

FY27 Appropriation Request Checklist

Agency Name: Health Care Authority

Business Unit: 63000

Reports to Include in PDF Submission

Form #	Title	
<input checked="" type="checkbox"/>	Cvr Ltr	Cover Letter <i>Agency Level</i>
<input checked="" type="checkbox"/>	S-1	Certification <i>Agency Level</i>
<input checked="" type="checkbox"/>	S-2	Organizational Chart <i>Agency/Program Level</i>
<input checked="" type="checkbox"/>	S-8	Financial Summary (BFM) <i>Agency/Program Level</i>
<input checked="" type="checkbox"/>	S-9	Account Code Revenue / Expenditure Report <i>Agency/Program Level</i>
<input checked="" type="checkbox"/>	S-10	Fund Balance Projection <i>Fund Level</i>
<input checked="" type="checkbox"/>	S-13	Detail of Rate Line Items (see instructions) <i>Agency Level</i>
<input checked="" type="checkbox"/>	P-1	Program Narrative <i>Program Level</i>
<input checked="" type="checkbox"/>	R-2	Transfer Report <i>Agency Level</i>
<input checked="" type="checkbox"/>	REV/EXP	Revenue-Expenditure Comparison Report <i>Agency/Program Level</i>
<input checked="" type="checkbox"/>	FFRW	Detail of Federal Funds Revenue Worksheet <i>Agency/Program Level</i>
<input checked="" type="checkbox"/>	EB-1	Expansion Justifications <i>Program Level</i>
<input checked="" type="checkbox"/>	EB-2	Expansion Fiscal Summary <i>Program Level</i>
<input checked="" type="checkbox"/>	EB-3	Expansion Line Item Detail <i>Program Level</i>
<input type="checkbox"/>	LFR	Legislating for Results Expansion Tool <i>Program Level</i>
<input checked="" type="checkbox"/>	E4	Pcode Detail <i>Program Level</i>
<input checked="" type="checkbox"/>	E5	Contract by Pcode <i>Program Level</i>
<input checked="" type="checkbox"/>	SAR	Special Appropriation Request Report <i>Agency Level</i>
<input checked="" type="checkbox"/>	APR	Annual Performance Report <i>Program Level</i>
<input checked="" type="checkbox"/>	Table 2	Table 2 Performance Measure Summary <i>Program Level</i>
<input checked="" type="checkbox"/>	SP	Strategic Plan <i>Agency Level</i>
<input checked="" type="checkbox"/>	ITP	Information Technology Plan <i>Agency Level</i>
<input checked="" type="checkbox"/>	C-1	Base Operating Budget <i>Agency Level</i>
<input checked="" type="checkbox"/>	C-2	IT Request Plan <i>Agency Level</i>
<input checked="" type="checkbox"/>	Perf Audit	Update to LFC Performance Audits (within last 2 years) <i>Agency Level</i>

Documents to Attach in BFM (PDF Optional)

Where to Attach

<input type="checkbox"/>	Board Cert	Board or Commission Budget Certification <i>Form 9900</i>
<input checked="" type="checkbox"/>	E-6B	Leased Passenger-Related Vehicles <i>Form 3300/4300</i>



Michelle Lujan Grisham, Governor
Kari Armijo, Secretary
Alex Castillo Smith, Deputy Secretary
Kathy Slater Huff, Deputy Secretary
Niki Kozlowski, Acting Deputy Secretary
Dana Flannery, Medicaid Director

Wayne Propst, Secretary
Department of Finance and Administration
180 Bataan Memorial Building Santa Fe, New Mexico 87501

and

Charles Sallee, Director
Legislative Finance Committee
325 Don Gaspar Santa Fe, NM 87501

RE: Transmittal of the Health Care Authority (630) FY 2027 Appropriation Request

Dear Secretary, Propst and Director Sallee:

As required by Section 6-3-19 NMSA 1978, and in accordance with the Department of Finance and Administration (DFA) FY 2025 Appropriation Request Instructions, the enclosed documents and electronic copies represent the FY 2027 Appropriation Request for the New Mexico Health Care Authority (HCA). Included are:

- Appropriation Request with all required forms;
- Health Care Authority FY 2025-2026 Strategic Plan;
- Performance Measures Report for FY 2023 and FY 2024, and FY 2025 proposed measures, with certification;
- FY 2025 Information Technology Strategic Plan; and,
- Behavioral Health Collaborative Appropriation Compilation, as required by Section 9-7-6.4 NMSA 1978. The compilation contains the information required by DFA to be submitted in each member agency's Appropriation Request.

Performance measures for FY 2026 have been loaded into the Budget Management and Formulation System. The measures and targets reflect the department's discussions with the DFA and LFC Budget Analysts.

With a budgeted vacancy rate of 0.002%, the Health Care Authority (HCA) HCA's FY27 request is a disciplined, implementation-ready plan to keep New Mexicans covered, fed, and well-served while we execute generational federal changes and prepare for a seamless transition to a new gubernatorial administration on January 1, 2027. The request has three priorities: (1) meeting

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

- 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.
- ACHIEVE** health equity by addressing poverty, discrimination, and lack of resources, building a New Mexico where everyone thrives.
- BUILD** the best team in state government by supporting employees' continuous growth and wellness.
- IMPLEMENT** innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.

federal law and timelines, (2) protecting access to safety net services and healthcare (and health care affordability)—especially in rural communities—and (3) leaving the next administration a well-tuned, high-performing program infrastructure.

This budget request illustrates how the HCA requests to invest state and federal funds enhances benefits, programs, and services provided to the Department’s 843,661 customers (39.6% of New Mexicans). Specifically, HCA’s FY27 request consists of 71.6% federal funding, and only 0.7% of the budget request constitutes new (expansion) requests.

Agency Briefing Sheet		(in the thousands)										
AGENCY	BU	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST	Base Inc.	% Base Inc.	Expansion Inc.	% Exp. Inc.	TOTAL FY27 REQUEST	TOTAL \$ Diff. FY26-27	TOTAL % Diff. FY26-27	
Health Care Authority	63000											
	General Fund	\$1,970,740.4	\$2,066,908.0	\$2,183,044.6	\$116,136.6	5.6%	\$72,141.5	3.5%	\$2,255,186.1	\$188,278.1	9.1%	
	Federal/Other Funds	\$11,292,982.2	\$13,015,354.3	\$12,711,971.3	(\$303,383.0)	-2.3%	\$38,415.5	0.3%	\$12,750,386.8	(\$264,967.5)	-2.0%	
	GRAND TOTAL	\$13,263,722.6	\$15,082,262.3	\$14,895,015.9	(\$187,246.4)	-1.2%	\$110,557.0	0.7%	\$15,005,572.9	\$ (76,689.4)	-0.5%	
	200-PS & EB	\$177,049.2	\$239,491.0	\$246,345.8	\$6,854.8	2.9%	\$27,635.8	11.5%	\$273,981.6	\$34,490.6	14.4%	
	300 - Contracts	\$455,283.4	\$511,310.3	\$593,839.2	\$82,528.9	16.1%	\$16,643.5	3.3%	\$610,482.7	\$99,172.4	19.4%	
	400 - Other	\$12,278,543.0	\$14,017,136.2	\$13,371,406.1	(\$645,730.1)	-4.6%	\$19,277.7	0.1%	\$13,390,683.8	(\$626,452.4)	-4.5%	
	500 - Other Financing Uses	\$234,129.8	\$314,324.8	\$323,424.8	\$9,100.0	2.9%	\$47,000.0	15.0%	\$370,424.8	\$56,100.0	17.8%	
	GRAND TOTAL	\$13,145,005.4	\$15,082,262.3	\$14,535,015.9	(\$547,246.4)	-3.6%	\$110,557.0	0.7%	\$14,645,572.9	\$ (436,689.4)	-2.9%	
	Authorized FTE	2,412.5	2,440.5	2,494.5	54.0	2.2%	302.0	12.4%	2,805.5	356.0	14.6%	
	Budgeted FTE	2161									5.2%	
	# vacant positions as of	112.0406977						\$0.0				

FY27 is the ramp year for most House Resolution 1 (H.R. 1/HR1) changes. The HCA will update policies, eligibility processes, communications, and systems across Medicaid and SNAP, while positioning the Health Care Affordability Fund to respond to upcoming changes affecting Marketplace affordability. This includes preparing for new work/community-engagement requirements and documentation standards and aligning provider payment and oversight to federal requirements. Our plan emphasizes customer-focused implementation along with provider stability and data-driven monitoring to prevent avoidable coverage losses.

