Licensing Act, to
20 show whether the applicant is a donor as provided in the
21 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
22 board shall submit a copy of each form for which that space is
23 completed to the motor vehicle division of the taxation and
24 revenue department for inclusion as part of its statewide donor
25 registry pursuant to Section 66-5-10 NMSA 1978."

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1 **SECTION 6.** A new section of the Nursing Practice Act is
2 enacted to read:

3 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
4 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
5 or license renewal application form issued by the board shall
6 include a space, as required by the Uniform Licensing Act, to
7 show whether the applicant is a donor as provided in the
8 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
9 board shall submit a copy of each form for which that space is
10 completed to the motor vehicle division of the taxation and
11 revenue department for inclusion as part of its statewide donor
12 registry pursuant to Section 66-5-10 NMSA 1978."

13 **SECTION 7.** A new section of the Chiropractic Physician
14 Practice Act is enacted to read:

15 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
16 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
17 or license renewal application form issued by the board shall
18 include a space, as required by the Uniform Licensing Act, to
19 show whether the applicant is a donor as provided in the
20 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
21 board shall submit a copy of each form for which that space is
22 completed to the motor vehicle division of the taxation and
23 revenue department for inclusion as part of its statewide donor
24 registry pursuant to Section 66-5-10 NMSA 1978."

25 **SECTION 8.** A new section of the Dental Health Care Act is

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1 enacted to read:

2 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
3 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
4 or license renewal application form issued by the board shall
5 include a space, as required by the Uniform Licensing Act, to
6 show whether the applicant is a donor as provided in the
7 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
8 board shall submit a copy of each form for which that space is
9 completed to the motor vehicle division of the taxation and
10 revenue department for inclusion as part of its statewide donor
11 registry pursuant to Section 66-5-10 NMSA 1978."

12 SECTION 9. A new section of the Medical Practice Act is
13 enacted to read:

14 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
15 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
16 or license renewal application form issued by the board shall
17 include a space, as required by the Uniform Licensing Act, to
18 show whether the applicant is a donor as provided in the
19 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
20 board shall submit a copy of each form for which that space is
21 completed to the motor vehicle division of the taxation and
22 revenue department for inclusion as part of its statewide donor
23 registry pursuant to Section 66-5-10 NMSA 1978."

24 SECTION 10. A new section of the Genetic Counseling Act
25 is enacted to read:

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1 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
2 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
3 or license renewal application form issued by the board shall
4 include a space, as required by the Uniform Licensing Act, to
5 show whether the applicant is a donor as provided in the
6 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
7 board shall submit a copy of each form for which that space is
8 completed to the motor vehicle division of the taxation and
9 revenue department for inclusion as part of its statewide donor
10 registry pursuant to Section 66-5-10 NMSA 1978."

11 **SECTION 11.** A new section of the Polysomnography Practice
12 Act is enacted to read:

13 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
14 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
15 or license renewal application form issued by the board shall
16 include a space, as required by the Uniform Licensing Act, to
17 show whether the applicant is a donor as provided in the
18 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
19 board shall submit a copy of each form for which that space is
20 completed to the motor vehicle division of the taxation and
21 revenue department for inclusion as part of its statewide donor
22 registry pursuant to Section 66-5-10 NMSA 1978."

23 **SECTION 12.** A new section of the Nutrition and Dietetics
24 Practice Act is enacted to read:

25 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--

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1 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
2 or license renewal application form issued by the board shall
3 include a space, as required by the Uniform Licensing Act, to
4 show whether the applicant is a donor as provided in the
5 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
6 board shall submit a copy of each form for which that space is
7 completed to the motor vehicle division of the taxation and
8 revenue department for inclusion as part of its statewide donor
9 registry pursuant to Section 66-5-10 NMSA 1978."

10 SECTION 13. A new section of the Podiatry Act is enacted
11 to read:

12 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
13 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
14 or license renewal application form issued by the board shall
15 include a space, as required by the Uniform Licensing Act, to
16 show whether the applicant is a donor as provided in the
17 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
18 board shall submit a copy of each form for which that space is
19 completed to the motor vehicle division of the taxation and
20 revenue department for inclusion as part of its statewide donor
21 registry pursuant to Section 66-5-10 NMSA 1978."

22 SECTION 14. A new section of the Professional
23 Psychologist Act is enacted to read:

24 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
25 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form

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1 or license renewal application form issued by the board shall
2 include a space, as required by the Uniform Licensing Act, to
3 show whether the applicant is a donor as provided in the
4 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
5 board shall submit a copy of each form for which that space is
6 completed to the motor vehicle division of the taxation and
7 revenue department for inclusion as part of its statewide donor
8 registry pursuant to Section 66-5-10 NMSA 1978."

9 SECTION 15. A new section of the Counseling and Therapy
10 Practice Act is enacted to read:

11 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
12 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
13 or license renewal application form issued by the board shall
14 include a space, as required by the Uniform Licensing Act, to
15 show whether the applicant is a donor as provided in the
16 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
17 board shall submit a copy of each form for which that space is
18 completed to the motor vehicle division of the taxation and
19 revenue department for inclusion as part of its statewide donor
20 registry pursuant to Section 66-5-10 NMSA 1978."

21 SECTION 16. A new section of the Pharmacy Act is enacted
22 to read:

23 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
24 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
25 or license renewal application form issued by the board shall

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1 include a space, as required by the Uniform Licensing Act, to
2 show whether the applicant is a donor as provided in the
3 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
4 board shall submit a copy of each form for which that space is
5 completed to the motor vehicle division of the taxation and
6 revenue department for inclusion as part of its statewide donor
7 registry pursuant to Section 66-5-10 NMSA 1978."

8 SECTION 17. A new section of the Occupational Therapy Act
9 is enacted to read:

10 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
11 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
12 or license renewal application form issued by the board shall
13 include a space, as required by the Uniform Licensing Act, to
14 show whether the applicant is a donor as provided in the
15 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
16 board shall submit a copy of each form for which that space is
17 completed to the motor vehicle division of the taxation and
18 revenue department for inclusion as part of its statewide donor
19 registry pursuant to Section 66-5-10 NMSA 1978."

20 SECTION 18. A new section of the Respiratory Care Act is
21 enacted to read:

22 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
23 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
24 or license renewal application form issued by the board shall
25 include a space, as required by the Uniform Licensing Act, to

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1 show whether the applicant is a donor as provided in the
2 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
3 board shall submit a copy of each form for which that space is
4 completed to the motor vehicle division of the taxation and
5 revenue department for inclusion as part of its statewide donor
6 registry pursuant to Section 66-5-10 NMSA 1978."

7 SECTION 19. A new section of the Massage Therapy Practice
8 Act is enacted to read:

9 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
10 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
11 or license renewal application form issued by the board shall
12 include a space, as required by the Uniform Licensing Act, to
13 show whether the applicant is a donor as provided in the
14 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
15 board shall submit a copy of each form for which that space is
16 completed to the motor vehicle division of the taxation and
17 revenue department for inclusion as part of its statewide donor
18 registry pursuant to Section 66-5-10 NMSA 1978."

19 SECTION 20. A new section of the Physical Therapy Act is
20 enacted to read:

21 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
22 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
23 or license renewal application form issued by the board shall
24 include a space, as required by the Uniform Licensing Act, to
25 show whether the applicant is a donor as provided in the

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1 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
2 board shall submit a copy of each form for which that space is
3 completed to the motor vehicle division of the taxation and
4 revenue department for inclusion as part of its statewide donor
5 registry pursuant to Section 66-5-10 NMSA 1978."

6 SECTION 21. A new section of the Naprapathic Practice Act
7 is enacted to read:

8 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
9 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
10 or license renewal application form issued by the board shall
11 include a space, as required by the Uniform Licensing Act, to
12 show whether the applicant is a donor as provided in the
13 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
14 board shall submit a copy of each form for which that space is
15 completed to the motor vehicle division of the taxation and
16 revenue department for inclusion as part of its statewide donor
17 registry pursuant to Section 66-5-10 NMSA 1978."

18 SECTION 22. A new section of the Nursing Home
19 Administrators Act is enacted to read:

20 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
21 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
22 or license renewal application form issued by the board shall
23 include a space, as required by the Uniform Licensing Act, to
24 show whether the applicant is a donor as provided in the
25 Jonathan Spradling Revised Uniform Anatomical Gift Act. The

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underscoring material = new
~~[bracketed material] = delete~~

1 board shall submit a copy of each form for which that space is
2 completed to the motor vehicle division of the taxation and
3 revenue department for inclusion as part of its statewide donor
4 registry pursuant to Section 66-5-10 NMSA 1978."

