

LFC Requestor: Scott Sanchez

2026 LEGISLATIVE SESSION
AGENCY BILL ANALYSIS

Section I: General

Chamber: House
Number: 72

Category: Bill
Type: Introduced

Date (of THIS analysis): 01/21/26

Sponsor(s): Andrea Reeb

Short Title: Controlled Substance Minor Distribution

Reviewing Agency: Agency 665 - Department of Health

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Section II: Fiscal Impact

APPROPRIATION (dollars in thousands)

Appropriation Contained		Recurring or Nonrecurring	Fund Affected
FY 26	FY 27		
\$0	\$0	N/A	N/A

REVENUE (dollars in thousands)

Estimated Revenue			Recurring or Nonrecurring	Fund Affected
FY 26	FY 27	FY 28		
\$0	\$0	\$0	N/A	N/A

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY 26	FY 27	FY 28	3 Year Total Cost	Recurring or Non-recurring	Fund Affected
	No fiscal impact					

Section III: Relationship to other legislation

Duplicates: None

Conflicts with: None

Companion to: None

Relates to: HB84 Exposure To Certain Drugs As Child Abuse

Duplicates/Relates to an Appropriation in the General Appropriation Act: None

Section IV: Narrative

1. BILL SUMMARY

a) Synopsis

HB72 amends 30-31-21 NMSA 1978 to increase the penalty for distributing a schedule I or II narcotic drug, such as opioids, cocaine, or methamphetamine, to a minor from a second-degree felony to a first-degree felony.

Is this an amendment or substitution? Yes No

Is there an emergency clause? Yes No

b) Significant Issues

Substance use among youth remains a critical public health challenge in New Mexico, where young people aged 12-17 report the highest rate of illicit drug use in the nation at 11.3%, ranking the state 50th among all states. While recent data shows encouraging declines in youth overdose deaths and emergency department visits since their 2021-2023 peaks, the ongoing crisis demands comprehensive legislative action to protect New Mexico's young people from the devastating impacts of substance misuse.

Overdose Mortality Data among Youth

In New Mexico, total overdose deaths peaked in 2021 at 1,029 overdose deaths including 732 opioid overdose deaths. In 2024, the total number of drug overdose deaths fell to 746 overdose deaths including 474 opioid overdose deaths. From 2020 to 2024, overdose deaths among youth age groups 0-12 and 13-17 years accounted for about 1% of all overdose deaths in New Mexico. Among those aged 13 to 17 years old, overdose deaths peaked in 2023 with 11 deaths before declining 64% to four deaths in 2024. Opioid-involved overdose deaths for those aged 13 to 17 years old peaked in 2022 with 10 deaths and remained steady in 2023 before declining by 80% to 2 deaths in 2024. Overdose deaths among those aged 0-12 years old peaked in 2023 at 6 deaths before declining by

83% to 1 death in 2024 (NMDOH Bureau of Vital Records & Health Statistics [BVRHS] death certificate data analyzed by [NMDOH Substance Use Epidemiology Section](#) (SUES)).

Overdose Morbidity Data among Youth

In New Mexico, drug overdose-related emergency department (ED) visits peaked in 2021 at 2,302 visits and trended downwards through 2024 at 1,655 visits. From 2020 to 2024, approximately 5% of all New Mexican drug overdose-related ED visits have occurred among youth age groups 0-12 years and 13-17 years. Overdose-related ED visits among youth age groups peaked in 2021 at 138 visits but have since decreased to 59 visits in 2024 (NMDOH Syndromic Surveillance eReporting data analyzed by NMDOH Substance Use Epidemiology Section (SUES)).

In New Mexico, drug overdose-related hospitalizations peaked in 2021 at 673 hospitalizations and have decreased to 467 hospitalizations in 2024. From 2020 to 2024, the majority of drug overdose-related hospitalizations occurred among adult age groups 18-64 years and 65+ years. Youth age groups 0-12 years and 13-17 years accounted for about 6% of drug overdose-related hospitalizations from 2020 to 2024. Overdose-related hospitalizations among youth peaked in 2021 at 48 hospitalizations but decreased to 24 hospitalizations in 2024 (NMDOH Hospital Inpatient Discharge Dataset (HIDD) analyzed by NMDOH Substance Use Epidemiology Section (SUES)). It is important to note that there may be overlap between the emergency department visit and inpatient hospitalization data as a person may visit the emergency department and then be admitted to the hospital for further care.

