

LFC Requestor: Emily Hilla

2026 LEGISLATIVE SESSION
AGENCY BILL ANALYSIS

Section I: General

Chamber: Senate

Category: Bill

Number: 79

Type: Introduced

Date (of THIS analysis): 1/23/2026

Sponsor(s): Nicole Tobiassen

Short Title: Mosquito Surveillance

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	\$2,000	Nonrecurring. Two million to be expended in 2027 & 2028.	

REVENUE (dollars in thousands)

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

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY 26	FY 27	FY 28	3 Year Total Cost	Recurring or Non- recurring	Fund Affected
Total	\$0	\$1,000	\$1,000	\$2,000	Non- recurring	General

NMDOH: \$411,118/year:

- Public Health Entomologist/Surveillance Lead 0.5 FTE (\$47.70/hr X 1,040 hours X 1.36 benefits=\$67,467)
- Laboratorian for State Laboratory (\$27.45/hr X 2,080 X 1.36 benefits = \$77,651)
- Student mosquito trappers: \$10,000
- Training for Laboratorian: \$15,000
- Laboratory equipment: \$52,000
- Laboratory consumables: \$48,000
- Travel PH Ento: \$10,000
- Training tribes and local governments: \$11,000
- Communication and Health Education: \$50,000
- One Health component: \$40,000
- NMDOH-directed statewide mosquito trapping supplies and travel: \$30,000

Contractual costs for universities and tribal and local vector control efforts: \$588,882/year

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

Senate Bill 79 proposes to provide two million dollars to the New Mexico Department of Health (DOH) to be expended during fiscal years 2027 and 2028 for mosquito surveillance, prevention, and mitigation. Up to 1.5 million dollars can be provided to local governments and state educational institutions to carry out these activities.

Is this an amendment or substitution? Yes No

Is there an emergency clause? Yes No

b) Significant Issues

This bill would improve the health status of New Mexicans by conducting essential surveillance activities to prevent illnesses and deaths due to mosquito-borne diseases. There are preventable [Human Cases and Deaths Due to West Nile Virus in New Mexico](#) every year. A statewide, state-funded Integrated Mosquito Management (IMM) program in New Mexico would address the ongoing threat created by the permanent and expanding presence of mosquito vectors and arboviruses e.g. dengue, chikungunya, west Nile, and zika viruses.

Statewide surveillance would enable targeted, effective mitigation measures to be implemented, reducing the risk of both established and emerging diseases. There are currently 57 species of mosquitos circulating in New Mexico (nmhealth.org/publication/view/guide/986/). The CDC estimates that the primary vector, *Aedes aegypti*, and secondary vector, *Aedes albopictus*, seasonally circulate in the summer months throughout New Mexico. In 2018, *A. aegypti* was first detected in Albuquerque in the Bosque district ([Important Mosquito Species Found in Albuquerque](#)) in 2018. By 2022, it had spread throughout Bernalillo County, to everywhere west of the Sandias ([A New Mosquito is Stalking New Mexico. Is the state ready?](#)).

The *Aedes* mosquito is gaining a foothold in Central and Northern parts of the state due to changes in environmental suitability and the duration of temperatures at which the mosquito life cycle can be sustained ([Temperature Effects on the Basic Reproductive Number \(R0\) Of West Nile Virus, Based On Ecological Parameters: Endemic Vs. New Emergence Regions](#)); furthermore, seasonal monsoon rain variations locally affect circulation of mosquitoes that carry arboviruses. Overwintering is another concern that makes the *Aedes* mosquitoes particularly dangerous to transmitting arboviruses. Not only is the mosquito life-cycle adapted for colder temperature, their breeding grounds, in and around homes, may be protected from extreme temperature fluctuations ([Projections of Aedes and Culex mosquitoes across North and South America - ScienceDirect](#)).

The presence of these mosquitoes that transmit dengue, chikungunya, and Zika viruses have been expanding their range in New Mexico northward, though there is a lack of surveillance that limits the understanding of precisely where and when they circulate. West Nile Virus is present statewide, causing severe illness and deaths each year. St. Louis Encephalitis virus has not been recognized to be circulating in New Mexico in recent years but was recently detected in mosquitoes in Bernalillo County. Arizona has documented local transmission of dengue in two of the previous four years. New Mexico does not have the infrastructure needed to consistently detect viral circulation in the mosquito population nor respond to local transmission of a novel mosquito-borne disease.

The implementation of an IMM program would require coordination among: NMDOH, for surveillance, technical assistance and training to be utilized by local authorities, New Mexico Environment Department (NMED) for regulations regarding “mosquito abatement and control” (NMAC 8.1, 1995), and the New Mexico Department of Agriculture (NMDOA) for pesticide registration and compliance. Cross department coordination would be essential for the success of comprehensive mosquito and arbovirus surveillance and response program. Local authorities and tribes are responsible for conducting mosquito abatement activities ([Mosquito Control Responsibilities](#)).