5 SECTION 23. A new section of the Veterinary Practice Act
6 is enacted to read:

7 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
8 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
9 or license renewal application form issued by the board shall
10 include a space, as required by the Uniform Licensing Act, to
11 show whether the applicant is a donor as provided in the
12 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
13 board shall submit a copy of each form for which that space is
14 completed to the motor vehicle division of the taxation and
15 revenue department for inclusion as part of its statewide donor
16 registry pursuant to Section 66-5-10 NMSA 1978."

17 SECTION 24. A new section of the Acupuncture and Oriental
18 Medicine Practice Act is enacted to read:

19 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
20 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
21 or license renewal application form issued by the board shall
22 include a space, as required by the Uniform Licensing Act, to
23 show whether the applicant is a donor as provided in the
24 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
25 board shall submit a copy of each form for which that space is

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~~[bracketed material] = delete~~

1 completed to the motor vehicle division of the taxation and
2 revenue department for inclusion as part of its statewide donor
3 registry pursuant to Section 66-5-10 NMSA 1978."

4 SECTION 25. A new section of the Speech-Language
5 Pathology, Audiology and Hearing Aid Dispensing Practices Act
6 is enacted to read:

7 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
8 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
9 or license renewal application form issued by the board shall
10 include a space, as required by the Uniform Licensing Act, to
11 show whether the applicant is a donor as provided in the
12 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
13 board shall submit a copy of each form for which that space is
14 completed to the motor vehicle division of the taxation and
15 revenue department for inclusion as part of its statewide donor
16 registry pursuant to Section 66-5-10 NMSA 1978."

17 SECTION 26. A new section of the Athletic Trainer
18 Practice Act is enacted to read:

19 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
20 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
21 or license renewal application form issued by the board shall
22 include a space, as required by the Uniform Licensing Act, to
23 show whether the applicant is a donor as provided in the
24 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
25 board shall submit a copy of each form for which that space is

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1 completed to the motor vehicle division of the taxation and
2 revenue department for inclusion as part of its statewide donor
3 registry pursuant to Section 66-5-10 NMSA 1978."

4 SECTION 27. A new section of the Medical Imaging and
5 Radiation Therapy Health and Safety Act is enacted to read:

6 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
7 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
8 or license renewal application form issued by the board shall
9 include a space, as required by the Uniform Licensing Act, to
10 show whether the applicant is a donor as provided in the
11 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
12 board shall submit a copy of each form for which that space is
13 completed to the motor vehicle division of the taxation and
14 revenue department for inclusion as part of its statewide donor
15 registry pursuant to Section 66-5-10 NMSA 1978."

16 SECTION 28. A new section of the Uniform Athlete Agents
17 Act is enacted to read:

18 "[NEW MATERIAL] CERTIFICATE APPLICATION AND RENEWAL
19 FORMS--SPACE FOR ANATOMICAL GIFT DONATION.--A certificate
20 application form or certificate renewal application form issued
21 by the secretary shall include a space, as required by the
22 Uniform Licensing Act, to show whether the applicant is a donor
23 as provided in the Jonathan Spradling Revised Uniform
24 Anatomical Gift Act. The secretary shall submit a copy of each
25 form for which that space is completed to the motor vehicle

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1 division of the taxation and revenue department for inclusion
2 as part of its statewide donor registry pursuant to Section
3 66-5-10 NMSA 1978."

4 SECTION 29. A new section of the Architectural Act is
5 enacted to read:

6 "[NEW MATERIAL] CERTIFICATE APPLICATION AND RENEWAL
7 FORMS--SPACE FOR ANATOMICAL GIFT DONATION.--A certificate
8 application form or certificate renewal application form issued
9 by the board shall include a space, as required by the Uniform
10 Licensing Act, to show whether the applicant is a donor as
11 provided in the Jonathan Spradling Revised Uniform Anatomical
12 Gift Act. The board shall submit a copy of each form for which
13 that space is completed to the motor vehicle division of the
14 taxation and revenue department for inclusion as part of its
15 statewide donor registry pursuant to Section 66-5-10 NMSA
16 1978."

17 SECTION 30. A new section of the Barbers and
18 Cosmetologists Act is enacted to read:

19 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
20 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
21 or license renewal application form issued by the board shall
22 include a space, as required by the Uniform Licensing Act, to
23 show whether the applicant is a donor as provided in the
24 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
25 board shall submit a copy of each form for which that space is

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1 completed to the motor vehicle division of the taxation and
2 revenue department for inclusion as part of its statewide donor
3 registry pursuant to Section 66-5-10 NMSA 1978."

4 SECTION 31. A new section of the Body Art Safe Practices
5 Act is enacted to read:

6 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
7 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
8 or license renewal application form issued by the board shall
9 include a space, as required by the Uniform Licensing Act, to
10 show whether the applicant is a donor as provided in the
11 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
12 board shall submit a copy of each form for which that space is
13 completed to the motor vehicle division of the taxation and
14 revenue department for inclusion as part of its statewide donor
15 registry pursuant to Section 66-5-10 NMSA 1978."

16 SECTION 32. A new section of the Engineering and
17 Surveying Practice Act is enacted to read:

18 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
19 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
20 or license renewal application form issued by the board shall
21 include a space, as required by the Uniform Licensing Act, to
22 show whether the applicant is a donor as provided in the
23 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
24 board shall submit a copy of each form for which that space is
25 completed to the motor vehicle division of the taxation and

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1 revenue department for inclusion as part of its statewide donor
2 registry pursuant to Section 66-5-10 NMSA 1978."

3 SECTION 33. A new section of the Landscape Architects
4 Act is enacted to read:

5 "[NEW MATERIAL] CERTIFICATE APPLICATION AND RENEWAL
6 FORMS--SPACE FOR ANATOMICAL GIFT DONATION.--A certificate
7 application form or certificate renewal application form issued
8 by the board shall include a space, as required by the Uniform
9 Licensing Act, to show whether the applicant is a donor as
10 provided in the Jonathan Spradling Revised Uniform Anatomical
11 Gift Act. The board shall submit a copy of each form for which
12 that space is completed to the motor vehicle division of the
13 taxation and revenue department for inclusion as part of its
14 statewide donor registry pursuant to Section 66-5-10 NMSA
15 1978."

16 SECTION 34. A new section of the Interior Designers Act
17 is enacted to read:

18 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
19 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
20 or license renewal application form issued by the department
21 shall include a space, as required by the Uniform Licensing
22 Act, to show whether the applicant is a donor as provided in
23 the Jonathan Spradling Revised Uniform Anatomical Gift Act.
24 The department shall submit a copy of each form for which that
25 space is completed to the motor vehicle division of the

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1 taxation and revenue department for inclusion as part of its
2 statewide donor registry pursuant to Section 66-5-10 NMSA
3 1978."

4 SECTION 35. A new section of the Home Inspector
5 Licensing Act is enacted to read:

6 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
7 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
8 or license renewal application form issued by the board shall
9 include a space, as required by the Uniform Licensing Act, to
10 show whether the applicant is a donor as provided in the
11 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
12 board shall submit a copy of each form for which that space is
13 completed to the motor vehicle division of the taxation and
14 revenue department for inclusion as part of its statewide donor
15 registry pursuant to Section 66-5-10 NMSA 1978."

16 SECTION 36. A new section of the Private Investigations
17 Act is enacted to read:

18 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
19 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
20 or license renewal application form issued by the department
21 shall include a space, as required by the Uniform Licensing
22 Act, to show whether the applicant is a donor as provided in
23 the Jonathan Spradling Revised Uniform Anatomical Gift Act.
24 The department shall submit a copy of each form for which that
25 space is completed to the motor vehicle division of the

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1 taxation and revenue department for inclusion as part of its
2 statewide donor registry pursuant to Section 66-5-10 NMSA
3 1978."

4 SECTION 37. A new section of the 1999 Public Accountancy
5 Act is enacted to read:

6 "[NEW MATERIAL] CERTIFICATE APPLICATION AND RENEWAL
7 FORMS--SPACE FOR ANATOMICAL GIFT DONATION.--A certificate
8 application form or certificate renewal application form issued
9 by the board shall include a space, as required by the Uniform
10 Licensing Act, to show whether the applicant is a donor as
11 provided in the Jonathan Spradling Revised Uniform Anatomical
12 Gift Act. The board shall submit a copy of each form for which
13 that space is completed to the motor vehicle division of the
14 taxation and revenue department for inclusion as part of its
15 statewide donor registry pursuant to Section 66-5-10 NMSA
16 1978."