Additionally, the HCA will protect access and affordability across Medicaid and safety-net programs. Specifically, it will use every lever available to prevent the avoidable loss of health or food benefits, coordinate with providers and community partners to avoid service gaps, and deploy affordability tools, while improving timeliness and reducing churn. Further, the HCA will maintain momentum on the 988-crisis continuum, continue expanding Certified Community Behavioral Health Clinics, and ensure compliance with recent state laws (e.g., CARA; doula credentialing), so New Mexicans receive timely, high-quality behavioral health services.

Successful implementation of the known (and future) federal changes—and reliable day-to-day service—require right-sized staffing, training, and support. The HCA FY27 budget request aligns authorized positions and invests in foundational infrastructure so staff can serve customers timely and accurately. If the HCA FY27 budget request is unfunded, the risks could include:

Risk Description	Financial Risk	Customer Risk
Federal timelines may be missed or error rates in determinations and reporting may rise.	Federal agencies could impose disallowances or penalties that reduce available funds. The State	Customers may receive delayed or inaccurate eligibility decisions that

Risk Description	Financial Risk	Customer Risk
	may incur expensive corrective actions and potential litigation.	interrupt care and benefits, eroding public trust.
Coverage and access could erode, with the greatest strain in rural and frontier communities. Provider and retailer networks may thin, creating service gaps.	Uncompensated care and emergency-use costs would rise and shift financial burdens to state and local systems, increasing the State’s costs to stabilize hospitals and rebuild networks.	Families could lose health or food benefits for which they are eligible, leaving care and nutrition needs unmet. Those who remain covered may face longer travel times and fewer local options.
Case backlogs would grow as documentation requirements increase. Higher churn would force many households to cycle on and off programs.	Rework would drive up per-case administrative costs and reduce productivity. Elevated error rates could increase the State’s cost share and risk federal compliance.	Gaps in coverage or benefits would become more common, leading to interruptions in medical care and periods of food insecurity.
Operational fragility would intensify through vacancies and system bottlenecks. Routine work could be displaced by urgent responses to outages and incidents.	Unplanned operational and contract costs for emergency fixes would grow, potentially risking expenditures beyond planned budgets.	Service would slow, queues would lengthen, and complaints would rise.

This FY27 budget request turns federal change into an opportunity for innovation. Funding ensures on-time adherence to federal requirements; safeguards access to health and food benefits and sustains provider stability—particularly in rural and frontier communities. This plan establishes the operational footing for a smooth January 1, 2027, transition, so the next administration inherits programs that are compliant and reliable for New Mexicans. These actions carry forward the HCA’s mission of whole-person, accessible, high-quality care and safety-net services and its vision that every New Mexican can obtain affordable coverage through a coordinated, seamless system.

BASE REQUESTS

Each program's request will now be discussed briefly (in ascending order by P-Code):

Developmental Disabilities Supports Division (DDSD) (P519)

Agency Briefing Sheet		(in the thousand)									
AGENCY	BU	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST	Base Inc.	% Base Inc.	Expansion Inc.	% Exp. Inc.	TOTAL FY27 REQUEST	TOTAL \$ Diff. FY26-27	TOTAL % Diff. FY26-27
HCA - Developmental Disabilities Supports Division	63000										
	General Fund	\$250,522.3	\$306,583.2	\$347,310.0	\$40,726.8	13.3%	\$47,000.0	15.3%	\$394,310.0	\$87,726.8	28.6%
	Federal/Other Funds	\$16,577.1	\$18,359.6	\$19,495.9	\$1,136.3	6.2%	\$0.0	0.0%	\$19,495.9	\$1,136.3	6.2%
	GRAND TOTAL	\$267,099.4	\$324,942.8	\$366,805.8	\$41,863.0	12.9%	\$47,000.0	14.5%	\$413,805.8	\$88,863.0	27.3%
	200-PS & EB	\$16,171.7	\$19,752.4	\$20,352.4	\$600.0	3.0%	\$0.0	0.0%	\$20,352.4	\$600.0	3.0%
	300 - Contracts	\$10,868.7	\$12,280.6	\$12,649.0	\$368.4	3.0%	\$0.0	0.0%	\$12,649.0	\$368.4	3.0%
	400 - Other	\$5,929.2	\$8,585.0	\$10,379.6	\$1,794.6	20.9%	\$0.0	0.0%	\$10,379.6	\$1,794.6	20.9%
	500 - Other Financial	\$234,129.8	\$284,324.8	\$323,424.8	\$39,100.0	13.8%	\$47,000.0	16.5%	\$370,424.8	\$86,100.0	30.3%
	GRAND TOTAL	\$267,099.4	\$324,942.8	\$366,805.8	\$41,863.0	12.9%	\$47,000.0	14.5%	\$413,805.8	\$88,863.0	27.3%
	Authorized FTE	195	195	200	5	2.56%	0	0%	200	5	2.56%
	Budgeted FTE	172									
	# vacant positions as of 6/30/25	7									
	Vacancy rate based on budget	4.1%									

The Developmental Disabilities Supports Division (DDSD) administers a statewide system of person-centered home and community-based services (HCBS) and supports people with intellectual and developmental disabilities (IDD). Medicaid HCBS programs promote independence and community integration so that individuals can live the lives they prefer in their communities. DDSD operates three home and community-based Medicaid waiver programs. These include the Developmental Disabilities (DD) Waiver, the Medically Fragile Waiver, and the Mi Via self-directed Waiver.

FY27 Budget Request Narrative

This budget request will support over 8,500 people with IDD. The FY27 budget request will be an increase from FY26 due to bringing over 1,000 new people into services throughout FY26. DDSD is requesting money to support the following:

- Programs and services- 87% of DDSD’s expenditures are used to directly support individuals receiving waiver services.
- Funding to support 200 FTEs that facilitate program oversight, administration and operation.
- Funding to support a true ‘no wait list’ through a continuous allocation process, bringing approximately 1,000 individuals in FY27 into comprehensive waiver services.

DDSD is requesting a \$40,726.8 GF increase from the FY26 request to continue to provide support to individuals receiving waiver services. This increase is due to the additional number of waiver participants being served by the elimination of the 13-year waitlist and new continuous allocation process to ensure a new wait list does not grow. In addition, this request supports increased utilization from individuals receiving services. 87% of DDSD’s expenditures are used to directly support individuals receiving waiver services. The \$323,424.8 GF request in the 500’s will be used to match the federal funds that DDSD receives from Medicaid. The increase in projected expenditures can be summarized by the increase in utilization across the program.

Issues or Accomplishments

- Since 2020, over 3,200 new people will be receiving waiver services. DDS will need funding to support increased population growth and a continuous allocation process for a true ‘no wait list’.
- DDS is working to increase provider capacity to ensure greater access to services and more options for individuals and families.
- DDS is in the process of developing renewal applications for the DD and Medically Fragile Waivers, with both waivers expiring June 30, 2026.
- DDS is working with other NM state partners through a grant from Advancing States to strategize and incorporate best practices in recruiting, retaining, professionalizing and ensuring better compensation for our direct support professional (DSP) workforce, to improve sustainability and quality of DSPs.
- DDS began health and wellness visits in 2023 and visit all waiver recipients in their homes twice per year. To date over 33,000 visits have been completed.
- The Mi Via Waiver will be renewed for another 5 years on October 1, 2025, and will incorporate programmatic changes such as new waiver service of Employer of Record.
- DDS is sunsetting the Supports Waiver and working with stakeholders to ensure a smooth transition to the Developmental Disabilities or Mi Via Waivers.
- DDS is actively engaged in a comprehensive rate study to ensure rates are equitable, sustainable, and reflective of service needs.

