



HEALTH CARE
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COURTS, CORRECTIONS & JUSTICE COMMITTEE SENATE BILL 3 UPDATE

NICK BOUKAS BEHAVIORAL HEALTH SERVICES DIVISION, DIRECTOR
INVESTING FOR TOMORROW, DELIVERING TODAY.



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MISSION

We ensure New Mexicans attain their highest level of health by providing whole-person, cost-effective, accessible, and high-quality health care and safety-net services.

VISION

Every New Mexican has access to affordable health care coverage through a coordinated and seamless health care system.

GOALS



IMPROVE Leverage purchasing power and partnerships to create innovative policies and models of comprehensive health care coverage that improve the health and well-being of New Mexicans and the workforce.



SUPPORT Build the best team in state government by supporting employees' continuous growth and wellness.



ADDRESS Achieve health equity by addressing poverty, discrimination, and lack of resources, building a New Mexico where everyone thrives.



PROVIDE Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.

AGENDA

- BHRIA Foundations and Progress
 - Implementation Progress
 - Early Access Funding Update
- Regional Progress and Next Steps
 - Regional Plan Progress
 - Next Steps
- Senate Bill 3, 2026



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BEHAVIORAL HEALTH REFORM
AND INVESTMENT ACT (BHRIA), SB3 2025
FOUNDATIONS & PROGRESS

IMPLEMENTATION PROGRESS

Staffing & Capacity

- Hired five key positions, including a Regional Director and four Regional Coordinators.
- BHSD is in the process of hiring a Behavioral Health Reform and Investment Deputy Director

Regional Planning Support

- December 2025 - Began statewide technical assistance to support regional planning through weekly Project Echo sessions.
- January 2026 - Published a Regional Plan Template to help region's structure priorities over a four-year grant period.

Regional Plan Development

- April 2026 – Region 2 submitted their regional plan.
- May 2026 – AOC completed regional planning workshops and SIM reports for all 13 regions.
- May 2026 – Region 1 submitted their regional plan.
- June 2026 – Region 5, 6, 7, 8, 9, 10, 11, and 13 have submitted their regional plans.

Tribal Engagement

- December 2025: Held Tribal Consultation.
- Ongoing engagement with Nations, Pueblos, and Tribes through consultation, presentations, and collaborative planning to inform BHRIA implementation.



EARLY ACCESS REGIONAL FUNDING UPDATE

- November of 2025, HCA released a Notice of Funding Opportunity making up to \$26.0 million available statewide through Early Access Regional Funding to accelerate implementation of critical behavioral health services and address urgent service gaps.
- Awarded approximately \$24.5 million across all 13 behavioral health regions. Each region was eligible to receive up to \$2.0 million in Early Access funding through June 30, 2027.
- Executed all 13 Early Access Governmental Services Agreements (GSAs), authorizing regions to begin implementation of approved projects.
- Distributed approximately \$13 million in Early Access funding to 7 regions that completed all required contracting and invoicing steps.
- An additional 6 (six) regions have been authorized by HCA to submit their invoice to receive funding. Upon receipt of their invoice, HCA will promptly process payment.
- Early Access projects support implementation of Residential Treatment Continuum of Care, Crisis Continuum of Care, Medication-Assisted Treatment (MAT) for Justice-Involved Individuals, and Prenatal and Perinatal Substance Use Disorder Treatment Services.

