

LFC Requestor: Carlie Malone

**2026 LEGISLATIVE SESSION
AGENCY BILL ANALYSIS**

Section I: General

Chamber: House

Category: Bill

Number: 97

Type: Introduced

Date (of THIS analysis): 1/20/2026

Sponsor(s): Liz Thomson

Short Title: SHAKEN BABY SYNDROME PREVENTION FUNDING

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		
\$	\$165.0	Nonrecurring	General fund

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
	\$0	\$264	\$0	\$264	Non-recurring	General Fund
	\$0	\$99	\$99	\$198	Recurring	General Fund
Total		\$363	\$99	\$462		

Pay Band 6 (Senior Health Educator) midpoint - \$30.20/hr. x 2080 hours x 1.39 benefits = \$87,314 + \$4,628
 yearly IT Cost + \$3,000 yearly in-state travel + \$4,000 rent = \$98,942

Contracting costs are estimated at \$165,000. \$80,000 to update the training content, \$85,000 to implement the training.

Section III: Relationship to other legislation

Duplicates: None

Conflicts with: None

Companion to: None

Relates to: None

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

Section IV: Narrative

1. BILL SUMMARY

a) Synopsis

House Bill 97 (HB97) would appropriate \$165,000 from the general fund to the Department of Health to update and implement shaken baby syndrome and abusive head trauma training and education programs for new parents and caregivers, and to provide for statewide reporting of incidences of abusive head trauma in fiscal year 2027.

Is this an amendment or substitution? Yes No

Is there an emergency clause? Yes No

b) Significant Issues

According to the American Academy of Pediatrics: “Babies are not yet able to fully support their heavy heads. Because of this, violent and forceful shaking and/or impact causes a baby’s brain to be injured. This is called abusive head trauma. Abusive head trauma, including shaken baby syndrome, is a serious type of head injury.” ([Shaken Baby Syndrome: Protect Your Infant from Abusive Head Trauma - HealthyChildren.org](https://www.healthychildren.org/English/health-issues/conditions/injuries-trauma-abuse/Pages/Shaken-Baby-Syndrome-Protect-Your-Infant-from-Abusive-Head-Trauma.aspx)) The Academy reports there are about 1,300 cases of Abusive Head Trauma reported annually nationwide each year, and it is the third leading cause of death in children under 5. ([Abusive Head Trauma: AAP Offers Diagnosis & Prevention Guidance - HealthyChildren.org](https://www.healthychildren.org/English/health-issues/conditions/injuries-trauma-abuse/Pages/Abusive-Head-Trauma-AAP-Offers-Diagnosis-Prevention-Guidance.aspx))

Data on death from Abusive Head Trauma for children in New Mexico ages 0 to 8 was accessed using the National Fatality Review-Case Reporting System (NFR-CRS). From 2017 and 2022, there were 18 confirmed deaths of children less than 8 years old due to Abusive Head Trauma in New Mexico. 61% of the incidents involved children less than 1 year old.

The Shaken Baby Syndrome Prevention Rule, NMAC 7.30.5, requires all hospitals and freestanding birthing centers to provide training and education to prevent shaken baby syndrome to a parent of every newborn before discharge. In addition, each hospital and freestanding birth center is required to send an annual report to the New Mexico Department of Health Epidemiology and Response Division noting the total number of births and the number of trainings related to Shaken Baby Syndrome prevention.

- In 2023, 98.22% of the total number of reported births received training on Shaken Baby Syndrome by birthing facilities.
- In 2024, 98.35% of the total number of reported births received training on Shaken Baby Syndrome by birthing facilities.

(A weakness in the data is that some facilities reported the number of parents trained rather than the number of trainings.)

Evidence suggests such trainings are effective. During a study conducted in New York State, all hospitals providing maternity care in an eight-county region participated in a program of parent education about violent infant shaking. The incidence of abusive head injuries decreased by 47% during a 5.5 year study period. ([Preventing abusive head trauma among infants and young children: a hospital-based, parent education program - PubMed](https://pubmed.ncbi.nlm.nih.gov/26374730/)).

In 2024, there was a review of health education materials the hospitals were sharing and in 2025 the NMDOH Childhood Injury Prevention Coordinator also reviewed the materials. It was agreed that the materials could be updated, in particular a video shown to parents and caregivers, and that language access could be improved.

HB97 would enable the New Mexico Department of Health to update Shaken Baby Syndrome and Abusive Head Trauma materials and training for hospitals and birthing centers to provide to new parents and caregivers in New Mexico’s hospitals. It would reduce the risk of head injury to children in New Mexico. It may create a broader base of knowledge by improving reporting of incidences of abusive head trauma.

Challenges of measurement

Shaken Baby Syndrome is difficult to diagnose, which is a result of:

- (a) a lack of a centralized reporting system
- (b) signs of maltreatment not being present
- (c) unclear presentation
- (d) acute head trauma not being a single isolated event but one that is part of a pattern of chronic neglect and abuse that ends with severe morbidity and/or mortality.

Pediatric Abusive Head Trauma, which is intentional abusive head injury, is likely underestimated due to the secrecy, stigma and shame associated with child abuse ([Trends in shaken baby syndrome diagnosis codes among young children hospitalized for abuse](#)). Shaken Baby Syndrome, an older term used to describe one specific form of injury (shaking), was replaced by the broader term Abusive Head Trauma by the CDC to provide a more general measure of intentional abusive head injury.

2. PERFORMANCE IMPLICATIONS

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

Yes No

HB97 would require NMDOH to update the training materials on shaken baby syndrome and abusive head trauma, fully implement the training for providers statewide, and provide statewide incidence reporting on abusive head trauma in FY27.

Is this proposal related to the NMDOH Strategic Plan? Yes No

HB97 could help NMDOH update training materials on shaken baby syndrome and improve overall reporting on abusive head trauma and improve access to parents by expanding language access.

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

The cost to NMDOH is \$98,942 for 1.0 FTE Senior Health Educator. HB97 specifies updating and implementing training materials, which require 1.0 FTE to adequately conduct the work. HB97 specifies collaboration with the University of New Mexico (UNM). Contracting to update the training content is estimated to be \$80,000. Contracts for implementing the training of trainers are estimated to be \$85,000.

4. ADMINISTRATIVE IMPLICATIONS

Will this bill have an administrative impact on NMDOH? Yes No

This would require hiring a Senior Health Educator - Pay Band 6 (Senior Health Educator). This position should be located in the Office of Training and Development.

5. DUPLICATION, CONFLICT, COMPANIONSHIP OR RELATIONSHIP

None

6. TECHNICAL ISSUES

Are there technical issues with the bill? Yes No

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

Data on shaken baby syndrome in New Mexico is limited however, from the 2017-2022 fatality data of infants and children under 8 years of age, females and Hispanics were more likely to die from shaken baby syndrome and abusive head trauma combined (New Mexico Hospital Inpatient Discharge Data and the Emergency Department Data, analyzed by NMDOH).

9. HEALTH IMPACT(S)

Several children's lives could be saved every year by the implementation of the training.

10. ALTERNATIVES

None

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

If HB97 is not enacted, then there will not be a \$165,000 appropriation for FY27 to update training material on SBS/AHT fully implement SBS/AHT training and education in hospitals and birthing centers in NM and implement statewide reporting of the incidence of AHT.

12. AMENDMENTS

None