Division of Health Improvement (DHI) (P520)

Agency Briefing Sheet		(in the thousands)										
AGENCY	BU	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST	Base Inc.	% Base Inc.	Expansion Inc.	% Exp. Inc.	TOTAL FY27 REQUEST	TOTAL \$ Diff. FY26-27	TOTAL % Diff. FY26-27	
HCA - Division of Health Improvement	63000											
	General Fund	\$10,771.3	\$13,748.3	\$15,191.4	\$1,443.1	10.5%	\$1,100.5	8.0%	\$16,291.9	\$2,543.6	18.5%	
	Federal/Other Funds	\$9,697.2	\$16,436.0	\$17,486.5	\$1,050.5	6.4%	\$1,100.5	6.7%	\$18,587.0	\$2,151.0	13.1%	
	GRAND TOTAL	\$20,468.5	\$30,184.3	\$32,677.9	\$2,493.6	8.3%	\$2,201.0	7.3%	\$34,878.9	\$4,694.6	15.6%	
	200-PS & EB	\$17,037.7	\$25,989.3	\$27,189.3	\$1,200.0	4.6%	\$1,900.0	7.3%	\$29,089.3	\$3,100.0	11.9%	
	300 - Contracts	\$1,752.8	\$1,323.0	\$1,973.0	\$650.0	49.1%	\$1.0	0.1%	\$1,974.0	\$651.0	49.2%	
	400 - Other	\$1,678.0	\$2,872.0	\$3,515.6	\$643.6	22.4%	\$300.0	10.4%	\$3,815.6	\$943.6	32.9%	
	500 - Other Financing Uses	\$0.0	\$0.0	\$0.0	\$0.0	0.0%	\$0.0	0.0%	\$0.0	\$0.0	0.0%	
	GRAND TOTAL	\$20,468.5	\$30,184.3	\$32,677.9	\$2,493.6	8.3%	\$2,201.0	7.3%	\$34,878.9	\$4,694.6	15.6%	
	Authorized FTE	197	197	223	26	13.2%		0.0%	223	26	13.2%	
	Budgeted FTE	0	190	200								
	# vacant positions as of 6/06/24	23										
											Budgeted vacancy rate as of 5/20/24	
											11.5%	

The Division of Health Improvement (DHI) ensures New Mexicans receive safe, high-quality, and person-centered health and community-based services. As the regulatory and quality oversight arm of the HCA, DHI plays a central role in advancing HCA’s mission to provide whole-person, cost-effective, and accessible health care and safety-net services. DHI works in coordination with HCA’s other divisions to align regulatory oversight with broader system transformation efforts and collaborates closely with external state partners—including the Department of Health (DOH), Children, Youth and Families Department (CYFD), Human Services Department (HSD), and Aging and Long-Term Services Department (ALTSD)—to strengthen health outcomes, protect vulnerable populations, and promote service integration across New Mexico’s health system.

We will bring over 9 members of the current CYFD licensing and oversight staff members to our DHI licensing and oversight bureau. We are also requesting 9 additional FTEs to facilitate oversight of an anticipated 60 additional programs to include children's care in inpatient behavioral health, intensive outpatient behavioral health programs, emergency shelters, community based mental health programs, residential treatment centers, wrap around support services, and family peer support services. Bringing these two bureaus together will streamline processes as these clients interact with services as a child and possibly into adulthood.

FY27 Budget Request Narrative

For the FY27 Budget Request, DHI is seeking a total budget of \$32,667.9. (**\$14,995.1 GF, \$17,682.8 FF/OSF**), reflecting a **8.3%** increase compared to the FY26 Operating Budget. (The Expansion request is reflected below.)

General Fund

For FY27, DHI is seeking a General Fund budget of **\$15,191.4** representing an **10.5% or \$1,443.1** increase in General Fund resources.

Federal Funds

For FY27, DHI is seeking a federal budget of **\$17,486.5** representing a **6.4% or \$1,050.5** increase. DHI benefits from several federal grants (Title 18 \$2,424.3 100% FF, Title 19 \$1,391.5, 25% GF/75% FF, Clinical Laboratory Improvement Act \$232.8 100%FF, and Medicaid Waiver Program \$4,106.9 50%GF/50%FF).

Other State Funds

DHI receives Other State Fund revenue for a number of services, including its caregiver criminal history screening program, licensing fees, and other penalties.

Expenditures:

Personal Services and Employee Benefits

The FY27 personnel section requests an increase of **\$1,200.0 or 4.6%**. DHI plans to increase to **223 full-time equivalent (FTE)** (This does not include the FTE expansion request.)

Contractual Services

The budget request for contractual services in FY27 increased from FY26, for a total of **\$650.0 or 49.1%**. This change is attributed to funds covering increases to the DHI contracts.

Other Costs

The budget request for Other Costs in FY27 increased from FY26, for a total of **\$643.6 or 22.4%**. This change is attributed to funds to cover increases in the DHI travel costs, fleet costs, and increase in rent.

Issues or Accomplishments

- Established re-occurring monthly meetings with the Department of Justice to continue our collaborative work in moving IMB substantiated cases of ANE that meet DOJ criteria be brought forward for potential criminal referrals.
- Updated their survey tools to encompass more person-center questions when interviewing the individual of services during the survey process.
- SFY25 was the third year in a row Quality Management Bureau staff maintained their 90% completion rate of surveys within the 20-day time frame.
- In SFY25 DHI completed 6,965 reviews of the individuals who are serviced on the HCBS waivers.
- Improved training and competency of the Life Safety Code surveyor to ensure thorough fire safety building inspections and emergency preparedness for healthcare facility staff and residents.
- Implemented method for healthcare facilities to submit electronic payments for state licenses reducing the time it takes a healthcare facility to renew their license and staff resources.
- Creation and implementation of the IRonline Reporting System for HFLC Complaints Department. This new system is user friendly for both health care facility self reports and submission of 5 day follow up investigations in addition to the filing and tracking of consumer complaints.
- Increase in oversight/surveys of hospitals for compliance with CARA substance exposed newborns in relationship to Plans of Safe Care and reporting to CYFD.
- Increase in oversight/surveys of hospital and birth centers for compliance with the doula credentialing compliance.
- Increase in oversight/surveys for the whistleblower aspects of Healthcare Mergers, Transitions and Acquisitions.
- Greater focus on the criminal background check process with a broader consideration of individuals history before approval.
- Integration of CYFD licensing and oversight of children’s programs for behavioral health support, including but not limited to children’s inpatient BH treatment, adolescent emergency shelters, partial hospital programs or intensive outpatient services, community behavioral health services, residential treatment centers, wrap around support services, and family peer support.

State Health Benefits (SHB) (P521)

Agency Briefing Sheet		(in the thousands)									
AGENCY	BU										
HCA - State Health Benefits	63000	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST	Base Inc.	% Base Inc.	Expansion Inc.	% Exp. Inc.	TOTAL FY27 REQUEST	TOTAL \$ Diff. FY26-27	TOTAL % Diff. FY26-27
General Fund		\$0.0	\$0.0	\$0.0	\$0.0	0.0%	\$0.0	0.0%	\$0.0	\$0.0	0.0%
Federal/Other Funds		\$528,968.0	\$518,353.5	\$660,208.1	\$141,854.6	27.4%	\$0.0	0.0%	\$660,208.1	\$90,775.5	27.4%
GRAND TOTAL		\$528,968.0	\$518,353.5	\$660,208.1	\$141,854.6	27.4%	\$0.0		\$660,208.1	\$90,775.5	27.4%
200-PS & EB		\$962.8	\$0.0	\$0.0	\$0.0	0.0%	\$0.0	0.0%	\$0.0	\$0.0	0.0%
300 - Contracts		\$31,449.0	\$37,355.0	\$38,475.7	\$1,120.7	3.0%	\$0.0	0.0%	\$38,475.7	\$1,120.7	3.0%
400 - Other		\$451,460.2	\$480,998.5	\$621,732.4	\$140,733.9	29.3%	\$0.0	0.0%	\$621,732.4	\$140,733.9	29.3%
500 - Other Financing Uses		\$0.0	\$0.0	\$0.0	\$0.0	0.0%	\$0.0	0.0%	\$0.0	\$0.0	0.0%
GRAND TOTAL		\$483,871.9	\$518,353.5	\$660,208.1	\$141,854.6	27.4%	\$0.0	\$0.0	\$660,208.1	\$ 141,854.6	27.4%
Authorized FTE		9	0	0	0	0	0		0	0	#DIV/0!
Budgeted FTE		5									22.2%
Vacancy rate as of 5/20/24											

