



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: January 26 2026

Bill No: SB123

Committee Referrals: SEC/SFC

Agency Name and Code: PED - 924

Sponsor: Campos

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SECTION II: FISCAL IMPACT

(Parenthesis () Indicate Expenditure Decreases)

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Nonrecurring	Fund Affected
FY27	FY28		
\$1,200.0	None	Nonrecurring	General Fund

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
Total	None	None	None	N/A	N/A	NFA

Duplicates/Relates to Appropriation in the General Appropriation Act: None as of 1/26/2026.

SECTION III: NARRATIVE

BILL SUMMARY

Synopsis: Senate Bill 123 (SB123) would appropriate \$1.2 million to the Public Education Department (PED), for expenditure in FY27 – FY29, for grants to public schools with cardiac emergency response plans. Additionally:

- no more than \$400,000 may be expended in a single fiscal year; and
- in FY27, grants may only be made public schools that are not located in an area designated as an urban area by the United States census bureau.

Grants may only be used to purchase, install, test, or maintain automated external defibrillators (AEDs).

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

The bill would appropriate \$1.2 million from the General Fund to the PED to be distributed as grants to public schools from FY27 to FY29. The PED would have a limit of \$400,000 that may be expended from the appropriation in a single year. Any unexpended balance remaining at the end of FY29 shall revert to the General Fund.

SIGNIFICANT ISSUES

No later than the 2027-2028 school year, all schools are required to install and maintain an AED. This bill would only allow for the expenditure of \$400,000 in the FY27 for non-urban public schools. Schools without an AED, that this funding would not reach, would be required to install and maintain an AED for at least the first year without support from this appropriation. Schools would also need to support the required training of school personnel in the use of AEDs from other funding sources.

Pursuant to [Section 22-33-6 NMSA 1978](#), every school in the state, including private and charter schools, is required to develop and implement a cardiac response plan and purchase and maintain an AED. The grant funding given to schools through this appropriation would be designated to purchase, install, test, or maintain AEDs.

[Section 22-33-6 NMSA 1978](#) was enacted by passage of House Bill 54 (2025); it should be noted that that bill contained no appropriation to support the requirement of universal school installation of AEDs, potentially creating an unfunded mandate for all elementary and secondary schools in the state. The appropriation proposed by HB123 would help address this lack of funding. Nevertheless, the limitation on distributions to only non-urban areas for FY27 would mean that public high schools in urban areas would lack the additional funding proposed by the bill. Given the requirement of [Section 22-33-6 NMSA 1978](#) that all public non-charter high schools install AEDs no later than the 2026-2027 school year, some schools in urban areas that lack funding may

be unable to meet those installation requirements of Section 22-33-6 NMSA 1978. In New Mexico, U.S. Census Bureau-designated urban areas include, Albuquerque, Las Cruces, Rio Rancho, Santa Fe, Roswell, Farmington, Hobbs, Clovis, Alamogordo, Carlsbad, and South Valley.

Cost of AEDs. Most new AEDs range in cost between \$1,200-\$3,000. Assuming schools can purchase an AED on the lowest end of the cost range and no school in the state already has an AED, purchasing one AED for each school would cost approximately \$1.34 million. Routine maintenance costs for AEDs are around \$112 on average for the first three years, or approximately \$125,000 to cover maintenance for every school in the state. In 2024, [it was reported](#) that Albuquerque Public Schools (APS) had AEDs in their schools in the past, but they removed them from their schools because many were too old to be functional, and they lacked the sustainable funding necessary to maintain them. Funding from this appropriation could support the purchase of new AEDs in APS, though not in the first year, as Albuquerque is an urban area.

Cardiac arrest incidents. 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. Providing schools the funding needed to install and maintain an AED would allow school personnel identified in the cardiac emergency response plan to respond with the proper equipment.

PERFORMANCE IMPLICATIONS

None.

ADMINISTRATIVE IMPLICATIONS

To distribute grants pursuant to the bill, PED would need to review schools' cardiac emergency response plans to ensure they meet the statutory requirements. PED may consider monitoring the expenditure of grant funding to ensure that it is spent only on the purchase, installation, and maintenance of AEDs.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

None.

TECHNICAL ISSUES

None.

OTHER SUBSTANTIVE ISSUES

None.

ALTERNATIVES

None.

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

None.

AMENDMENTS

None.