17 SECTION 38. A new section of Chapter 61, Article 29 NMSA
18 1978 is enacted to read:

19 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
20 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
21 or license renewal application form issued by the commission
22 shall include a space, as required by the Uniform Licensing
23 Act, to show whether the applicant is a donor as provided in
24 the Jonathan Spradling Revised Uniform Anatomical Gift Act.
25 The commission shall submit a copy of each form for which that

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1 space is completed to the motor vehicle division of the
2 taxation and revenue department for inclusion as part of its
3 statewide donor registry pursuant to Section 66-5-10 NMSA
4 1978."

5 SECTION 39. A new section of the Real Estate Appraisers
6 Act is enacted to read:

7 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
8 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
9 or license renewal application form issued by the board shall
10 include a space, as required by the Uniform Licensing Act, to
11 show whether the applicant is a donor as provided in the
12 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
13 board shall submit a copy of each form for which that space is
14 completed to the motor vehicle division of the taxation and
15 revenue department for inclusion as part of its statewide donor
16 registry pursuant to Section 66-5-10 NMSA 1978."

17 SECTION 40. A new section of the Social Work Practice
18 Act is enacted to read:

19 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
20 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
21 or license renewal application form issued by the board shall
22 include a space, as required by the Uniform Licensing Act, to
23 show whether the applicant is a donor as provided in the
24 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
25 board shall submit a copy of each form for which that space is

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1 completed to the motor vehicle division of the taxation and
2 revenue department for inclusion as part of its statewide donor
3 registry pursuant to Section 66-5-10 NMSA 1978."

4 SECTION 41. A new section of the Funeral Services Act is
5 enacted to read:

6 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
7 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
8 or license renewal application form issued by the board shall
9 include a space, as required by the Uniform Licensing Act, to
10 show whether the applicant is a donor as provided in the
11 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
12 board shall submit a copy of each form for which that space is
13 completed to the motor vehicle division of the taxation and
14 revenue department for inclusion as part of its statewide donor
15 registry pursuant to Section 66-5-10 NMSA 1978."

16 SECTION 42. A new section of the Utility Operators
17 Certification Act is enacted to read:

18 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
19 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
20 or license renewal application form issued by the department
21 shall include a space, as required by the Uniform Licensing
22 Act, to show whether the applicant is a donor as provided in
23 the Jonathan Spradling Revised Uniform Anatomical Gift Act.
24 The department shall submit a copy of each form for which that
25 space is completed to the motor vehicle division of the

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1 taxation and revenue department for inclusion as part of its
2 statewide donor registry pursuant to Section 66-5-10 NMSA
3 1978."

4 SECTION 43. A new section of the Signed Language
5 Interpreting Practices Act is enacted to read:

6 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
7 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
8 or license renewal application form issued by the board shall
9 include a space, as required by the Uniform Licensing Act, to
10 show whether the applicant is a donor as provided in the
11 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
12 board shall submit a copy of each form for which that space is
13 completed to the motor vehicle division of the taxation and
14 revenue department for inclusion as part of its statewide donor
15 registry pursuant to Section 66-5-10 NMSA 1978."

16 SECTION 44. A new section of the Lactation Care Provider
17 Act is enacted to read:

18 "[NEW MATERIAL] LICENSE APPLICATION AND RENEWAL FORMS--
19 SPACE FOR ANATOMICAL GIFT DONATION.--A license application form
20 or license renewal application form issued by the board shall
21 include a space, as required by the Uniform Licensing Act, to
22 show whether the applicant is a donor as provided in the
23 Jonathan Spradling Revised Uniform Anatomical Gift Act. The
24 board shall submit a copy of each form for which that space is
25 completed to the motor vehicle division of the taxation and

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1 revenue department for inclusion as part of its statewide donor
2 registry pursuant to Section 66-5-10 NMSA 1978."

3 SECTION 45. EFFECTIVE DATE.--The effective date of the
4 provisions of Section 3 of this act is January 1, 2026.

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO BEHAVIORAL HEALTH; ENACTING THE FIREFIGHTER AND EMERGENCY SERVICE PROVIDER PEER SUPPORT ACT; ALLOWING STATE, LOCAL AND REGIONAL PUBLIC FIRE AGENCIES TO CREATE PEER SUPPORT PROGRAMS FOR THEIR EMPLOYEES AND VOLUNTEERS; MAKING PEER SUPPORT SERVICES CONFIDENTIAL; LIMITING LIABILITY FOR THE PROVISION OF PEER SUPPORT SERVICES.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. [NEW MATERIAL] SHORT TITLE.--This act may be cited as the "Firefighter and Emergency Service Provider Peer Support Act".

SECTION 2. [NEW MATERIAL] DEFINITIONS.--As used in the Firefighter and Emergency Service Provider Peer Support Act:

A. "confidential communication" means a written or oral communication between an emergency service provider and a

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1 peer support team member;

2 B. "critical incident stress" means the acute or
3 cumulative psychological stress or trauma that emergency
4 service providers may experience after responding to an event
5 that involves crisis, disaster, trauma or emergency and that
6 results in unusually strong emotional, cognitive, behavioral or
7 physical reactions that may interfere with normal functioning
8 and could lead to posttraumatic stress and other injuries,
9 including:

- 10 (1) physical and emotional illness;
11 (2) failure of usual coping mechanisms;
12 (3) loss of interest in the job or normal life
13 activities;
14 (4) personality changes; and
15 (5) loss of ability to function;

16 C. "emergency service provider" means an employee
17 or volunteer at a state, local or regional public fire agency
18 who provides emergency response services;

19 D. "peer support program" means a program
20 administered by a state, local or regional public fire agency
21 that delivers peer support services to emergency service
22 providers;

23 E. "peer support services" means services provided
24 by a peer support team member that assist emergency service
25 providers who are struggling with behavioral health issues; and

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1 F. "peer support team member" means an emergency
2 service provider who has completed peer support training
3 approved by the state fire marshal's office, works for a public
4 fire agency and provides peer support services to emergency
5 service providers.

6 SECTION 3. [NEW MATERIAL] PEER SUPPORT PROGRAM--PEER
7 SUPPORT TEAM MEMBER TRAINING REQUIREMENTS.--

8 A. Any state, local or regional public fire agency
9 may establish a peer support program. Each program shall have
10 at least one peer support team composed of peer support team
11 members who offer peer support services to emergency service
12 providers.

13 B. Each peer support team member shall complete a
14 training course approved by the state fire marshal's office.
15 The training course shall train peer support team members to
16 provide peer support services for matters that include:

- 17 (1) substance use and substance abuse;
- 18 (2) critical incident stress;
- 19 (3) grief support;
- 20 (4) line of duty deaths;
- 21 (5) serious injury or illness;
- 22 (6) suicidal thoughts; and
- 23 (7) workplace issues.

24 SECTION 4. [NEW MATERIAL] CONFIDENTIALITY OF PEER SUPPORT
25 SERVICES.--

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1 A. All communications between emergency service
2 providers and peer support team members are confidential if
3 they are made while the peer support team member is providing
4 peer support services. An emergency service provider has the
5 right to refuse to disclose a confidential communication in all
6 civil, administrative or arbitration proceedings, whether or
7 not the emergency service provider is a party to the
8 litigation.

9 B. Notwithstanding the provisions of Subsection A
10 of this section, a confidential communication may be disclosed
11 if:

12 (1) a peer support team member is referring an
13 emergency service provider to, or consulting with, another peer
14 support team member;

15 (2) a peer support team member reasonably
16 believes that disclosure is necessary to prevent death,
17 substantial bodily harm or commission of a crime;

18 (3) the disclosure is made pursuant to a court
19 order in a civil proceeding; or

20 (4) the emergency service provider expressly
21 agrees in writing that the confidential communication may be
22 disclosed.

23 C. If a confidential communication is disclosed
24 pursuant to Paragraph (1), (2) or (3) of Subsection B of this
25 section, the peer support team member making the disclosure

1 shall notify the emergency service provider of the disclosure
2 in writing.

3 SECTION 5. [NEW MATERIAL] LIMITED LIABILITY FOR PEER
4 SUPPORT SERVICES PROVIDED BY PEER SUPPORT TEAM MEMBERS.--Except
5 in actions for medical malpractice, a peer support team member
6 who provides peer support services, and the public fire agency
7 that employs the peer support team member, shall not be liable
8 for damages, including personal injury, wrongful death,
9 property damage or other loss related to an act, error or
10 omission in performing peer support services, unless the act,
11 error or omission constitutes a failure to exercise ordinary
12 care; provided that the liability shall be subject to the Tort
13 Claims Act.