State Health Benefits (SHB) administers for individuals enrolled in a State of New Mexico (SoNM) plan:

- Health Benefits Fund (health care coverage including medical, dental, vision, prescription medications);
- Life Insurance Fund;
- Stay Well Health Center;
- Employee Assistance Program;
- Voluntary Supplemental Benefits (accident insurance, cancer insurance, critical illness insurance, and life insurance with accelerated benefits for long-term care) (member pays 100% of the cost); and,

FY27 Budget Request Narrative

SHB provides services and benefits to all State agencies and Local Public Bodies (LPBs) with an average monthly enrollment of 55,586 New Mexicans. There is no direct GF associated with the SHB FY27 request.

The request includes **\$38,475.7** in the 300-Contracts category for increases to successfully administer and oversee SHB plans (e.g. audits, actuarial, and compliance services), a 3% (\$1,120.7) increase. HCA requests **\$621,732.4** in the 400-Other cost category to increase the SHB fund budget to the level of projected claims and enrollment increase costs. This is a 29.3% increase in the 400-Other cost category compared to FY26. Of this \$141,854.5 year-over-year increase, \$49,841.9 (or 35.1%) is due to incorporating FY26 increases authorized by the Legislature in the Compensation Package into the base budget, \$54,188.8 (or 38.2%) is due to projected enrollment increases, and \$37,823.8 (or 26.7%) is due to increases in claims costs. The preliminary medical rate increase is estimated to be 10% based on this budget request, while dental and vision will remain at current rates.

In FY27, SHB will be rolling out new medical and pharmacy contracts, giving the Bureau innovative new tools to manage costs and improve member experience. The Bureau proposes offering a range of new health plans, including options that have more predictable costs as well as options that have higher deductibles but lower premiums and the opportunity to enroll in a Health Savings Account. The Bureau is also seeking a more transparent and cost-effective model of pharmacy benefits. These new contracts will become effective on July 1, 2026, and the HCA will have greater clarity about FY27 premium rate increases after medical and pharmacy vendors have been selected.

Issues or Accomplishments

HCA has successfully implemented several major new initiatives to improve program sustainability, member affordability, and cost effectiveness. On July 1, HCA implemented a Medicare reference-based pricing program for urban hospitals, generating an estimated \$37,500.0 in savings in FY26. HCA also improved SHB's PBM contract terms to \$10,400.0 on prescription drug costs. HCA also implemented updated the new 80/20 contribution schedule in collaboration with the Department of Finance and Administration, as well as the State Employee

Premium Assistance (SEPA) program, which reduces contributions for enrollees between 138-250% FPL. HCA also implemented the rate increases necessary to ensure plan solvency.

Program Support (Excluding Information Technology) (P522)

Agency Briefing Sheet		(in the thousands)										
AGENCY	BU											
HCA- Program Support	63000	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST	Base Inc.	% Base Inc.	Expansion Inc.	% Exp. Inc.	TOTAL FY27REQUEST	\$ Diff. FY26-27	% Diff. FY26-27	
General Fund		\$3,741.30	\$7,988.00	\$11,601.80	\$3,613.80	45.20%	\$1,500.00	0%	\$13,101.80	\$5,780.20	172.36%	
Federal/Other Funds		\$17,024.70	\$23,294.70	\$20,280.90	(\$3,013.80)	-10.30%	\$1,600.00	0%	\$21,880.90	(\$239.90)	98.97%	
GRAND TOTAL		\$20,766.00	\$31,282.70	\$31,882.70	\$600.00	3.90%	\$3,100.00	0%	\$34,982.70	\$5,540.30	17.71%	
200-PS & EB		\$15,860.00	\$24,182.70	\$24,182.70	\$0.00	2.50%	\$0.00	0%	\$24,182.70	\$607.50	102.51%	
300 - Contracts		\$1,338.50	\$3,800.00	\$4,300.00	\$500.00	13.20%	\$3,100.00	0%	\$7,400.00	\$4,832.80	227.18%	
400 - Other		\$3,567.50	\$3,300.00	\$3,400.00	\$100.00	3.00%	\$0.00	0%	\$3,400.00	\$100.00	103.03%	
500 - Other Financing Uses		\$0.00	\$0.00	\$0.00	\$0.00	0.00%	\$0.00	0%	\$0.00	\$0.00	0.00%	
GRAND TOTAL		\$20,766.00	\$31,282.70	\$31,882.70	\$600.00	3.90%	\$3,100.00	0%	\$34,982.70	\$5,540.30	17.71%	
Authorized FTE		214	245	245	0	0.00%	0	0.00%	245	0	0.00%	
Budgeted FTE		198	201									
# vacant positions as of 7/1		28	15									
Budgeted Vacancy Rate		14.10%	7.50%									

The HCA delivers essential services and benefits to New Mexicans through a range of programs, including Medicaid, SNAP, TANF, DD waiver programs, the State Marketplace Affordability Program, Small Business Premium Relief, the Health Coverage Protection Program, and State Health Benefits, as well as oversight for licensed healthcare facilities. The Program Support Division plays a pivotal role in serving both HCA customers and staff, providing comprehensive legal, operational, compliance, human resources, and fiscal review and oversight of the state's largest budget allocation of \$14,216,783.6. With a dedicated workforce of 2,425.5 FTE, Program Support diligently administers direct services provided by the HCA while also offering indirect support to ensure seamless operational functionality throughout the department.

Information Technology Division (ITD) (P522)

Agency Briefing Sheet		(in the thousands)										
AGENCY	BU											
HCA- ITD	63000	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST	Base Inc.	% Base Inc.	Expansion Inc.	% Exp. Inc.	TOTAL FY27 REQUEST	TOTAL \$ Diff. FY26-27	TOTAL % Diff. FY26-27	
General Fund		\$17,102.80	\$29,307.00	\$44,137.98	\$14,830.98	50.61%	\$1,932.90	\$0.00	\$46,070.88	\$16,763.88	57.20%	
Federal/Other Funds		\$37,661.20	\$56,161.00	\$52,279.52	(\$3,881.48)	-6.91%	\$5,624.50	\$0.00	\$57,904.02	\$1,743.02	3.10%	
GRAND TOTAL		\$54,763.90	\$85,468.00	\$96,417.50	\$10,949.50	12.81%	\$7,557.40	\$0.00	\$103,974.90	\$18,506.90	21.65%	
200-PS & EB		\$7,192.10	\$12,720.00	\$13,407.90	\$687.90	5.41%	\$0.00	\$0.00	\$13,407.90	\$687.90	5.41%	
300 - Contracts		\$32,333.50	\$54,240.00	\$61,660.20	\$7,420.20	13.68%	\$0.00	\$0.00	\$61,660.20	\$7,420.20	13.68%	
400 - Other		\$15,238.30	\$18,508.00	\$21,349.40	\$2,841.40	15.35%	\$7,557.40	\$0.00	\$28,906.80	\$10,398.80	56.19%	
500 - Other Financing Uses		\$0.00	\$0.00	\$0.00	\$0.00	0.00%	\$0.00	\$0.00	\$0.00	\$0.00	0.00%	
GRAND TOTAL		\$54,763.90	\$85,468.00	\$96,417.50	\$10,949.50	12.81%	\$7,557.40	\$0.00	\$103,974.90	\$18,506.90	21.65%	
Authorized FTE		89	100	100	0	0.00%	0	0.00%	100	0	0.00%	
Budgeted FTE		0	95									
# vacant positions as of 7/1/25			25								26.30%	

ITD implements innovative technology and data-driven decision-making capabilities to provide unparalleled, convenient access to services and information. ITD provides services including, but limited to systems services, software services, customer innovations, information technology security, data analytics, and business operations to provide HCA customers, partners, and staff unparalleled and convenient access to services and information.

