

LFC Requester:

Emily Hilla

AGENCY BILL ANALYSIS - 2026 REGULAR SESSION

WITHIN 24 HOURS OF BILL POSTING, UPLOAD ANALYSIS TO

AgencyAnalysis.nmlegis.gov and email to billanalysis@dfa.nm.gov*(Analysis must be uploaded as a PDF)***SECTION I: GENERAL INFORMATION***{Indicate if analysis is on an original bill, amendment, substitute or a correction of a previous bill}*

Date Prepared: February 6, 2026 Check all that apply:
Bill Number: HB 277 Original Correction
 Amendment Substitute

Sponsor: Rep. N. Chavez **Agency Name and Code** University of New Mexico-952
Short Title: Scope of Practice Advisory Committee **Number:** _____
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SECTION II: FISCAL IMPACT**APPROPRIATION (dollars in thousands)**

Appropriation		Recurring or Nonrecurring	Fund Affected
FY26	FY27		
	\$200.00	non	SGF

REVENUE (dollars in thousands)

Estimated Revenue			Recurring or Nonrecurring	Fund Affected
FY26	FY27	FY28		

(Parenthesis () indicate revenue decreases)

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY26	FY27	FY28	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total						

(Parenthesis () Indicate Expenditure Decreases)

Duplicates/Conflicts with/Companion to/Relates to:
 Duplicates/Relates to Appropriation in the General Appropriation Act

SECTION III: NARRATIVE

BILL SUMMARY

Synopsis:

House Bill 277 creates a Scope of Practice Advisory Committee within the Department of Health to provide a formal review process for proposed changes to the scopes of practice of licensed health care professions in New Mexico. The nine-member committee includes physicians, other licensed health professionals, consumer advocates, an attorney with health-care accountability experience, a University of New Mexico Health Sciences Center faculty member with expertise in evidence review and health economics, and the secretary of health or designee.

The bill is applicable to all healthcare-related licensure categories in NMSA 61. Submissions are discretionary, not mandatory, and must include (1) a clear description of the proposed change; (2) evidence-based support; and (3) anticipated impacts on patient safety, health care access and health care costs. If a submission meets those requirements, the committee must meet within 60 days in an open meeting to address eight areas of focus; shall invite pertinent stakeholders to a public hearing and accept written public input; and shall take a final vote to endorse, modify or reject a proposed change. Within thirty days of the vote, the committee shall develop a report detailing the decision. This report will be posted online and distributed to stakeholders and shall include copies of any documents reviewed during deliberation, a summary of opinions committee members expressed during deliberation and a record of each committee member's vote.

FISCAL IMPLICATIONS

HB 277 appropriates \$200,000 from the general fund to DOH for FY27 to support implementation, with any unexpended balance reverting to the general fund.

SIGNIFICANT ISSUES

Define "team based care." "Team-based care model" and "Team-based" experience is required for two of the NMLC's 3 B(2)(a) licensed health care professional appointees and is a consideration for qualification for the two appointees under 3B(1)(a). These terms can be defined in a variety of ways and should be clarified in the legislation.

Consider imposing minimum requirements for quorum or action. The bill doesn't specify a quorum, which means it would default to a simple majority (5 of 9); or the number of votes necessary for action, which means it would default to a majority of those present (at minimum 3 of 5).

Clarify intent with regard to term limits. The bill is silent as to term limits. The default is no term limits. If term limits are added, language specifying whether at term end a member can continue to serve until a replacement is appointed should also be added.

Clarify intent with regard to tolling of licensing board approval process. The bill as drafted doesn't state that submission for review in any way tolls the approval process of the affected licensing board.

The committee is composed of two physicians, two additional licensed health care professionals, three patient advocates (one must be an attorney) and one UNMHSC faculty member with health economics and analysis experience. Twenty-five of the 26 licensure boards whose proposed changes to scope of practice are potentially subject to the Bill are licensed health care practitioners other than physicians. To assure inclusivity, consider an amendment to restrict the 3 B (2)(a) members to non-physicians.

PERFORMANCE IMPLICATIONS

ADMINISTRATIVE IMPLICATIONS

HB 277 could impose significant administrative burden on licensing board administrators and slow the administrative processes.

As written, the bill allows up to three hearings which could significantly delay a licensing board's pending actions. Section 4 states that the deliberation, stakeholder/public input and vote shall be held in public hearings, but does not state that they will be held at the SAME public hearing. Accordingly, while the deliberation must occur within 60 days of the submission (4 C), and the final report must issue within 30 days of the vote (4 F), there is technically no restriction on the time lapse between the deliberation hearing and the vote.

A licensing board submitting a change in scope for review must anticipate allocating the staff and resources necessary to present exhibits and testimony to meet 4 C (1) through (8). The Bill contemplates a legislator submitting to the Committee a proposed change to scope of practice wholly independently from the licensing board for the applicable licensure group. Accordingly, while a licensing board could typically anticipate finding itself in the position of arguing in favor of a change in scope it has submitted, it also must anticipate allocating the resources to argue against a proposed change in scope that is developed by an advocacy group or some other entity and submitted through a legislator.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

TECHNICAL ISSUES

OTHER SUBSTANTIVE ISSUES

ALTERNATIVES

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

AMENDMENTS