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

DISCUSSION DRAFT

AN ACT

RELATING TO HEALTH; ENACTING THE SUPPORTED DECISION-MAKING ACT;
PROVIDING REQUIREMENTS FOR SUPPORTED DECISION-MAKING
AGREEMENTS; PROVIDING DUTIES FOR SUPPORTERS; PROVIDING A
LIMITATION OF LIABILITY; CREATING REPORTING REQUIREMENTS;
CREATING A SUPPORTED DECISION-MAKING PROGRAM WITHIN THE OFFICE
OF GUARDIANSHIP IN THE DEVELOPMENTAL DISABILITIES COUNCIL;
MAKING AN APPROPRIATION.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. [NEW MATERIAL] SHORT TITLE.--This act may be
cited as the "Supported Decision-Making Act".

SECTION 2. [NEW MATERIAL] DEFINITIONS.--As used in the
Supported Decision-Making Act:

A. "adult" means a person who is at least eighteen
years of age;

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1 B. "supported decision-maker" means an adult who
2 seeks to enter, or has entered, into a supported decision-
3 making agreement with one or more supporters pursuant to the
4 Supported Decision-Making Act;

5 C. "supported decision-making agreement" means an
6 agreement entered into between a supported decision-maker and a
7 supporter pursuant to the provisions of the Supported Decision-
8 Making Act; and

9 D. "supporter" means an adult who has entered into
10 a supported decision-making agreement with a supported
11 decision-maker pursuant to the Supported Decision-Making Act.

12 SECTION 3. [NEW MATERIAL] SUPPORTED DECISION-MAKING
13 AGREEMENTS--SCOPE OF AGREEMENTS.--A supported decision-maker
14 may voluntarily, without undue influence or coercion, enter
15 into a supported decision-making agreement with one or more
16 supporters under which the supported decision-maker authorizes
17 the supporter to do any or all of the following:

18 A. provide supported decision-making, including
19 assistance in understanding the options, responsibilities and
20 consequences of the supported decision-maker's life decisions
21 without making those decisions on behalf of the supported
22 decision-maker;

23 B. assist the supported decision-maker in
24 accessing, collecting and obtaining information that is
25 relevant to a given life decision, including medical,

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1 psychological, financial, educational or treatment records,
2 from any person;

3 C. assist the supported decision-maker in
4 understanding the information described in Subsection B of this
5 section; and

6 D. assist the supported decision-maker in
7 communicating the supported decision-maker's decisions to
8 appropriate persons.

9 SECTION 4. [NEW MATERIAL] SUPPORTED DECISION-MAKING
10 AGREEMENT REQUIREMENTS.--

11 A. A supported decision-making agreement may be in
12 any form but shall:

13 (1) be in writing;
14 (2) be dated;
15 (3) be signed voluntarily, without coercion or
16 undue influence, by the supported decision-maker and the
17 supporter;

18 (4) designate a supporter;
19 (5) list the types of decisions with which the
20 supporter is authorized to assist the supported decision-maker;

21 (6) list the types of decisions, if any, with
22 which the supporter is not authorized to assist the supported
23 decision-maker; and

24 (7) contain a consent signed by the supporter
25 indicating the supporter's:

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- 1 (a) relationship to the supported
2 decision-maker;
3 (b) willingness to act as a supporter;
4 and
5 (c) acknowledgment of the duties of a
6 supporter.

7 B. Each party to a supported decision-making
8 agreement shall sign the agreement in the presence of at least
9 two adult witnesses or a notary public.

10 SECTION 5. [NEW MATERIAL] PRESUMPTION OF CAPACITY.--

11 A. All supported decision-makers are presumed to
12 have capacity and to be capable of managing their affairs
13 unless otherwise determined by a court. A diagnosis of mental
14 illness, intellectual disability or developmental disability,
15 of itself, does not void the presumption of capacity.

16 B. The manner in which a supported decision-maker
17 communicates with others is not grounds for determining that
18 the supported decision-maker is incapable of managing the
19 supported decision-maker's own affairs.

20 C. The execution of a supported decision-making
21 agreement may not be used as evidence of capacity or incapacity
22 in any civil or criminal proceeding and does not preclude the
23 ability of the supported decision-maker who has entered into a
24 supported decision-making agreement to act independently of the
25 agreement.

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1 SECTION 6. [NEW MATERIAL] SUPPORTER DUTIES AND
2 AUTHORITY--SUPPORTER PROHIBITIONS.--

- 3 A. A supporter shall:
- 4 (1) act in good faith;
 - 5 (2) act with the care, competence and
6 diligence ordinarily exercised by supporters in similar
7 circumstances;
 - 8 (3) act only within the scope of authority
9 granted in the supported decision-making agreement;
 - 10 (4) avoid self-dealing; and
 - 11 (5) support the will and preference of the
12 supported decision-maker rather than the supporter's opinion of
13 the supported decision-maker's best interests.

- 14 B. A supporter is prohibited from:
- 15 (1) making decisions on behalf of the
16 supported decision-maker;
 - 17 (2) obtaining, without the consent of the
18 supported decision-maker, information that is not reasonably
19 related to matters with which the supporter is authorized to
20 assist pursuant to the supported decision-making agreement; and
 - 21 (3) using, without the consent of the
22 supported decision-maker, information acquired for a purpose
23 other than assisting the supported decision-maker to make a
24 decision under the supported decision-making agreement.

25 SECTION 7. [NEW MATERIAL] SUPPORTER NOT A FIDUCIARY

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1 AGENT.--A supporter is not a fiduciary agent of the supported
2 decision-maker.

3 SECTION 8. [NEW MATERIAL] SUPPORTER DISQUALIFICATIONS.--

4 The following persons are disqualified from acting as a
5 supporter:

6 A. an individual who is the subject of a civil or
7 criminal order prohibiting contact with the supported decision-
8 maker;

9 B. an individual who has been placed on the
10 department of health's employee abuse registry;

11 C. an individual who has been convicted of a crime
12 involving violence or dishonesty within the preceding ten
13 years; and

14 D. an individual who is currently incarcerated.

15 SECTION 9. [NEW MATERIAL] ACCESS TO PERSONAL
16 INFORMATION.--

17 A. If a supporter assists a supported decision-
18 maker in accessing, collecting or obtaining personal
19 information, including financial information, protected health
20 information under the federal Health Insurance Portability and
21 Accountability Act of 1996 or educational records under the
22 federal Family Educational Rights and Privacy Act of 1974, the
23 supporter shall ensure that the information is kept privileged
24 and confidential, as applicable, and is not subject to
25 unauthorized access, use or disclosure.

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1 B. The existence of a supported decision-making
2 agreement does not preclude a supported decision-maker from
3 seeking personal information without the assistance of the
4 supporter.

5 **SECTION 10. [NEW MATERIAL] THIRD PARTY RELIANCE ON**
6 **SUPPORTED DECISION-MAKING AGREEMENT--LIMITATION OF LIABILITY.--**

7 A. A person who receives an original or a copy of a
8 supported decision-making agreement shall rely on the
9 agreement.

10 B. A person is not subject to civil or criminal
11 liability for an act or omission done in good faith and in
12 reliance on a supported decision-making agreement or in
13 complying with or attempting to comply with the provisions of
14 the Supported Decision-Making Act.

15 C. A supporter is not subject to the provisions of
16 this section.

17 **SECTION 11. [NEW MATERIAL] RECOGNITION OF DECISIONS MADE**
18 **WITH ASSISTANCE OF SUPPORTER.--**A decision or request made or
19 communicated with the assistance of a supporter in conformity
20 with the Supported Decision-Making Act shall be recognized for
21 the purposes of any provision of law as the decision or request
22 of the supported decision-maker.

23 **SECTION 12. [NEW MATERIAL] TERM OF SUPPORTED DECISION-**
24 **MAKING AGREEMENT--TERMINATION OR REVOCATION OF AGREEMENT.--**

25 A. Except as provided by Subsection B of this

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1 section, the supported decision-making agreement extends until
2 terminated by either party or by the terms of the agreement.

3 B. The supported decision-making agreement is
4 terminated as to a particular supporter if:

5 (1) the adult protective services division of
6 the aging and long-term services department finds that the
7 supported decision-maker has been abused, neglected or
8 exploited by the supporter;

9 (2) the supporter is the subject of a civil or
10 criminal order prohibiting contact with the supported decision-
11 maker;

12 (3) the supporter has been placed on the
13 department of health's employee abuse registry;

14 (4) the supporter has been convicted of a
15 crime involving violence or dishonesty;

16 (5) the supporter is incarcerated;

17 (6) the supported decision-maker gives notice
18 to the supporter orally, in writing, through an assistive
19 technology device or by any other means or act showing a
20 specific intent to terminate the agreement; or

21 (7) the supporter provides written notice of
22 the supporter's resignation to the supported decision-maker.