FY27 Budget Request Narrative

ITD is requesting an increase of \$18,506.9 million, this is a 57.2% general fund increase, to support budgetary needs to support contractual obligations for ASPEN (integrated eligibility), the move of all MMISR module to maintenance and operations (Unified Portal, System Integration, Data Services, Enterprise Contact Management, Provider Enrollment, System Integration Platform, Turquoise Claims) and Child Support needs. These services will allow HCA to operate and continue to serve New Mexicans.

Issues or Accomplishments

- Ensuring critical applications are flexible enough to adapt to changes in business processes quickly and cost effectively while guaranteeing security of IT assets and data in an evolving threat landscape with minimal staff and tools.
- Successfully worked with the State Personnel Office and created six new IT Data Analytics job classifications, many of which have been filled.
- Continue work on the improvement of customer service, operational excellence, and employee experience and performance.
- Four MMISR modules went live (System Integration Platform, Data Services solution, Unified Portal, and Provider Enrollment) in FY25.
- MMISR project worked within a multi-vendor environment and is positioned for the Turquoise Claims module and more data dashboards to go-live during FY26.
- Completed the annual security and penetration testing. Improved the department's cybersecurity risk by decommissioning end-of-life assets and improved the Ivanti Overall Risk Score by 165 points to 727 points.
- Network infrastructure upgrades and modifications were implemented as part of a multiyear rearchitected project of HCA's infrastructure.
- Migrated 16 applications from DOH environment to HCA environment as part of the HCA transition.
- Multiple enhancements to HCA's integrated eligibility system (ASPEN).

Child Support Services Division (CSSD) (P523)

Agency Briefing Sheet		(in the thousands)										
AGENCY	BU											
HCA - Child Support Services Division	63000	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST	Base Inc.	% Base Inc.	Expansion Inc.	% Exp. Inc.	TOTAL FY27 REQUEST	TOTAL \$ Diff. FY26-27	TOTAL % Diff. FY26-27	
		General Fund	\$13,156.4	\$14,328.1	\$15,470.7	\$1,142.6	8.0%	\$0.0	0.0%	\$15,470.7	\$1,142.6	8.0%
		Federal/Other Funds	\$31,350.5	\$34,727.4	\$34,436.2	(\$291.2)	-0.8%	\$0.0	0.0%	\$34,436.2	(\$291.2)	-0.8%
		GRAND TOTAL	\$44,506.9	\$49,055.5	\$49,906.9	\$851.4	1.7%	\$0.0	0.0%	\$49,906.9	\$851.4	1.7%
		200-PS & EB	\$22,126.5	\$33,242.1	\$34,093.5	\$851.4	2.6%	\$0.0	0.0%	\$34,093.5	\$851.4	2.6%
		300 - Contracts	\$9,622.3	\$10,623.2	\$10,623.2	\$0.0	0.0%	\$0.0	0.0%	\$10,623.2	\$0.0	0.0%
		400 - Other	\$4,391.6	\$5,190.2	\$5,190.2	\$0.0	0.0%	\$0.0	0.0%	\$5,190.2	\$0.0	0.0%
		500 - Other Financing Uses	\$0.0	\$0.0	\$0.0	\$0.0	0.0%	\$0.0	0.0%	\$0.0	\$0.0	0.0%
		GRAND TOTAL	\$36,140.4	\$49,055.5	\$49,906.9	\$851.4	1.7%	\$0.0	0.0%	\$49,906.8	\$ 851.4	1.7%
		Authorized FTE	340	340	340	0	0%	0	0%	340	0	0.0%
		Budgeted FTE		300	300							
		# vacant positions as of 6/10/24		-1	11						3.6%	

The mission of the Child Support Services Division (CSSD) is derived from Title IV-D of the Social Security Act: to enhance the well-being of children by assuring that assistance in obtaining support, including financial and medical, is available to children through locating

parents, establishing parentage, establishing support obligations, and monitoring and enforcing those obligations. The CSSD mission contributes to the HCA mission to ensure New Mexicans attain their highest level of health by providing important safety-net services in working with our partners to encourage both parents to assume responsibility for improving the economic and social well-being, health, and stability of their children through child financial and medical support.

FY27 Budget Request Narrative

For SFY2027, CSSD is requesting a base request of \$49,906.9 an overall increase of \$851.4 or 1.7% above SFY26 Operating Budget.

General Fund reflects an increase of \$1,142.6 (7.97%) for State Fiscal Year 2027 (SFY2027). The increased costs are necessary to sustain the correct salary placement of CSSD staff, specifically, the attorney classifications that were adjusted by the State Personnel Office (SPO) in January 2024, resulting in a salary increase for the majority of CSSD attorney staff. In addition, the increase will cover the insurance premium increase, replacing HCAF funding.

Federal Funds reflect a decrease of 0.8%. CSSD receives a sixty-six percent (66%) Federal Financial Participation (FFP) (66%) available against State of New Mexico matching resources however the CSSD budget is also funded with federal incentive funding, which cannot be matched with the FFP.

The payroll budget request will fund 300 filled FTE, with a vacancy rate of 8.8%

Issues or Accomplishments

In SFY25, CSSD continued its modernization initiatives, which include customer-centered business model focusing on assisting both parties in meeting their child support responsibilities with the goal of increasing new applicants and consistent payments for families to support their children to grow up happy and healthy.

In July 2024, the HCA eliminated program fees for all child support customers, removing a barrier to parents. While the CSSD caseload continues to decrease as staff review cases for appropriate case closure, CSSD has seen an increase in new applications by as much as 600% compared to the same time last year. Outreach and education efforts were conducted heavily in 2025 as CSSD celebrated its 50th Anniversary of the program.

In September 2024, the HCA eliminated a barrier for parents making payments online and began covering the convenience fees charged when making payments by credit or debit cards. This has resulted in an increase in payments being made online.

CSSD focused on recruiting and retaining staff with improved employment development training to ensure staff are up to date on child support policies and procedures, including continuing legal education for attorney staff. Part of this effort also includes a review of staff's appropriate placement on the salary schedule and alignment to meet the qualifications of the position. This has resulted in dozens of in-pay band salary adjustments. Specifically, the attorney classifications were a challenge, when SPO in January 2024 adjusted the attorney classification

series which resulted in a salary increase for the majority of CSSD attorney staff. CSSD was able to cover these increases with the use of incentive funds which do not receive the Federal Financial Participation (FFP) match but is requesting general funds in SFY27 to cover personnel costs into the future to receive the FFP.

CSSD’s efforts in recruiting and retaining staff show results as the total budgeted FTE of 300 is met and has reached a negative vacancy rate. CSSD is now focused on strategically recruiting positions where the most need is to maintain its budgeted FTE.