The Centers for Disease Control and Prevention (CDC), Environmental Protection Agency (EPA), American Mosquito Control Association (AMCA), and the National Association of County and City Health Officials (NAACHO) support mosquito control programs and legislation. The importance of mosquito control in preventing human disease is supported by a vast body of literature, including multiple journals dedicated to various mosquito control topics. Selected citations include:

1. Centers for Disease Control & Prevention. [Guidelines for West Nile Virus Surveillance and Control | West Nile Virus | CDC](#); 2024
 - Arbovirus surveillance provides predictive indices of human infection risk and informs the timing of interventions.
 2. Centers for Disease Control & Prevention. [West Nile Virus and Other Nationally Notifiable Arboviral Diseases — United States, 2023 | MMWR](#)
 - Timely surveillance is necessary to identify areas of arboviral disease risk and guide vector control and prevention messaging.
 3. U.S. Environmental Protection Agency & Centers for Disease Control and Prevention. (2020). **Joint statement on mosquito control in the United States.** <https://www.epa.gov/mosquitocontrol/joint-statement-mosquito-control-united-states>
- American Mosquito Control Association.
- Surveillance is a foundational component of mosquito control programs, and mosquito population monitoring and mapping should drive control decisions.
4. Romero-Weaver, A.L., et al. **Survey in the Southern USA Reveals the Need for Improved Invasive Mosquito Surveillance.** Journal of the American Mosquito Control Association, vol 41, no. 2, 2025, pp77-85.

Gaps in mosquito and arbovirus surveillance compromise early outbreak detection and increase public health risk.

This bill would expand mosquito surveillance, prevention, and mitigation programs, expanding the current focal, limited efforts in place and may enable DOH to build an arbovirus early warning system. Such a system would reflect a one health framework, recognizing the connection between the health of humans, animals, and our shared environment. Given that arboviruses are endemic in intermediate hosts such as birds and horses, testing these animals will be essential to a robust surveillance and response system. These activities would not be limited by local resource availability, reducing health disparities in vector-borne disease prevention and response.

2. PERFORMANCE IMPLICATIONS

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

Yes No

NMDOH's State Public Health Entomologist would coordinate statewide mosquito surveillance, prevention, and mitigation programs carried out by our academic and local government partners. NMDOH will enhance our partner's efforts by conducting mosquito trapping activities in areas where gaps in mosquito surveillance exist as well as in underserved communities. Based on the information gathered from mosquito surveillance, NMDOH will lead outreach and communication efforts to communities statewide through a health equity lens.

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

Passage of SB79 would enhance essential public health services delivered, contributing to DOH's Strategic Priority Area 2 - Improving health outcomes through data-driven decision-making ([FY25-FY27 Strategic Plan Update](#)).

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

Please refer to details outlined in Section II.

4. ADMINISTRATIVE IMPLICATIONS

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

Please refer to details outlined in Section II.

5. DUPLICATION, CONFLICT, COMPANIONSHIP OR RELATIONSHIP

None

6. TECHNICAL ISSUES

Are there technical issues with the bill? Yes No

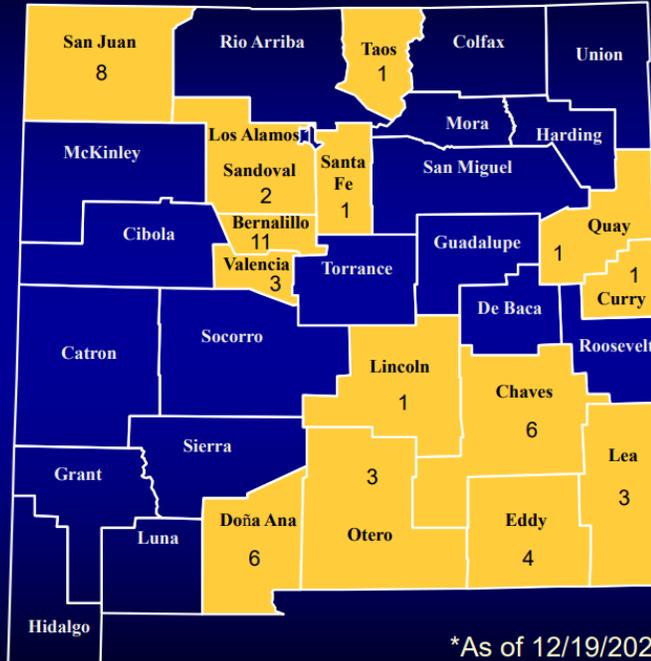
7. LEGAL/REGULATORY ISSUES (OTHER SUBSTANTIVE ISSUES)

- 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

Because current mosquito control efforts are limited and reliant on local funding, existing programs are in relatively more urban and affluent areas of the state. A coordinated, statewide approach will take health equity into account and ensure underserved and rural communities are served ([How mosquito control could exacerbate public health disparities | Cornell Chronicle](#)).

Human WNV Cases by County, New Mexico, 2025*



Neuroinvasive Disease: 43
Non-neuroinvasive Disease: 8

Total = 51 Cases

Plus 7 asymptomatic blood donors



9. HEALTH IMPACT(S)

The programs established by this bill would impact the health status of individuals across the state. By establishing mosquito surveillance programs in all four quadrants of the state, localized and strategic mosquito control efforts will be able to be carried out. Furthermore, localized and strategic outreach and community education would enable the public to protect themselves during peak disease transmission risk for endemic viruses such as West Nile virus. These can be targeted to higher-risk populations such as the elderly and people with compromised immune systems.

Additionally, NMDOH's body of knowledge regarding circulation of emerging diseases includes St. Louis Encephalitis virus. This virus was recently detected in mosquitoes in Bernalillo County, but the extent of viral circulation is not known outside of Bernalillo County due to limited surveillance. Understanding emerging diseases will enable prompt diagnosis and treatment of individuals infected with those viruses.

10. ALTERNATIVES

None

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

If SB79 is not enacted, a statewide mosquito surveillance and control program will not be conducted, and large areas of the state will not have access to prevention and mitigation efforts. In addition, NMDOH's communication regarding the risk of West Nile virus and emerging mosquito-borne viruses will not be localized or strategic due to the lack of comprehensive surveillance data.

12. AMENDMENTS

None