According to data from the U.S. Department of Health and Human Services analyzed by the United Health Foundation, New Mexico ranks 50th among states for illicit drug use among those aged 12-17, with 11.3% of that population reporting using illicit drugs in the past month. ([Explore Illicit Drug Use - Youth in New Mexico | AHR](#))

Economics Burden of Youth Substance Use Disorder (SUD) Treatment

U.S. SUD (Substance Use Disorder) treatment for adolescents/young adults costs \$8,765-\$14,627 per person over 6 months (MOUD (Medication for Opioid Use Disorder) + general care), with total youth opioid poisonings burdening \$230.8 million annually (direct/indirect 2012 dollars), mostly inpatient/ED (Emergency Department) ([Orme et al., 2024](#) and [Patel et al., 2021](#)).

Aggregate U.S. SUD (Substance Use Disorder) costs exceed \$700 billion annually; adolescents incur high lifetime healthcare (\$51,424 mean 2-year post-hospitalization) from polysubstance exposure, amplifying overdose morbidity ([Fardone et al., 2023](#) and [Saunders et al., 2020](#)).

Preventing adolescent drug initiation saves \$7.50-\$11 per \$1 invested; untreated youth SUD (Substance Use Disorder) drives \$118.5 billion direct healthcare (2019), far outweighing prevention costs ([Ashworth et al., 2024](#) and [French et al., 2007](#)).

2. PERFORMANCE IMPLICATIONS

- Does this bill impact the current delivery of NMDOH services or operations?

Yes No

3. FISCAL IMPLICATIONS

- If there is an appropriation, is it included in the Executive Budget Request?
 Yes No N/A
- If there is an appropriation, is it included in the LFC Budget Request?
 Yes No N/A
- Does this bill have a fiscal impact on NMDOH? Yes No

4. ADMINISTRATIVE IMPLICATIONS

Will this bill have an administrative impact on NMDOH? Yes No
None.

5. DUPLICATION, CONFLICT, COMPANIONSHIP OR RELATIONSHIP

HB72 is related to HB84, which would constitute the exposure of a child to Schedule I and II substances as an act of child abuse, and mandate the intake of these children into the CYFD system.

6. TECHNICAL ISSUES

Are there technical issues with the bill? Yes No
None.

7. LEGAL/REGULATORY ISSUES (OTHER SUBSTANTIVE ISSUES)

- Will administrative rules need to be updated or new rules written? Yes No
- Have there been changes in federal/state/local laws and regulations that make this legislation necessary (or unnecessary)? Yes No
- Does this bill conflict with federal grant requirements or associated regulations?
 Yes No
- Are there any legal problems or conflicts with existing laws, regulations, policies, or programs? Yes No

8. DISPARITIES ISSUES

Low-SES (Socioeconomic Status) adolescents face higher substance use risks due to fewer substance-free reinforcers, widening gaps in alcohol/marijuana initiation; Latinx/Native youth in New Mexico bear disproportionate enforcement burdens ([Andrabi et al., 2019](#) and [Floyd et al., 2010](#)).

Treatment gaps for adolescent AUD (Alcohol Use Disorder)/DUD (Drug Use Disorder) widened 2011-2019, hitting underserved/minority youth hardest; AIAN/Black overdose rates rose 39-44% (2019-2020), tied to income inequality ([CDC, 2022](#) and [Lu et al., 2023](#)).

DUDs (Drug Use Disorders) DALYs (Disability-Adjusted Life Years) burden adolescents most in low-SDI (Socio-Demographic Index) regions; New Mexico youths who are also

minorities experience higher drug mortality via access inequities ([NMDOH, 2014](#) and [Bao et al., 2025](#)).

9. HEALTH IMPACT(S)

Adolescent MOUD (Medication for Opioid Use Disorder)/non-MOUD SUD (Substance Use Disorder) care costs \$3,453-\$14,627/6 months, with untreated youth showing elevated ED (Emergency Department)/hospital use; early exposure predicts lifelong disorders, costing \$88,000/adult annually ([CDC, 2024](#) and [Orme et al., 2023](#)).

10. ALTERNATIVES

None

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

If HB72 is not enacted, the penalty for individuals found guilty of distributing schedule I or II opioids, cocaine, or methamphetamine to a minor will continue to be charged with a second-degree felony for their first offense and a first degree felony on a subsequent offense.

12. AMENDMENTS

None.