Medical Assistance Division Administration (MAD Admin) (P524)

Agency Briefing Sheet		(in the thousands)										
AGENCY	BU											
HCA - Medical Assistance Division	63000	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST	Base Inc.	% Base Inc.	Expansion Inc.	% Exp. Inc.	TOTAL FY27 REQUEST	\$ Diff. FY25-26	% Diff. FY25-26	
		General Fund	\$30,039.2	\$55,174.6	\$55,174.6	\$0.0	0.0%	\$2,859.6	5.2%	\$58,034.2	\$2,859.6	5.2%
		Federal/Other Funds	\$117,011.3	\$185,111.2	\$207,309.4	\$22,198.2	12.0%	\$5,580.5	3.0%	\$212,889.9	\$27,778.7	15.0%
		GRAND TOTAL	\$147,050.5	\$240,285.8	\$262,484.0	\$22,198.2	9.2%	\$8,440.1	3.5%	\$270,924.1	\$30,638.3	12.8%
		200-PS & EB	\$18,295.9	\$22,279.1	\$24,246.2	\$1,967.1	9%	\$4,849.4	22%	\$29,095.6	\$6,816.5	30.6%
		300 - Contracts	\$101,678.8	\$192,915.6	\$214,118.6	\$21,203.0	11%	\$3,145.5	2%	\$217,264.1	\$24,348.5	12.6%
		400 - Other	\$27,075.8	\$25,091.1	\$24,119.2	(\$971.9)	-4%	\$445.2	2%	\$24,564.4	(\$526.7)	-2.1%
		500 - Other Financing Uses	\$0.0	\$0.0	\$0.0	\$0.0	0%	\$0.0	0%	\$0.0	\$0.0	0.0%
		GRAND TOTAL	\$147,050.5	\$240,285.8	\$262,484.0	\$22,198.2	9.2%	\$8,440.1	3.5%	\$270,924.1	\$30,638.3	12.8%

Medical Assistance Program and Medicaid Behavioral Health Program (P524 & P766)

Agency Briefing Sheet		(in the thousands)										
AGENCY	BU											
HCA - Medical Assistance & Medicaid Behavioral Health Divisions	63000	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST	Base Inc.	% Base Inc.	Expansion Inc.	% Exp. Inc.	TOTAL FY27 REQUEST	TOTAL \$ Diff. FY26-27	TOTAL % Diff. FY26-27	
		General Fund	\$1,511,403.0	\$1,486,408.3	\$1,478,294.8	(\$8,113.5)	-0.5%	\$0.0	0.0%	\$1,478,294.8	(\$8,113.5)	-0.5%
		Federal/Other Funds	\$9,036,839.0	\$10,499,074.6	\$10,013,474.3	(\$485,600.3)	-4.6%	\$0.0	0.0%	\$10,013,474.3	(\$485,600.3)	-4.6%
		GRAND TOTAL	\$10,548,242.0	\$11,985,482.9	\$11,491,769.1	(\$493,713.8)	-4.1%	\$0.0	0.0%	\$11,491,769.1	(\$493,713.8)	-4.1%
		200-PS & EB										
		300 - Contracts	\$80,018.4									
		400 - Other	\$10,418,735.6	\$11,985,482.9	\$11,491,769.1	(\$493,713.8)	-4%	\$0.0	0.0%	\$11,491,769.1	(\$493,713.8)	-4.1%
		500 - Other Financing Uses	\$0.0	\$0.0	\$0.0	\$0.0	0%	\$0.0	0%	\$0.0	\$0.0	0.0%
		GRAND TOTAL	\$10,498,754.0	\$11,985,482.9	\$11,491,769.1	(\$493,713.8)	-4.1%	\$0.0	0.0%	\$11,491,769.1	(\$493,713.8)	-4.1%

Medicaid Behavioral Health Admin (P766)

Agency Briefing Sheet		(in the thousands)										
AGENCY	BU											
HCA - Medical Assistance Division	63000	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST	Base Inc.	% Base Inc.	Expansion Inc.	% Exp. Inc.	TOTAL FY27 REQUEST	\$ Diff. FY25-26	% Diff. FY25-26	
		General Fund	\$0.0	\$0.0	\$3,941.0	\$3,941.0	0.0%	\$0.0	0.0%	\$3,941.0	\$3,941.0	0.0%
		Federal/Other Funds	\$0.0	\$7,214.0	\$10,436.0	\$3,222.0	44.7%	\$0.0	0.0%	\$10,436.0	\$3,222.0	44.7%
		GRAND TOTAL	\$0.0	\$7,214.0	\$14,377.0	\$7,163.0	99.3%	\$0.0	0.0%	\$14,377.0	\$7,163.0	99.3%
		200-PS & EB	\$0.0	\$0.0	\$800.0	\$800.0	0%	\$0.0	0%	\$800.0	\$800.0	0.0%
		300 - Contracts	\$0.0	\$0.0	\$8,352.8	\$8,352.8	0%	\$0.0	0%	\$8,352.8	\$8,352.8	0.0%
		400 - Other	\$0.0	\$7,214.0	\$5,224.2	(\$1,989.8)	0%	\$0.0	0%	\$5,224.2	(\$1,989.8)	-27.6%
		500 - Other Financing Uses	\$0.0	\$0.0	\$0.0	\$0.0	0%	\$0.0	0%	\$0.0	\$0.0	0.0%
		GRAND TOTAL	\$0.0	\$7,214.0	\$14,377.0	\$7,163.0	99.3%	\$0.0	0.0%	\$14,377.0	\$7,163.0	99.3%

The Medicaid-Children’s Health Insurance Program (CHIP) serves about 38% of the state population (July 2025). The HCA, through the Medical Assistance Division (MAD), administers the New Mexico Medicaid program, which includes Title XIX – Medicaid, Title XXI –CHIP, and other health care related programs. The benefit of supporting the MAD Administrative budget request provides financial resources in support of the Medicaid program, its clients and their healthcare needs.

The Medicaid-CHIP Program is the largest payor of health care in New Mexico. As of July, the program covers 807,840 members of which 342,600 are under 21 years of age. The Medicaid-CHIP program has a major responsibility in ensuring the health care of New Mexicans. Medicaid-CHIP goals include ensuring continuity/access to care, supporting the health care of eligible members, and ensuring the economic viability of health care providers/institutions. The proposed FY 2027 request sustains these priorities, benefiting New Mexico's health care economy.

New federal policies take effect in the second half of FY 2026 and FY2027. Against this backdrop, the FY 2027 budget request is mainly directed towards sustaining FY 2026 program operations. However, sustaining operations of medical programs across provider networks poses both uncertainties and funding challenges, particularly those facing rural community providers.

The FY 2027 budget request aims to maintain FY 2026 base operations and complete the implementation of FY 2026 program expansion items. Expenditures for the base program use funding from government results and opportunity program fund (GRO) and special appropriation requests. This funding recognized expenditures for social determinants of health and wellbeing. These items include medical respite, housing/food capacity-building, maternal health, infrastructure and extended healthcare coverage to Justice-involved populations prior to release in the community and housing support.

FY 2026 expenditures are projected to be \$11,449 million and grow to \$11,647 million in FY 2027 including GRO expenditures, representing 1.73% year over year growth. Without GRO the base expenditures are \$11,492 million. The growth in the budget request is modest, with \$155.7 million corresponding to appropriations from GRO and FY2026 special appropriations.

Key initiatives in FY2027 Budget:

- Medical respite. The initiative allows homeless people (with physical health issues) who have been discharged from a hospital to enter medical respite for up to 6 months. The provided service sits between a shelter and a rehab facility. Individuals can sleep in the facility and receive meals and medical attention.
- Food support. The FY2026 implementation provides home delivered meals for pregnant members with diabetes and community benefit members who are homebound, such as older adults and disabled individuals lacking mobility.
- JUST Health Plus Justice Re-entry Services. This initiative targets incarcerated eligible Medicaid members with covered Medicaid services for up to 90 days prior to release from a jail or prison. Minimum services include case management, Medication Assisted Treatment services, and 30 days of medications in hand.
- Housing support. The initiative is developing through the expansion of the Linkages program and adding other provider who can perform these services. The Linkages program provides pre-tenancy and tenancy support. These services include applying for

housing, communicating with landlords, and paying for first, last, and security deposits. The intent is to offer wraparound housing support except for rent payments.

- Traditional Healing: The implementation of Native American traditional healing practices in the Medicaid program targets the Navajo population in New Mexico, with nearly all the financial cost borne by the federal government. This program could benefit up to 80,000 New Mexicans of varying ages depending on potential service usage.