23 SECTION 13. [NEW MATERIAL] REPORTING OF SUSPECTED ABUSE,
24 NEGLECT OR EXPLOITATION.--If a person who receives a copy of a
25 supported decision-making agreement or is aware of the

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1 existence of a supported decision-making agreement has cause to
2 believe that the supported decision-maker is being abused,
3 neglected or exploited by the supporter, the person shall
4 report the alleged abuse, neglect or exploitation to the aging
5 and long-term services department's adult protective services
6 division's statewide intake hotline.

7 SECTION 14. [NEW MATERIAL] SUPPORTED DECISION-MAKING
8 PROGRAM--CREATED--PROGRAM DUTIES.--

9 A. The "supported decision-making program" is
10 created within the office of guardianship in the developmental
11 disabilities council.

12 B. The supported decision-making program may:

13 (1) provide information to adults interested
14 in entering into supported decision-making agreements;

15 (2) facilitate adults in forming, executing
16 and terminating supported decision-making agreements;

17 (3) monitor supported decision-making
18 agreements to determine if the agreement meets statutory
19 requirements;

20 (4) provide resources and assistance for a
21 supported decision-maker who believes a supporter is acting
22 outside the scope of the supported decision-making agreement;
23 and

24 (5) provide resources to any individual who is
25 seeking information on reporting suspected abuse, neglect or

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1 exploitation of the supported decision-maker.

2 SECTION 15. APPROPRIATION.--Two hundred eighty-nine
3 thousand dollars (\$289,000) is appropriated from the general
4 fund to the developmental disabilities council for expenditure
5 in fiscal year 2026 to carry out the provisions of the
6 Supported Decision-Making Act and to hire a full-time employee
7 and contract support to create and administer the supported
8 decision-making program in the office of guardianship in the
9 developmental disabilities council. Any unexpended or
10 unencumbered balance remaining at the end of fiscal year 2026
11 shall revert to the general fund.

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO BEHAVIORAL HEALTH; MAKING AN APPROPRIATION TO THE HEALTH CARE AUTHORITY TO PROVIDE FUNDING FOR RESIDENTIAL TREATMENT SERVICES.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. APPROPRIATION.--Eight hundred fifty-nine thousand dollars (\$859,000) is appropriated from the general fund to the health care authority for expenditure in fiscal year 2026 to provide funding to an organization located in Dona Ana county that uses a soteria model to provide long-term residential treatment services for people diagnosed with serious mental illness and psychosis. Any unexpended or unencumbered balance remaining at the end of fiscal year 2026 shall revert to the general fund.

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

MAKING AN APPROPRIATION TO THE HEALTH CARE AUTHORITY TO ENSURE THAT HEALTH CARE PROVIDERS WHO PROVIDE VAGUS NERVE STIMULATION TO MEDICAID RECIPIENTS ARE FULLY REIMBURSED FOR THEIR SERVICES.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. APPROPRIATION.--Three hundred seventy thousand dollars (\$370,000) is appropriated from the general fund to the health care authority for expenditure in fiscal year 2026 to ensure that health care providers who provide vagus nerve stimulation to medicaid recipients are fully reimbursed for their services. Any unexpended or unencumbered balance remaining at the end of fiscal year 2026 shall revert to the general fund.

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO HEALTH CARE; REQUIRING THE SECRETARY OF HEALTH CARE
AUTHORITY TO ENSURE THAT MEDICAID REIMBURSEMENT FOR SERVICES
PROVIDED AT BIRTH CENTERS IS THE SAME AS REIMBURSEMENT FOR
SERVICES PROVIDED AT HOSPITALS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. A new section of the Public Assistance Act is
enacted to read:

"[NEW MATERIAL] **EQUITABLE REIMBURSEMENT FOR SERVICES
PROVIDED AT BIRTH CENTERS.--**

A. For the purposes of this section:

(1) "birth center" means a freestanding birth
center licensed by the state for the primary purpose of
performing low-risk deliveries that is not a hospital, attached
to a hospital or in a hospital and where births are planned to

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1 occur away from the pregnant person's residence following a
2 low-risk pregnancy;

3 (2) "medicaid" means the medical assistance
4 program established pursuant to Title 19 of the federal Social
5 Security Act and regulations issued pursuant to that act; and

6 (3) "medicaid recipient" means a person whom
7 the department has determined to be eligible to receive
8 medicaid-related services.

9 B. The secretary shall adopt rules to ensure that
10 services provided to a medicaid recipient at a birth center are
11 reimbursed at the same rate as equivalent services provided at
12 a hospital."

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

DISCUSSION DRAFT

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO WORKERS' COMPENSATION; INCREASING THE AMOUNT OF MONEY THAT CAN BE ADVANCED BY EMPLOYERS FOR DISCOVERY COSTS; INCREASING THE MAXIMUM AMOUNT OF ATTORNEY FEES THAT CAN BE COLLECTED IN A WORKERS' COMPENSATION CASE.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. Section 52-1-54 NMSA 1978 (being Laws 1987, Chapter 235, Section 24, as amended) is amended to read:

"52-1-54. FEE RESTRICTIONS--APPOINTMENT OF ATTORNEYS BY THE DIRECTOR OR WORKERS' COMPENSATION JUDGE--DISCOVERY COSTS--OFFER OF JUDGMENT--PENALTY FOR VIOLATIONS.--

A. It is unlawful for any person to receive or agree to receive any fees or payment directly or indirectly in connection with any claim for compensation under the Workers' Compensation Act except as provided in this section.

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1 B. In all cases where the jurisdiction of the
2 workers' compensation administration is invoked to approve a
3 settlement of a compensation claim under the Workers'
4 Compensation Act, the director or workers' compensation judge,
5 unless the claimant is represented by an attorney, may in the
6 director's or judge's discretion appoint an attorney to aid the
7 workers' compensation judge in determining whether the
8 settlement should be approved and, in the event of an
9 appointment, a reasonable fee for the services of the attorney
10 shall be fixed by the workers' compensation judge, subject to
11 the limitation of Subsection I of this section.

12 C. In all cases where the jurisdiction of the
13 workers' compensation administration is invoked to approve a
14 settlement of a compensation claim under the Workers'
15 Compensation Act and the claimant is represented by an
16 attorney, the total amount paid or to be paid by the employer
17 in settlement of the claim shall be stated in the settlement
18 papers. The workers' compensation judge shall determine and
19 fix a reasonable fee for the claimant's attorney, taking into
20 account any sum previously paid, and the fee fixed by the
21 workers' compensation judge shall be the limit of the fee
22 received or to be received by the attorney in connection with
23 the claim, subject to the limitation of Subsection I of this
24 section.

25 D. The cost of discovery shall be borne by the

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1 party who requests it. If, however, the claimant requests any
2 discovery, the employer shall advance the cost of paying for
3 discovery up to a limit of [~~three thousand dollars (\$3,000)~~]
4 three thousand five hundred dollars (\$3,500). If the claimant
5 substantially prevails on the claim, as determined by a
6 workers' compensation judge, any discovery cost advanced by the
7 employer shall be paid by that employer. If the claimant does
8 not substantially prevail on the claim, as determined by a
9 workers' compensation judge, the employer shall be reimbursed
10 for discovery costs advanced according to a schedule for
11 reimbursement approved by a workers' compensation judge.

12 E. In all cases where compensation to which any
13 person is entitled under the provisions of the Workers'
14 Compensation Act is refused and the claimant thereafter
15 collects compensation through proceedings before the workers'
16 compensation administration or courts in an amount in excess of
17 the amount offered in writing by an employer five business days
18 or more prior to the informal hearing before the
19 administration, the compensation to be paid the attorney for
20 the claimant shall be fixed by the workers' compensation judge
21 hearing the claim or the courts upon appeal in the amount the
22 workers' compensation judge or courts deem reasonable and
23 proper, subject to the limitation of Subsection I of this
24 section. In determining and fixing a reasonable fee, the
25 workers' compensation judge or courts shall take into

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1 consideration:

2 (1) the sum, if any, offered by the employer:

3 (a) before the worker's attorney was
4 employed;

5 (b) after the attorney's employment but
6 before proceedings were commenced; and

7 (c) in writing five business days or
8 more prior to the informal hearing;

9 (2) the present value of the award made in the
10 worker's favor; and

11 (3) any failure of a party to participate in a
12 good-faith manner in informal claim resolution methods adopted
13 by the director.

