



BUREAU OF BUSINESS
& ECONOMIC RESEARCH

New Mexico Healthcare Expenditure Data Needs

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LHHSC

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Healthcare Expenditures Database

OVERVIEW

- Report produced January 31, 2025
- Highlights
- Recommendations



LHHSC requires good statistical tools to help inform policy decisions around affordable healthcare

A healthcare expenditure database can fulfill this need

Highlights of our report

New Mexico does compare well to other states with healthcare expenditure databases with the public release of the New Mexico All Payers Claims Database (NM APCD) this past fall.

Staff at the Department of Health (DOH) estimate that the initial claims data might cover about 75% of the market. Exceptions are typical for most of the APCDs we reviewed.

We reviewed 14 states with healthcare expenditures databases and received some surveys from these states that provided in depth information.

APCDs were the core of most states healthcare expenditure databases. Other state healthcare expenditure database are managed through a mix of different models: state agencies, nonprofits, or universities.

We also reviewed healthcare statistics available from public sources.

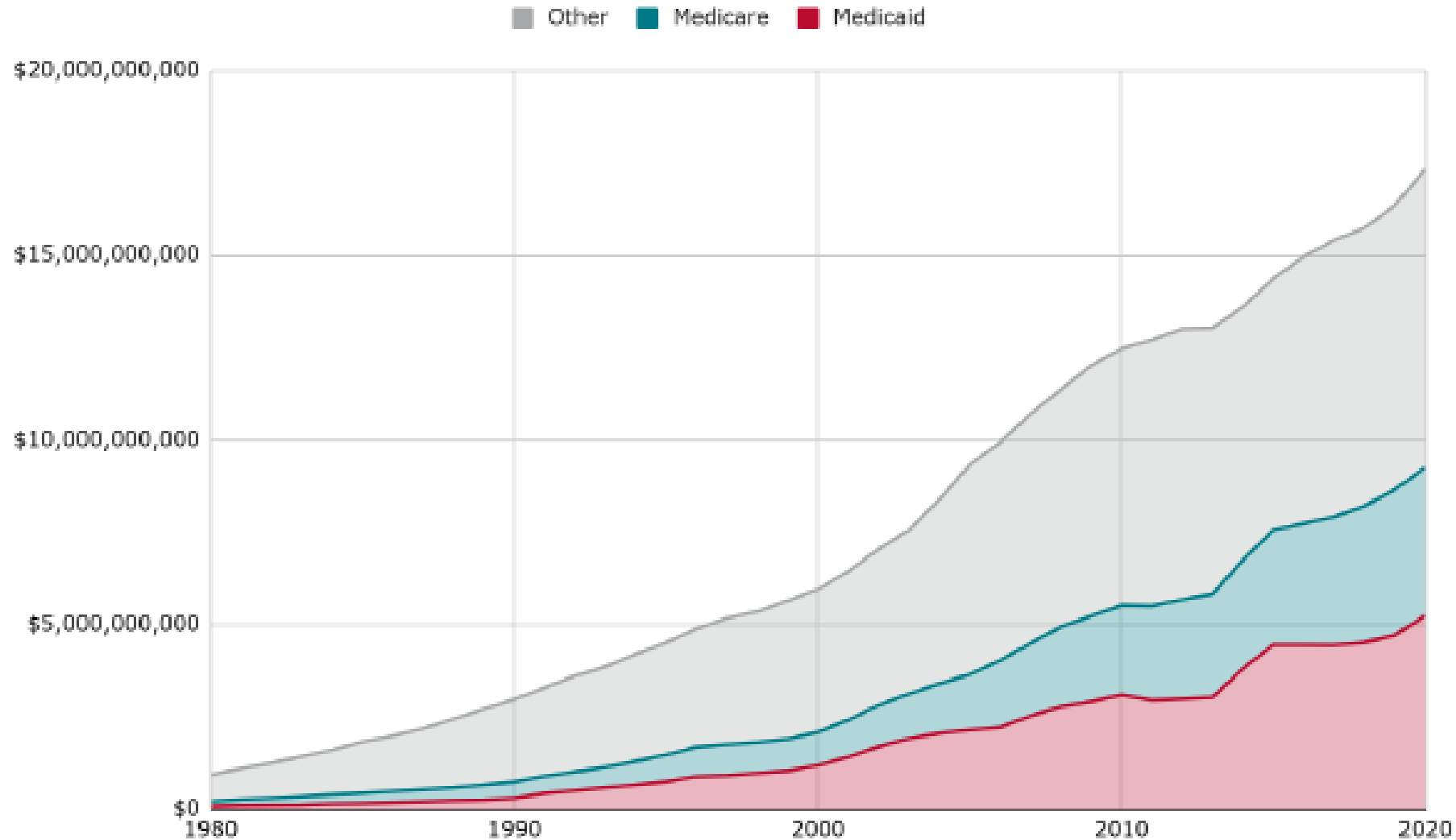
Claims Data	Non-Claims Data
<p>Paid claims for New Mexico residents from commercial/private health insurance plans and the state's Medicaid program. Collected by NM APCD (75% of claims)</p>	<p>Prescription drug spending (less rebates), net costs of private health insurance, and provider payments.</p>
<p>Health care plans <500 individuals or only for a specific disease or condition. Plans under ERISA and programs or facilities serving American Indians. Federal health insurance programs including FEHB, IHS, VHA, and TRICARE.</p>	

