

LFC Requester:

Cally Carswell

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: 1/23/26 **Bill Number:** SB0081 **Original** **Amendment** **Substitute**

Short Title: PRIMARY CARE CAPITAL FUNDING APPROPRIATION

Sponsor: Sen. Padilla

Name and Code Number: HCA 630

Person Writing: Tristin Maroney

Phone: 505-618-0318 **Email:** Tristin.Maroney@hca.nm.gov

SECTION II: FISCAL IMPACT

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Nonrecurring	Fund Affected
FY26	FY27		
0	0		

(Parenthesis () indicate expenditure decreases)

REVENUE (dollars in thousands)

Estimated Revenue			Recurring or Nonrecurring	Fund Affected
FY26	FY27	FY28		
0	0	0		

(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	0	0	0			

(Parenthesis () Indicate Expenditure Decreases)

SECTION III: NARRATIVE

BILL SUMMARY

Synopsis: SB81 appropriates \$25.0 million (GF, non-reverting) to the Department of Finance and Administration (DFA) for SFY2027 and subsequent fiscal years for the NM Finance Authority to carry out the purposes of the Primary Care Capital Funding Act.

FISCAL IMPLICATIONS

There are no direct fiscal impacts to Health Care Authority (HCA). Although SB81 appropriates \$25 million to DFA, HCA does not receive or administer any funds under this bill.

The New Mexico Finance Authority and the Department of Health jointly administer the Primary Care Capital Fund to provide loans to nonprofit primary care clinics serving rural and medically underserved areas. Based on the authorized purposes of the Capital Fund, this appropriation may directly result in increased expenditures for the Health Care Authority associated with the expansion of health care providers, service capacity, and related infrastructure. Any such impacts on HCA programs could also generate additional operational and administrative costs.

SIGNIFICANT ISSUES

There are no significant issues for the Health Care Authority.

PERFORMANCE IMPLICATIONS

The Primary Care Capital Funding is implemented jointly by New Mexico Finance Authority (NMFA) and Department of Health (DOH). The HCA does not administer or oversee this funding therefore, SB81 does not affect the agency's performance measures.

ADMINISTRATIVE IMPLICATIONS

While HCA does not have an administrative role in the Primary Care Capital Funding, coordination may be needed among NMFA, DOH and HCA to ensure alignment with existing state health care initiatives, particularly those related to rural health access and primary care capacity. HCA may need to coordinate with NMFA and DOH to align funding, service expansion, and potential Medicaid participation.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

None

TECHNICAL ISSUES

None

OTHER SUBSTANTIVE ISSUES

SB81 aligns with current priorities of the Primary Care Council, which advises the Health Care Authority on strategies to strengthen and sustain primary care across New Mexico. The Council's priorities include expanding access to primary care services, supporting infrastructure in rural and underserved communities, and strengthening the primary care workforce and delivery system. Capital investments supported through the Primary Care Capital Funding Act may complement these priorities by enabling clinic expansion, modernization, and improved service capacity.

ALTERNATIVES

Consider including language to encourage alignment with other state-supported primary care and rural health investments.

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

Failure to enact SB81 would limit the availability of capital financing for nonprofit primary care clinics in rural and medically underserved areas, potentially constraining infrastructure development and service expansion.

AMENDMENTS

None