Income Support Division Administration (ISD Admin) (P525)

Agency Briefing Sheet		(in the thousands)									
AGENCY	BU										
HCA - Income Support	63000	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST	Base Inc.	% Base Inc.	Expansion Inc.	% Exp. Inc.	TOTAL FY27 REQUEST	TOTAL \$ Diff. FY26-27	TOTAL % Diff. FY26-27
General Fund		\$53,262.0	\$68,644.1	\$108,204.7	\$39,560.6	57.6%	\$17,748.5	25.9%	\$125,953.2	\$57,309.1	83.5%
Federal/Other Funds		\$110,326.8	\$140,706.3	\$134,012.8	(\$6,693.5)	-4.8%	\$24,510.0	17.4%	\$158,522.8	\$17,816.5	12.7%
GRAND TOTAL		\$163,588.8	\$209,350.4	\$242,217.5	\$32,867.1	15.7%	\$42,258.5	17.4%	\$284,476.0	\$75,125.6	35.9%
200-PS & EB		\$72,971.6	\$91,325.0	\$91,325.0	\$0.0	0.0%	\$20,886.4	22.9%	\$112,211.4	\$20,886.4	22.9%
300 - Contracts		\$68,476.4	\$85,952.6	\$117,766.4	\$31,813.8	37.0%	\$10,397.0	12.1%	\$128,163.4	\$42,210.8	49.1%
400 - Other		\$22,140.8	\$32,072.8	\$33,126.1	\$1,053.3	3.3%	\$10,975.1	34.2%	\$44,101.2	\$12,028.4	37.5%
500 - Other Financing Uses		\$0.0	\$0.0	\$0.0	\$0.0	0.0%	\$0.0	0.0%	\$0.0	\$0.0	0.0%
GRAND TOTAL		\$163,588.8	\$209,350.4	\$242,217.5	\$32,867.1	15.7%	\$42,258.5	17.4%	\$284,476.0	\$75,125.6	35.9%
Authorized FTE		1035	1060	1060	0	0	260	24.5%	1320	260	24.5%
Budgeted FTE		912	950						1156		
# Vacant Positions as of 6/1/25		13	41								
Vacancy Rate Based on Budget		1.4%	4.3%								

The base budget request is vital to ISD’s mission of alleviating poverty through safety-net programs that provide financial, food, and employment assistance. Caseload actions are projected to grow by 35% in FY27, an increase of more than 64,000 case actions per month. Without adequate resources, families risk delays in accessing Medicaid, SNAP, TANF, and LIHEAP, leaving them vulnerable at the very moment they need support most. This budget will provide the staffing and operational capacity necessary to process benefits timely and accurately, ensuring New Mexicans can rely on essential services without long wait times. It also strengthens our workforce by funding competitive pay, comprehensive training, and employee support, all of which are critical to reducing turnover and maintaining program integrity. By investing in our people and infrastructure, this request directly translates into better service delivery, improved customer experience, and more equitable access to the programs that help New Mexicans meet their most basic needs.

For FY27, ISD requests a base budget of \$242.2 million, an increase of \$32.9 million from SFY26, including \$39.6 million in General Fund. This increase reflects unavoidable cost drivers: federal compliance mandates, rising caseloads, fraud prevention measures, and the infrastructure required to support a larger workforce. These investments are not optional; they are what ensure that benefits are delivered timely, accurately, and in full compliance with federal law. Without this funding, the state faces serious risks: federal penalties for noncompliance, longer processing delays, higher error rates, and gaps in access to programs like SNAP and Medicaid. Most critically, vulnerable New Mexicans could be left without food, health care, or basic

assistance when they need it most—undermining both public trust and the integrity of the safety net.

ISD revenue remains unchanged and is insufficient to sustain the current FY26 workload—let alone the increase projected for FY27. To address this, ISD requests a \$108.2 million General Fund base budget for FY27, a 15.7% increase from FY26. This investment is essential to support expanded staffing, contractual obligations, and compliance requirements, while also leveraging significant federal match opportunities. Every state dollar invested has a multiplying effect: ISD can draw down federal funds that not only sustain operations but also strengthen New Mexico's economy. For example, each federal SNAP dollar generates up to \$1.80 in economic activity during downturns, directly supporting local grocery stores, farmers, and small businesses. With the requested funding, New Mexico maximizes its federal dollars, protects program integrity, and ensures benefits are delivered timely, accurately, and in compliance with federal standards. Without it, the state risks leaving federal funds on the table, overburdening staff, and delaying critical services for vulnerable families.

The \$1,053.3 total base in the Other Expenses category for FY27 will fund critical infrastructure, staff readiness, and community outreach. This includes **Space & Equipment** (\$2.3M GF): Office space, IT, and workstations for 260 new FTEs statewide, required to meet federal compliance mandates. **Quality Control (QC) Travel:** Federal rules now require in-person home visits for QC reviews, as the remote waiver has expired. Funding is necessary to meet this mandate. **Training and Travel:** To ensure staff consistency and accuracy in complex policy areas, our teams will need to conduct audits, site reviews, along with customer interviews for federal compliance. This enhanced training will reduce the SNAP Payment Error Rate. **Community Outreach:** Branded materials increase ISD's visibility and accessibility, especially in underserved communities.

For SFY27, ISD requests a \$117.8 million base budget for contractual services, up from \$86.0 million in FY26. These costs are driven by federal mandates and are essential for compliance. USDA now requires chip-enabled EBT cards to prevent fraud and protect federal reimbursement. Additional contract staff are needed to handle caseload surges and new federal work requirements—without them, the state risks failing timeliness and accuracy standards, triggering steep penalties. Contracts with Deloitte and Accenture support IT system modernization, disaster response (DSNAP), call center capacity, and system upgrades tied to federal legislation. Federal rules also mandate expanded client notices, increasing printing, mailing, and programming costs. These investments are federally required and critical to maintain compliance, prevent fraud, and ensure uninterrupted services for families relying on Medicaid, SNAP, and TANF. Without them, New Mexico faces sanctions, errors, and service breakdowns.

Income Support Division Program (ISD Program) (P525)

Agency Briefing Sheet		(in the thousands)									
AGENCY	BU										
HCA - Income Support Program	63000	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST	Base Inc.	% Base Inc.	Expansion Inc.	% Exp. Inc.	TOTAL FY27 REQUEST	TOTAL \$ Diff. FY26-27	TOTAL % Diff. FY26-27
General Fund		\$22,069.7	\$24,409.9	\$31,875.3	\$7,465.4	23.42%	\$0.0	0.0%	\$31,875.3	\$7,465.4	30.6%
Federal/Other Funds		\$1,362,070.1	\$1,297,724.4	\$1,297,974.4	\$250.0	0.02%	\$0.0	0.0%	\$1,297,974.4	\$250.0	0.0%
GRAND TOTAL		\$1,384,139.8	\$1,322,134.3	\$1,329,849.7	\$7,715.4	0.58%	\$0.0	0.0%	\$1,329,849.7	\$7,715.4	0.6%
200-PS & EB		\$1,629.4	\$2,160.1	\$2,160.1	\$0.0	0.00%	\$0.0	0.0%	\$2,160.1	\$0.0	0.0%
300 - Contracts		\$20,129.1	\$20,533.4	\$20,533.4	\$0.0	0.00%	\$0.0	0.0%	\$20,533.4	\$0.0	0.0%
400 - Other		\$1,362,381.3	\$1,299,440.8	\$1,307,156.2	\$7,715.4	0.59%	\$0.0	0.0%	\$1,307,156.2	\$7,715.4	0.6%
500 - Other Financing Uses		\$0.0	\$0.0	\$0.0	\$0.0	0.00%	\$0.0	0.0%	\$0.0	\$0.0	0.0%
GRAND TOTAL		\$1,384,139.8	\$1,322,134.3	\$1,329,849.7	\$7,715.4	0.58%	\$0.0	0%	\$1,329,849.7	\$7,715.4	0.6%
Authorized FTE		25	25	25	0	0.0%	0	0%	25	-	0.0%
Budgeted FTE		25	25								
# vacant positions as of 6/2/25		3	3								
Vacancy Rate Based on Budget		12.0%	12.0%								

The Income Support Division (ISD) aims to transform lives and reduce poverty by providing financial, food, employment, and training assistance to low-income families. This Program budget request significantly boosts funding for these essential services, enhancing service delivery, reducing barriers, and improving outcomes for lower-income New Mexicans. Key investments include the Summer EBT program, which ensures consistent, nutritious food for children during the summer and supports their development as well as additional funding for the U.S. Department of Agriculture (USDA) commodities which both are aligned with Governor Michelle Lujan-Grisham's hunger initiative.