What is a healthcare expenditure database?

A collection of health care costs to track total healthcare expenditures

In New Mexico since 1980, personal health care expenditures have grown from \$927 million to over \$17 billion in 2020, with an annual growth rate of 7.6%, faster than inflation on a per capita basis.

Figure 1. Personal Health Care Expenditures by Provider, New Mexico 1980-2020⁶

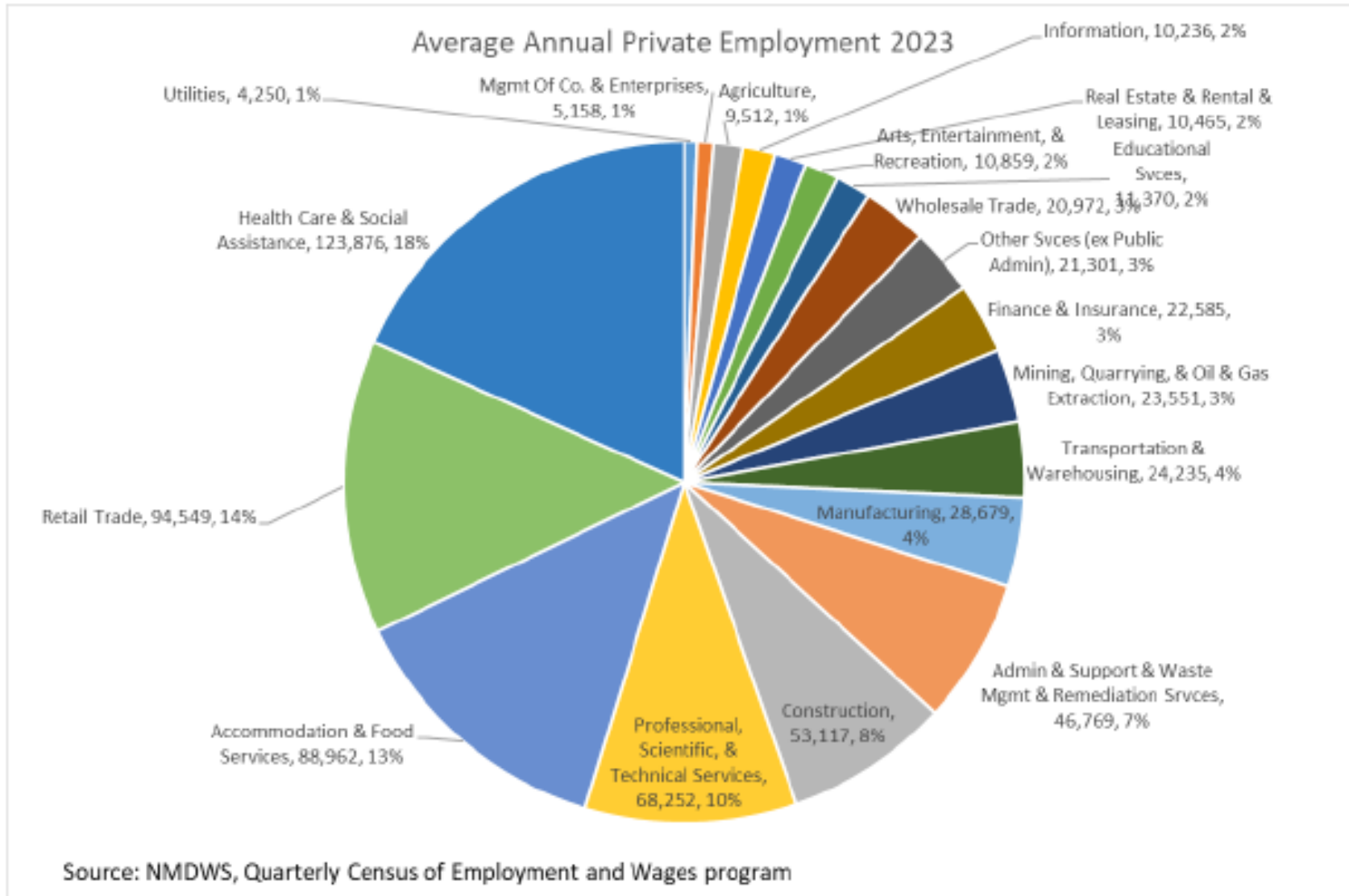


Data Point	1980	2020	Total Growth Factor	CAGR
CPI	82.4	258.8	3.14x	2.90%
NM PHCE	\$927M	\$17.3B	18.68x	7.59%
NM Population	1,303,302	2,117,522	1.62x	1.22%
NM PHCE Per Capita	\$711	\$8,179	11.5x	6.30%
NM Per Capita Income	\$8,649	\$43,635	5.05x	4.13%
PHCE Income Share	8.22%	18.74%		

Implications

In 2023, New Mexico private employment data shows the Health Care & Social Assistance industry sector with average annual employment of 123,876 accounts for about 18 percent of all private employment.

Figure 2. Average Annual Private Employment Industry Sectors, 2023



Recommendations

Continue to provide support for the NM APCD as it is the truly hardest part (collection, laws, time/money) to set up according to other states we interviewed.

Understand that all databases, based on our review, go through growing pains, such as is the data clean, accurate, representative, complete, etc.

UNM BBER and NMSU Arrowhead Center Capabilities

- Collection or survey for non-claims based data
- Provide our expertise in working with the current staff at NM
APCD in developing reports and models
- Provide modeling on healthcare costs where data is difficult to collect.

Thank You!

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NOTE:

Data is submitted to the NM Department of Health by:

- commercial (private) health insurance plans
- state's Medicaid program

The NM APCD also requests and receives

- Medicare paid claims data from the federal Centers for Medicare and Medicaid Services (CMS)

Data Not currently collected:

- Health insurance plans offering only specific disease; accident or injury; hospital or other fixed indemnity; disability; long term care; and vision coverage, or plans covering fewer than 500 individuals are not required to submit data.
- Employer sponsored plans regulated under the federal Employee Retirement Income Security Act (ERISA) of 1974, and governmental or tribal programs or facilities that provide health care services to American Indians and Alaska Natives may submit data voluntarily.
- Data for federal health insurance programs including Federal Employee Health Benefits (FEHB), Indian Health Service (IHS), Veterans Health Administration, and TRICARE is not currently submitted or available to state APCDs.
- Data for Self-Pay, Charity, or Workers' Compensation is not currently submitted.