



LFC Requester: Liu

**PUBLIC EDUCATION DEPARTMENT  
BILL ANALYSIS  
2026 REGULAR SESSION**

**SECTION I: GENERAL INFORMATION**

Check all that apply:

Original  Amendment   
Correction  Substitute

Date Prepared: February 2 2026

Bill No: HB256

Committee Referrals: HHHC/HEC

**Agency Name and Code:** PED - 924

Sponsor: Herndon / Gurrola

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Short SCHOOL ATHLETIC

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**SECTION II: FISCAL IMPACT**

(Parenthesis ( ) Indicate Expenditure Decreases)

**APPROPRIATION (dollars in thousands)**

Appropriation		Recurring or Nonrecurring	Fund Affected
FY27	FY28		
None	None	N/A	NFA

**REVENUE (dollars in thousands)**

Estimated Revenue			Recurring or Nonrecurring	Fund Affected
FY27	FY28	FY29		
None	None	None	N/A	NFA

**ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)**

	FY27	FY28	FY29	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
<b>Total</b>	None	None	None	N/A	N/A	NFA

Duplicates/Relates to Appropriation in the General Appropriation Act: None as of 2/2/2026.

## **SECTION III: NARRATIVE**

### **BILL SUMMARY**

**Synopsis:** House Bill 256 (HB256) would amend provisions of the [Emergency Medication in Schools Act](#) to require that schools include cardiac emergency situations occurring at school athletic activities in their emergency response plans. It would also require that an automatic external defibrillator (AED) be clearly marked and easily accessible during school athletic activities and that schools determine multiple appropriate locations for AEDs to be installed or made available.

This bill does not provide an effective date. Laws go into effect 90 days after the adjournment of the Legislature enacting them, unless a later date is specified. If enacted, this bill would become effective May 20, 2026.

### **FISCAL IMPLICATIONS**

This bill does not contain an appropriation.

Most new AEDs range in cost between \$1,200-\$3,000. If each high school were to acquire AEDs, it would cost at least \$271,200, with additional maintenance costs to be incurred in the future. The average AED training and certification would cost at least \$100 per person, resulting in training costs upwards of \$150,000, though the exact cost is dependent upon the number of school personnel identified to respond to sudden cardiac arrest.

### **SIGNIFICANT ISSUES**

HB256 requires that schools determine multiple appropriate locations for AEDs to be installed or made available, meaning that the AED could have a primary location during the school day and another during athletic events. This language also leaves it open for schools to purchase multiple AEDs to be kept in multiple locations or, if they only have one, for it to be moved to be made available during athletic events.

While [statute](#) (Section 24-10C-7 NMSA 1978 of the Cardiac Arrest Response Act) does not extend limited liability protection to schools or school staff, there are protections for “trained targeted responders,” meaning “a person trained in the use of an AED under emergency cardiac care guidelines.” Those persons would be protected from civil liability, so long as they act with reasonable care according to that Act. [House Bill 54](#), signed by the Governor in 2025, required the Public Education Department (PED) to promulgate rule ([6.60.11 NMAC](#)) for the training of school employees on the use of automated external defibrillators in a manner consistent with standards adopted by the American heart association.

In 2020, statistics from the Resuscitation Outcomes Consortium and the Cardiac Arrest Registry to Enhance Survival, revealed cardiac arrest incidents for children in a public place were 12.2 percent, and sport-related sudden cardiac arrests accounted for 39 percent of sudden cardiac arrests for children. A trained responder or team can make a difference in the minutes before emergency medical services arrive.

Laypeople are less likely to initiate cardiopulmonary resuscitation or intervene during emergency episodes due to barriers regarding legal liability, particularly in the educational setting. The scope of immunity law does not prevent lawsuits but does make it easier to defend by protecting certain people for certain activities. New Mexico's Good Samaritan Law ([Section 24-10-3 NMSA 1978](#)), generally protects from civil liability persons who attempt to come to the aid of another by providing care or assistance in good faith at the scene of an emergency, which is defined to mean, "an unexpected occurrence of injury or illness occurring in public or private places to a person that results from motor vehicle accidents or collisions, acts of God, and other accidents and events of a similar nature." Subsection B of Section 22-10C-7 NMSA 1978 of the Cardiac Response Act explicitly extends such protection to good Samaritans who render emergency care with an AED according to the Cardiac Response Act, so long as they act without willful, reckless, or wanton behavior that is the cause of the injury or death.

According to the U.S. Department of Health and Human Services, an estimated [1,700 lives were saved](#) nationally by bystander use of AEDs in 2018.

## **PERFORMANCE IMPLICATIONS**

None.

## **ADMINISTRATIVE IMPLICATIONS**

The bill would require school officials working on the school's cardiac response plan to include plans for the appropriate use of school personnel who are to respond to sudden cardiac arrests or similar life-threatening emergencies that take place during school athletic activities as they develop their plans. This could include training coaches, trainers, or other officials that would be present at athletic activities to be cardiac emergency response personnel.

## **CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP**

Relates to [SB123](#), Defibrillators in Every High School, which proposes an appropriation of \$1.2 million over three years to schools to purchase and maintain AEDs.

## **TECHNICAL ISSUES**

None.

## **OTHER SUBSTANTIVE ISSUES**

In 2023, KOAT news [ran a story](#) of their investigation about the prevalence of AEDs in New Mexico high schools that host sporting events. While the New Mexico Activities Association claimed 97 percent of high schools had an AED available at athletic events as it is a requirement for hosting playoff games in the state, KOAT found as part of its investigation that AEDs at some high school athletic events were not always functional or in an obvious place.

## **ALTERNATIVES**

None.

**WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL**

None.

**AMENDMENTS**

None.