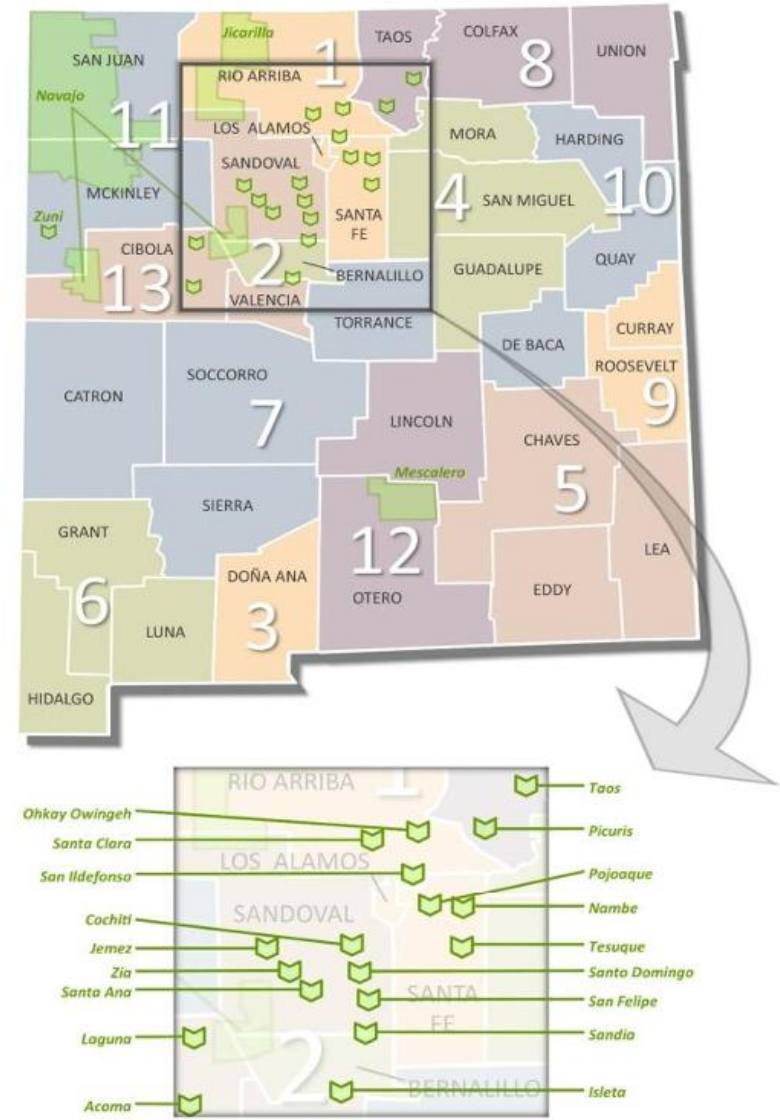


REGIONAL PLAN PROGRESS & NEXT STEPS

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REGIONAL PLAN PROGRESS

- April 10, 2026 - **Region 2** officially submitted their plans to the BHEC; approved by BH Executive Committee but with some requests for additional information.
- May 26, 2026 - **Region 1** officially submitted their plans to the Behavioral Health Executive Committee.
 - July 9, 2026 - **Region 1** approved
- June 30, 2026- **Regions 5, 6, 7, 8, 9, 10, 11, and 13** formally submitted their Final Regional Plans to the BHEC for review.
 - BHSD is facilitating the review process to have reviewers score against the rubric.
- **Regions 3, 4 and 12** requested extensions, and are expected to submit Regional Plans by August 31.



NEXT STEPS

As we move forward with the Behavioral Health Reform & Investment Act, BHSD will continue to:

- Develop criteria for the Behavioral Health Gap Analysis RFP;
- Finalize vendor selection to include behavioral health in the closed loop referral system;
- Further develop structure and support for Nations, Pueblos, and Tribes;
- Continuing statewide technical assistance, contract administration, fiscal oversight, and regional planning support to advance implementation of regional plans;
- Review incoming Logic Model/Evaluation Plans in partnership with the Legislative Finance Committee (LFC);
- Advance 988/911 Interoperability, in partnership with the Department of Finance and Administration (DFA), to improve emergency response systems statewide;
- Continue partnering with stakeholders to streamline the Credentialing & Licensing process.

HCA achieved a major milestone by successfully implementing YES.NM.gov – a universal credentialing system, completed over one year ahead of the June 30, 2027 deadline.



COMMITMENT PROCEDURE CHANGES & DEFINITIONS, SB3 2026

COMMITMENT PROCEDURE CHANGES & DEFINITIONS

Senate Bill 3, 2026: Commitment Procedure Changes & Definitions – amends the Mental Health and Developmental Disabilities Code and the Assisted Outpatient Treatment Act by refining the definitions of “*serious harm to self*” and “*serious harm to others*”.

SB3 2026 also clarifies the role of crisis triage centers as **evaluation facilities** for individuals requiring emergency mental health services.

- “**Serious Harm to Self**” is an individual’s inability to meet their basic needs for nourishment, medical care, shelter, or self-protection, with a likelihood of death, serious bodily injury, or severe physical or mental debilitation if treatment is not provided.
- “**Serious Harm to Others**” applies to individuals who have recently inflicted or attempted to inflict serious bodily harm or created a substantial risk of such harm, with a high likelihood of recurrence.
 - Removes “*extreme destruction of property*” as a criterion for determining harm to others.

- Signed by Governor March 6



BHSD IMPLEMENTATION HIGHLIGHTS

- May 2026 – All state contracted evaluators attended BHSD’s annual training which included new curriculum on Senate Bill 3 (2026).
- BHSD implemented a policy that requires **all sub-contractors** funded under the state contract hold a clinical license, as approved by HCA BHSD.
 - These changes support increasing demands by the courts relevant to House Bill 8 (2025) and Senate Bill 3 (2026).
- The Behavioral Health Services Division (BHSD) and Administrative Office of the Courts (AOC) meet monthly to discuss the impacts of legislation and other administrative impacts related to Competency to Stand Trial (CST) evaluations.
- BHSD regularly meets with Metro Court and the Second Judicial District Court regarding implementation of House Bill 8 (2025) and Senate Bill 3 (2026).
 - Metro court refers all cases with a finding of “not competent” to Second Judicial District Court (SJDC), to address “dangerousness”.
- BHSD continues to monitor operational impacts and identify opportunities for additional guidance and policy development.





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THANK YOU & QUESTIONS

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