14 F. After a recommended resolution has been issued
15 and rejected, but more than ten days before a trial begins, the
16 employer or claimant may serve upon the opposing party an offer
17 to allow a compensation order to be taken against the employer
18 or claimant for the money or property or to the effect
19 specified in the offer, with costs then accrued, subject to the
20 following:

21 (1) if, within ten days after the service of
22 the offer, the opposing party serves written notice that the
23 offer is accepted, either party may then file the offer and
24 notice of acceptance together with proof of service thereof,
25 and thereupon that compensation order may be entered as the

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1 workers' compensation judge may direct. An offer not accepted
2 shall be deemed withdrawn, and evidence thereof is not
3 admissible except in a proceeding to determine costs. If the
4 compensation order finally obtained by the party is not more
5 favorable than the offer, that party shall pay the costs
6 incurred by the opposing party after the making of the offer.
7 The fact that an offer has been made but not accepted does not
8 preclude a subsequent offer;

9 (2) when the liability of one party to another
10 has been determined by a compensation order, but the amount or
11 extent of the liability remains to be determined by further
12 proceedings, the party adjudged liable may make an offer, which
13 shall have the same effect as an offer made before trial if it
14 is served within a reasonable time not less than ten days prior
15 to the commencement of hearings to determine the amount or
16 extent of liability;

17 (3) if the employer's offer was greater than
18 the amount awarded by the compensation order, the employer
19 shall not be liable for the employer's fifty percent share of
20 the attorney fees to be paid the worker's attorney and the
21 worker shall pay one hundred percent of the attorney fees due
22 to the worker's attorney; and

23 (4) if the worker's offer was less than the
24 amount awarded by the compensation order, the employer shall
25 pay one hundred percent of the attorney fees to be paid the

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1 worker's attorney, and the worker shall be relieved from any
2 responsibility for paying any portion of the worker's attorney
3 fees.

4 G. In all actions arising under the provisions of
5 Section 52-1-56 NMSA 1978 where the jurisdiction of the
6 workers' compensation administration is invoked to determine
7 the question whether the claimant's disability has increased or
8 diminished and the claimant is represented by an attorney, the
9 workers' compensation judge or courts upon appeal shall
10 determine and fix a reasonable fee for the services of the
11 claimant's attorney only if the claimant is successful in
12 establishing that the claimant's disability has increased or if
13 the employer is unsuccessful in establishing that the
14 claimant's disability has diminished. The fee when fixed by
15 the workers' compensation judge or courts upon appeal shall be
16 the limit of the fee received or to be received by the attorney
17 for services in the action, subject to the limitation of
18 Subsection I of this section.

19 H. In determining reasonable attorney fees for a
20 claimant, the workers' compensation judge shall consider only
21 those benefits to the worker that the attorney is responsible
22 for securing. The value of future medical benefits shall not
23 be considered in determining attorney fees.

24 I. Attorney fees, including, but not limited to,
25 the costs of paralegal services, legal clerk services and any

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1 other related legal services costs on behalf of a claimant or
2 an employer for a single accidental injury claim, including
3 representation before the workers' compensation administration
4 and the courts on appeal, shall not exceed [~~twenty-two thousand~~
5 ~~five hundred dollars (\$22,500)] thirty thousand dollars
6 (\$30,000) in calendar year 2025. After 2025, the maximum
7 allowable attorney fees shall be adjusted annually by the
8 consumer price index. This limitation applies whether the
9 claimant or employer has one or more attorneys representing the
10 claimant or employer and applies as a cumulative limitation on
11 compensation for all legal services rendered in all proceedings
12 and other matters directly related to a single accidental
13 injury to a claimant. The workers' compensation judge may
14 exceed the maximum amount stated in this subsection in awarding
15 a reasonable attorney fee if the judge finds that a claimant,
16 an insurer or an employer acted in bad faith with regard to
17 handling the injured worker's claim and the injured worker or
18 employer has suffered economic loss as a result. However, in
19 no case shall this additional amount exceed five thousand
20 dollars (\$5,000). As used in this subsection, "bad faith"
21 means conduct by the claimant, insurer or employer in the
22 handling of a claim that amounts to fraud, malice, oppression
23 or willful, wanton or reckless disregard of the rights of the
24 worker or employer. Any determination of bad faith shall be
25 made by the workers' compensation judge through a separate~~

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1 fact-finding proceeding. Notwithstanding the provisions of
2 Subsection J of this section, the party found to have acted in
3 bad faith shall pay one hundred percent of the additional fees
4 awarded for representation of the prevailing party in a bad
5 faith action.

6 J. Except as provided in Paragraphs (3) and (4) of
7 Subsection F of this section, the payment of a claimant's
8 attorney fees determined under this section shall be shared
9 equally by the worker and the employer.

10 K. It is unlawful for any person except a licensed
11 attorney to receive or agree to receive any fee or payment for
12 legal services in connection with any claim for compensation
13 under the Workers' Compensation Act.

14 L. Nothing in this section applies to agents,
15 excluding attorneys, representing employers, insurance carriers
16 or the subsequent injury fund in any matter arising from a
17 claim under the Workers' Compensation Act.

18 M. No attorney fees shall be paid until the claim
19 has been settled or adjudged.

20 N. Every person violating the provisions of this
21 section is guilty of a misdemeanor and upon conviction shall be
22 fined not less than fifty dollars (\$50.00) or more than five
23 hundred dollars (\$500), to which may be added imprisonment in
24 the county jail for a term not exceeding ninety days.

25 O. Nothing in this section shall restrict a

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1 claimant from being represented before the workers'
2 compensation administration by a nonattorney as long as that
3 nonattorney receives no compensation for that representation
4 from the claimant."

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO PUBLIC SCHOOLS; REQUIRING EVERY HIGH SCHOOL TO
INSTALL AN AUTOMATED EXTERNAL DEFIBRILLATOR; REQUIRING ALL HIGH
SCHOOL EMPLOYEES TO BE TRAINED IN THE USE OF AUTOMATED EXTERNAL
DEFIBRILLATORS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. Section 22-33-2 NMSA 1978 (being Laws 2014,
Chapter 50, Section 2) is amended to read:

"22-33-2. DEFINITIONS.--As used in the Emergency
Medication in Schools Act:

A. "albuterol" includes albuterol or another
inhaled bronchodilator, as recommended by the department of
health, for the treatment of respiratory distress;

B. "albuterol aerosol canister" means a portable
drug delivery device packaged with multiple premeasured doses

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1 of albuterol;

2 C. "anaphylaxis" or "anaphylactic reaction" means a
3 sudden, severe and potentially life-threatening whole-body
4 allergic reaction;

5 D. "automated external defibrillator" means a
6 medical device heart monitor and defibrillator that:

7 (1) has received approval of its premarket
8 modification filed pursuant to 21 U.S.C. 360(k), from the
9 United States food and drug administration;

10 (2) is capable of recognizing cardiac arrest
11 that will respond to defibrillation, ventricular fibrillation
12 or rapid ventricular tachycardia and is capable of determining
13 whether defibrillation should be performed; and

14 (3) upon determining that defibrillation
15 should be performed, automatically charges and is capable of
16 delivering an electrical impulse to an individual's heart;

17 ~~[D-]~~ E. "emergency medication" means albuterol or
18 epinephrine;

19 ~~[E-]~~ F. "epinephrine" includes epinephrine or
20 another medication, as recommended by the department of health,
21 used to treat anaphylaxis until the immediate arrival of
22 emergency medical system responders;

23 ~~[F-]~~ G. "epinephrine auto-injector" means a
24 portable, disposable drug delivery device that contains a
25 premeasured single dose of epinephrine;

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1 ~~[G.]~~ H. "governing body" includes a governing body
2 of a private school;

3 ~~[H.]~~ I. "health care practitioner" means a person
4 authorized by the state to prescribe emergency medication;

5 ~~[I.]~~ J. "respiratory distress" includes impaired
6 oxygenation of the blood or impaired ventilation of the
7 respiratory system;

8 ~~[J.]~~ K. "school" means a public school, charter
9 school or private school;

10 ~~[K.]~~ L. "spacer" means a holding chamber that is
11 used to optimize the delivery of albuterol to a person's lungs;

12 ~~[L.]~~ M. "stock supply" means an appropriate
13 quantity of emergency medication, as recommended by the
14 department of health; and

15 ~~[M.]~~ N. "trained personnel" means a school
16 employee, agent or volunteer who has completed epinephrine
17 administration training documented by the school nurse, school
18 principal or school leader and approved by the department of
19 health and who has been designated by the school principal or
20 school leader to administer epinephrine on a voluntary basis
21 outside of the scope of employment."

22 **SECTION 2.** A new section of the Emergency Medication in
23 Schools Act is enacted to read:

24 "[NEW MATERIAL] AUTOMATED EXTERNAL DEFIBRILLATOR REQUIRED
25 IN ALL HIGH SCHOOLS.--

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A. No later than January 1, 2026, every high school in the state shall install an automated external defibrillator. Installed automated external defibrillators shall be maintained and tested according to the manufacturer's operational guidelines.

B. No later than January 1, 2026, the department shall adopt and promulgate rules for the training of high school employees on the use of automated external defibrillators. Each governing body, school district and superintendent shall ensure that an automated external defibrillator training is provided annually to all high school employees. The training course shall be consistent with standards adopted by the American heart association."

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO FAMILY LAW; RECOGNIZING THE RIGHT OF ALLEGED
DOMESTIC ABUSE VICTIMS TO BE REPRESENTED BY AN ATTORNEY IN
LEGAL MATTERS RELATED TO THE DOMESTIC ABUSE OR THE DOMESTIC
ABUSER.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. Section 40-13-2 NMSA 1978 (being Laws 1987,
Chapter 286, Section 2, as amended) is amended to read:

"40-13-2. DEFINITIONS.--As used in the Family Violence
Protection Act:

A. "continuing personal relationship" means a
dating or intimate relationship;

B. "co-parents" means persons who have a child in
common, regardless of whether they have been married or have
lived together at any time;

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~~[bracketed material] = delete~~

1 C. "court" means the district court of the judicial
2 district where an alleged victim of domestic abuse resides or
3 is found;

4 D. "domestic abuse":

5 (1) means an incident of stalking or sexual
6 assault whether committed by a household member or not;

7 (2) means an incident by a household member
8 against another household member consisting of or resulting in:

- 9 (a) physical harm;
10 (b) severe emotional distress;
11 (c) bodily injury or assault;
12 (d) a threat causing imminent fear of
13 bodily injury by any household member;
14 (e) criminal trespass;
15 (f) criminal damage to property;
16 (g) repeatedly driving by a residence or
17 work place;

- 18 (h) telephone harassment;
19 (i) harassment;
20 (j) strangulation;
21 (k) suffocation; or
22 (l) harm or threatened harm to children
23 as set forth in this paragraph; and

24 (3) does not mean the use of force in self-
25 defense or the defense of another;

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1 E. "firearm" means any weapon that will or is
2 designed to or may readily be converted to expel a projectile
3 by the action of an explosion or the frame or receiver of any
4 such weapon;

5 F. "household member" means a spouse, former
6 spouse, parent, present or former stepparent, present or former
7 parent-in-law, grandparent, grandparent-in-law, child,
8 stepchild, grandchild, co-parent of a child or a person with
9 whom the petitioner has had a continuing personal relationship.
10 Cohabitation is not necessary to be deemed a household member
11 for purposes of this section;

12 G. "indigent person" means an individual who,
13 taking into account present income, liquid assets and
14 requirements for basic necessities of life for the individual
15 and the individual's dependents, is unable, without undue
16 hardship, to pay for all or part of the expenses of legal
17 representation;

18 ~~[G.]~~ H. "law enforcement officer" means a public
19 official or public officer vested by law with a duty to
20 maintain public order or to make arrests for crime, whether
21 that duty extends to all crimes or is limited to specific
22 crimes;

23 ~~[H.]~~ I. "mutual order of protection" means an order
24 of protection that includes provisions that protect both
25 parties;

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1 ~~[I.]~~ J. "order of protection" means an injunction
2 or a restraining or other court order granted for the
3 protection of a victim of domestic abuse;

4 ~~[J.]~~ K. "protected party" means a person protected
5 by an order of protection;

6 ~~[K.]~~ L. "restrained party" means a person who is
7 restrained by an order of protection;

8 ~~[L.]~~ M. "strangulation" has the same meaning as set
9 forth in Section 30-3-11 NMSA 1978; and

10 ~~[M.]~~ N. "suffocation" has the same meaning as set
11 forth in Section 30-3-11 NMSA 1978."

12 **SECTION 2.** A new section of the Family Violence
13 Protection Act is enacted to read:

14 "[NEW MATERIAL] RIGHT TO REPRESENTATION.--

15 A. An alleged domestic abuse victim who is an
16 indigent person is entitled to representation by an attorney in
17 all legal proceedings under Chapter 40 NMSA 1978 that are
18 related to the alleged domestic abuse or the alleged domestic
19 abuser. The attorney's services, expenses and court costs
20 shall be provided at public expense for indigent persons.

21 B. When an alleged domestic abuse victim first
22 appears in court, the judge shall advise the alleged victim
23 that the alleged victim has the right to be represented by
24 counsel of the alleged victim's choosing, the right to have an
25 adjournment to confer with counsel and the right to have

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1 counsel assigned by the court in any case in which the alleged
2 victim is financially unable to obtain counsel."

3 SECTION 3. A new section of the Family Violence
4 Prevention Act is enacted to read:

5 "[NEW MATERIAL] DETERMINATION OF INDIGENCY.--

6 A. The court shall determine whether an alleged
7 domestic abuse victim is an indigent person at the alleged
8 victim's first appearance in each legal proceeding related to
9 the alleged domestic abuse or the alleged domestic abuser.

10 B. In determining whether an alleged domestic abuse
11 victim is an indigent person, the court concerned may consider
12 such factors as income, property owned, outstanding obligations
13 and the number and ages of the alleged victim's dependents. In
14 each case, the alleged victim shall, subject to the penalties
15 for perjury, certify in writing or by other record material
16 factors relating to the victim's ability to pay as the court
17 prescribes."

18 SECTION 4. A new section of the Family Violence
19 Prevention Act is enacted to read:

20 "[NEW MATERIAL] CONTRACTUAL SERVICES OF COUNSEL.--To
21 facilitate representation of alleged domestic abuse victims who
22 are indigent persons, the director of the administrative office
23 of the courts may, upon direction of the supreme court with
24 respect to habeas corpus proceedings initiated in the supreme
25 court, or upon request of a district court, enter into

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1 contracts with attorneys designated by those courts whereby the
2 attorney shall undertake to perform the services of assigned
3 counsel in all or any specified portion of the cases
4 originating within the judicial district. All contracts shall
5 be approved by the chief justice of the supreme court, and all
6 payments provided therein shall be made by the supreme court or
7 in the appropriate district court requesting the contract."

8 SECTION 5. A new section of the Family Violence
9 Prevention Act is enacted to read:

10 "[NEW MATERIAL] COUNSEL NOT SUBJECT TO LIABILITY.--
11 Attorneys who are assigned to or contracted with to perform
12 services for alleged domestic abuse victims who are indigent
13 persons shall not be held liable in any civil action respecting
14 the attorney's performance or nonperformance of the services."

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

DISCUSSION DRAFT

AN ACT

RELATING TO LABOR; REQUIRING AT LEAST SEVENTY PERCENT OF
MEDICAID REIMBURSEMENT FOR PERSONAL CARE SERVICES TO BE USED
FOR COMPENSATING DIRECT CARE WORKERS; MAKING AN APPROPRIATION.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. A new section of the Public Assistance Act is
enacted to read:

"NEW MATERIAL MEDICAID REIMBURSEMENT FOR PERSONAL CARE
SERVICES.--

A. For the purposes of this section:

(1) "compensation" means all payments and
benefits provided to direct care workers, including:

(a) salary, wages, overtime pay and
other remunerations;

(b) health, dental, life and disability

underscoring material = new
[bracketed material] = delete

1 insurance;

2 (c) paid leave, retirement benefits and
3 tuition reimbursement; and

4 (d) the employer share of payroll taxes;

5 (2) "direct care worker" means a non-
6 administrative employee of a personal care services provider
7 agency who spends the majority of the employee's work hours
8 providing personal care services;

9 (3) "medicaid" means the medical assistance
10 program established pursuant to Title 19 of the federal act and
11 regulations issued pursuant to that act;

12 (4) "personal care services" means services
13 provided to an individual to assist with the instrumental
14 activities of daily living; and

15 (5) "personal care services provider agency"
16 means an entity that:

17 (a) has entered into a medicaid provider
18 participation agreement with the medical assistance division of
19 the authority and: 1) is contracted with a managed care
20 organization to provide personal care services to medicaid
21 recipients; or 2) provides personal care services to medicaid
22 recipients through fee-for-service arrangements;

23 (b) is reimbursed for personal care
24 services provided to individuals covered by medicaid; and

25 (c) employs direct care workers to

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1 provide personal care services to individuals covered by
2 medicaid.

3 B. A personal care services provider agency that
4 receives medicaid reimbursement for providing personal care
5 services shall use at least seventy percent of the medicaid
6 reimbursement as compensation to direct care workers for
7 furnishing their services.

8 C. Before calculating the minimum amount of
9 medicaid reimbursement that a personal care services provider
10 agency is required to use to compensate direct care workers,
11 the costs of providing training, travel and personal protective
12 equipment to direct care workers shall be deducted from the
13 total amount of medicaid reimbursement that the personal care
14 services provider agency receives."

15 SECTION 2. APPROPRIATION.--Twenty million eight hundred
16 thousand dollars (\$20,800,000) is appropriated from the general
17 fund to the health care authority for expenditure in fiscal
18 year 2026 to increase medicaid reimbursement for personal care
19 services pursuant to Section 1 of this 2025 act. Any
20 unexpended or unencumbered balance remaining at the end of
21 fiscal year 2026 shall revert to the general fund.

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO HIGHER EDUCATION; ENACTING THE GRADUATE BEHAVIORAL HEALTH SCHOLARSHIP ACT TO PROVIDE FREE EDUCATION TO ELIGIBLE GRADUATE STUDENTS WHO ARE STUDYING TO BECOME BEHAVIORAL HEALTH PROFESSIONALS; REQUIRING THE HIGHER EDUCATION DEPARTMENT TO ADMINISTER THE GRADUATE BEHAVIORAL HEALTH SCHOLARSHIP PROGRAM; MAKING AN APPROPRIATION.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. [NEW MATERIAL] SHORT TITLE.--This act may be cited as the "Graduate Behavioral Health Scholarship Act".

SECTION 2. [NEW MATERIAL] DEFINITIONS.--As used in the Graduate Behavioral Health Scholarship Act:

A. "academic year" means any consecutive period of two semesters, three quarters or other comparable units commencing with the fall term each year;

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1 B. "department" means the higher education
2 department;

3 C. "eligible institution" means any graduate-
4 degree-granting institution of higher education that is
5 enumerated in Article 12, Section 11 of the constitution of New
6 Mexico;

7 D. "eligible student" means a person enrolled in a
8 graduate behavioral health degree program at an eligible
9 institution who:

10 (1) has not earned a master's or doctoral
11 degree from a graduate behavioral health degree program at the
12 time the scholarship is awarded;

13 (2) remains in good academic standing as
14 determined by the eligible institution where the eligible
15 student is enrolled;

16 (3) is enrolled as a full-time graduate
17 student, as determined by the eligible institution where the
18 eligible student is enrolled; and

19 (4) has complied with other rules promulgated
20 by the department to carry out the provisions of the Graduate
21 Behavioral Health Scholarship Act;

22 E. "graduate behavioral health degree program"
23 means a program of study intended to result in a master's or
24 doctoral degree in the field of:

25 (1) counseling;

underscored material = new
[bracketed material] = delete

- 1 (2) psychiatric nursing;
- 2 (3) psychology; or
- 3 (4) social work; and

4 F. "scholarship" means the graduate behavioral
5 health scholarship.

6 SECTION 3. [NEW MATERIAL] GRADUATE BEHAVIORAL HEALTH
7 SCHOLARSHIP FUND CREATED.--The "graduate behavioral health
8 scholarship fund" is created as a nonreverting fund in the
9 state treasury, consisting of income from investment of the
10 fund and any specified distributions, appropriations, gifts,
11 grants and donations to the fund. Expenditures from the fund
12 shall be by warrant of the secretary of finance and
13 administration pursuant to vouchers signed by the secretary of
14 higher education or the secretary's authorized representative.

15 SECTION 4. [NEW MATERIAL] SCHOLARSHIP CREATED--
16 ADMINISTRATION.--

17 A. Scholarships shall be awarded to eligible
18 students in an amount not to exceed one hundred percent of
19 tuition and fees after all other state financial aid has been
20 applied.

21 B. The department shall administer the Graduate
22 Behavioral Health Scholarship Act and shall promulgate rules to
23 carry out the provisions of that act.

24 C. An eligible student may only be awarded a
25 scholarship for one graduate behavioral health degree program.

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1 D. Prior to June 1 of each year, based on the
2 amount appropriated by the legislature from the graduate
3 behavioral health scholarship fund and on the projected
4 enrollment of eligible students at eligible institutions, the
5 department shall:

6 (1) determine the total amount of money
7 available for scholarships; and

8 (2) distribute to each eligible institution an
9 amount based on the projected enrollment in graduate behavioral
10 health degree programs at each eligible institution; provided
11 that the amount shall not exceed the remaining balance of the
12 graduate behavioral health scholarship fund.

13 E. Prior to receiving a scholarship, an eligible
14 student shall commit to practice in New Mexico for as many
15 years as the eligible student receives a scholarship. The
16 commitment shall be evidenced by a contract between the
17 eligible student and the department.

18 F. If an eligible student graduates from a graduate
19 behavioral health degree program and fails to fulfill the
20 contractual commitment to practice in New Mexico, the
21 department shall assess a penalty of up to three times the
22 amount of the value of the scholarship awarded to the student,
23 unless the department finds acceptable extenuating
24 circumstances for why the eligible student cannot fulfill the
25 commitment.

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1 SECTION 5. [NEW MATERIAL] DURATION OF SCHOLARSHIP.--

2 A. Each scholarship is for a period of one academic
3 year.

4 B. Scholarships may be provided to an eligible
5 student until the eligible student completes a graduate
6 behavioral health degree program.

7 SECTION 6. [NEW MATERIAL] TERMINATION OF SCHOLARSHIP.--A

8 scholarship is terminated upon the occurrence of:

9 A. withdrawal of the eligible student from the
10 eligible institution;

11 B. failure of the eligible student to achieve
12 satisfactory academic progress set by the eligible institution
13 where the eligible student is enrolled; or

14 C. substantial noncompliance by the eligible
15 student with the Graduate Behavioral Health Scholarship Act or
16 the rules promulgated pursuant to that act.

17 SECTION 7. [NEW MATERIAL] DEPARTMENT RULEMAKING AND
18 REPORTING.--

19 A. The department shall promulgate rules setting
20 forth explicit criteria in accordance with the Graduate
21 Behavioral Health Scholarship Act for:

22 (1) student eligibility; and

23 (2) calculating the total amount of money
24 necessary to pay for scholarships at each eligible institution.

25 B. The department shall report by November 1 of

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1 each year to the legislative finance committee, the legislative
2 health and human services committee and the department of
3 finance and administration on the:

4 (1) status of the graduate behavioral health
5 scholarship fund; and

6 (2) aggregated data for each eligible
7 institution that shows the:

8 (a) number of eligible students who
9 received scholarships in the prior academic year;

10 (b) total number of students enrolled in
11 graduate behavioral health degree programs in the prior
12 academic year; and

13 (c) number of eligible students who
14 graduated with a degree from a graduate behavioral health
15 degree program in the prior academic year.

16 SECTION 8. APPROPRIATION.--

17 A. Three million dollars (\$3,000,000) is
18 appropriated from the general fund to the graduate behavioral
19 health scholarship fund for expenditure in fiscal year 2026 and
20 subsequent fiscal years to:

21 (1) provide scholarships to eligible students;
22 and

23 (2) provide the higher education department
24 with up to one hundred fifty thousand dollars (\$150,000) to
25 administer the fund and make reports required by the Graduate

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1 Behavioral Health Scholarship Act.

2 B. Any unexpended or unencumbered balance remaining
3 at the end of a fiscal year shall not revert to the general
4 fund.

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HOUSE BILL

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

MAKING APPROPRIATIONS TO THE PUBLIC EDUCATION DEPARTMENT TO
SUPPORT MENTAL HEALTH TRAINING AND WELLNESS PROGRAMS IN SCHOOLS
ACROSS THE STATE.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. APPROPRIATION.--

A. The following amounts are appropriated from the
general fund to the public education department for expenditure
in fiscal year 2026:

(1) three hundred thousand dollars (\$300,000)
to partner with an organization that provides trauma-informed
and culture-centered suicide prevention training to school
staff, students and community members; and

(2) one million seven hundred fifty thousand
dollars (\$1,750,000) to support the operation of fourteen

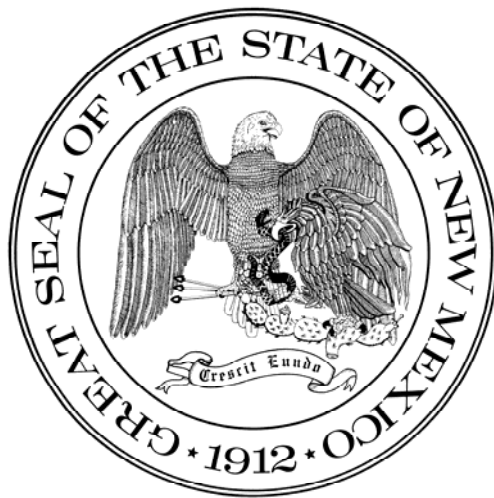
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1 mental health rooms in schools across the state.

2 B. Any unexpended or unencumbered balance remaining
3 at the end of fiscal year 2026 shall revert to the general
4 fund.

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LEGISLATIVE COUNCIL SERVICE
SANTA FE, NEW MEXICO