ISD is seeking an increase of \$7,465.4 in GF and \$250.0 in federal funds in FY27.

The FY27 GF base requested is \$1,329,849.7 with an overall increase of \$7,465.4 GF for the FY27 budget request. New Mexico's SNAP Employment & Training (E&T) Program supports participants in gaining job skills, credentials, and training that lead to long-term employment. In FFY2023, the program served only 45 participants, falling short of federal expectations. After establishing a contract with Equus Workforce Solutions in March 2024 to provide case management and direct services along staff to focus on outreach and oversight, participation increased by 35% to 127 individuals, with projections to exceed 200 in 2025. The required implementation of ABAWD work requirements is expected to expand services to an additional 800 participants. Strategic enhancements, including a new Job Retention component and collaboration with the Department of Workforce Solutions, position SNAP E&T as a scalable workforce development tool. With an increase in participation, we are requesting funds to provide E&T participant reimbursements.

Additional funding priorities include reaching the goal to get the State SNAP supplement for elderly and disabled households at \$100 per household to support one of the state's most vulnerable populations. Disaster SNAP (DSNAP) funding is also requested to provide short-term food assistance to families impacted by natural disasters, such as wildfires and floods, allowing them to focus resources on recovery while ensuring basic nutrition. These investments enhance program capacity, compliance, and support for New Mexico residents in need.

Issues or Accomplishments

In FY25, the Income Support Division (ISD) delivered critical support to New Mexicans through rapid disaster response, expanded food access, and strengthened partnerships.

ISD implemented Disaster SNAP in multiple counties, including the Mescalero Apache Reservation, and issued \$1.4M in Disaster LIHEAP to over 1,100 households, ensuring families recovered essential items after fires and flooding.

To reduce food insecurity, ISD partnered with PED to launch SUN Bucks, providing \$120 in summer benefits to 273,000 children—nearly \$33M statewide.

The income limit was raised for SNAP from 165% to 200% of the federal poverty level, expanded the minimum benefit for seniors and people with disabilities from \$32 to \$100 which increased the elderly and disabled cases by 141% and delivered a one-time \$68 supplement to nearly 30,000 elderly and disabled households.

On workforce development, ISD secured \$3M for Adult Basic Education and \$1M for Integrated Education & Training, allowing New Mexicans to earn a high school credential while pursuing career certifications.

In partnership with tribes, pueblos and nations, ISD streamlined TANF verification, reduced duplication, and launched a Tribal Charter requiring quarterly meetings, already strengthening collaboration with tribal leaders.

These accomplishments demonstrate ISD's ability to leverage federal and state resources to protect families in crisis, reduce hunger, and build long-term pathways to stability.

During FY24, Income Support made significant strides in the timely processing of applications for both SNAP and Medicaid cases. ISD was able to increase SNAP application processing from 91.83% in July 2024 to 97.98% in July 2025. The efforts made to not only meet the federal timelines rate of 95% but also maintain this rate through FFY25 was validated and recognized by USDA Food and Nutrition services as they released ISD from the Application Processing Timeliness corrective action plan in May 2025. NM ISD along with all other States are facing a historic number of changes to both SNAP and Medicaid with the passing of the recent reconciliation bill. This bill will add complexities and changes that will affect the agency's ability to maintain this timeliness rate. The request for additional staff will help with the expected increase in administrative workload and help offset the additional time that will be needed to ensure correct determination of benefits for all New Mexicans that seek assistance.

Health Care Affordability Fund (HCAF) (P762)

Agency Briefing Sheet		(in the thousands)									
AGENCY	BU	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST	Base Inc.	% Base Inc.	Expansion Inc.	% Exp. Inc.	TOTAL FY27 REQUEST	TOTAL \$ Diff. FY26-27	TOTAL % Diff. FY26-27
HCA - Health Care Affordability	63000										
General Fund		\$0.0	\$0.0	\$0.0	\$0.0	0.00%	\$0.0	\$0.0	\$0.0	\$0.0	0.0%
Federal/Other Funds		\$86,597.3	\$178,028.5	\$205,264.1	\$27,235.6	15.30%	\$0.0	\$0.0	\$205,264.1	\$27,235.6	15.3%
GRAND TOTAL		\$86,597.3	\$178,028.5	\$205,264.1	\$27,235.6	15.30%	\$0.0	\$0.0	\$205,264.1	\$27,235.6	15.3%
200-PS & EB		\$406.4	\$1,028.5	\$1,080.5	\$52.0	5.06%	\$0.0	\$0.0	\$1,080.5	\$52.0	5.1%
300 - Contracts		\$1,703.3	\$1,000.0	\$2,200.0	\$1,200.0	120.00%	\$0.0	\$0.0	\$2,200.0	\$1,200.0	120.0%
400 - Other		\$68,721.1	\$146,000.0	\$201,983.6	\$55,983.6	89.30%	\$0.0	\$0.0	\$201,983.6	\$55,983.6	38.3%
500 - Other Financing Uses		\$0.0	\$30,000.0	\$0.0	(\$30,000.0)	0.00%		\$0.0	\$0.0	(\$30,000.0)	-100.0%
GRAND TOTAL		\$70,830.8	\$178,028.5	\$205,264.1	\$27,235.6	15.30%	\$0.0	\$0.0	\$205,264.1	\$27,235.6	15.3%
Authorized FTE		5	9	9	0	0	0	0.0%	9	0	0.0%
Budgeted FTE		5			Vacancy rate as of 6/30/25					0	0.0%
# vacant positions as of 6/30/25		0									

The programs under the Health Care Affordability Fund (HCAF) FY27 budget request are projected to reduce health insurance related costs for more than 100,000 New Mexicans, a key strategy to achieve the HCA’s mission of ensuring New Mexicans attain their highest level of health by providing whole-person, cost-effective, accessible and high-quality health care. With health care costs rising and the federal government pulling back on its commitments to ensure coverage for lower-and-moderate-income residents it is critical that affordable coverage is available to working families and small businesses. Supported by statutory changes in revenue distributions to the HCAF, this request will improve the affordability of comprehensive coverage, maintain health care access for thousands of New Mexicans at risk of coverage loss, and improve health equity in the state. The HCAF is not supported by state GF.

FY27 Budget Request Narrative

HCA requests **\$1,080.0** for the 200-Personal services and employee benefits category to sustain the current 9 positions in the Bureau. HCA requests **\$2,200.0** in the 300-Contract services category to cover expenses for community outreach, actuarial and modeling services, out-of-pocket reconciliation, and other technical services needed to implement, evaluate, and improve its programs and procedures. HCA’s 400-Other costs category request for HCAF is **\$201,938.6**. This is made up of seven components:

1. **\$103,222.8** for the Marketplace Affordability Program, which will continue to protect the vast majority of the 75,000 BeWell enrollees who would otherwise face significant premium increases resulting from federal cuts and spikes in premiums. This program also provides out-of-pocket assistance for approximately 3-in-4 BeWell enrollees.
2. **\$518.4** for the Medicaid Transition Premium Relief Program for BeWell enrollees.
3. **\$53,662.1** for the Small Business Premium Relief Initiative, which reduces premiums by 10-15% for approximately 4,000 small businesses that offer 38,000 employees/dependents coverage in the small group market.
4. **\$30,920.4** for a series of new initiatives called the Coverage Protection Program for New Mexicans at risk of losing coverage due to federal Marketplace and Medicaid eligibility changes. (HCA is not requesting funds for the Coverage Expansion Program as originally proposed due to the funding needs for the Coverage Protection Program and a special appropriation to provide bridge funding for individuals losing Medicaid eligibility on 10/1/2026.)
5. **\$12,500.0** for the State Employee Premium Assistance (SEPA) program.

- 6. **\$1,000.0** for members of the National Guard eligible for TRICARE Select Reserve.
- 7. **\$150.0** for Bureau operations expenses.

HCA is requesting that the **\$30,000.0** transfer in the 500s category to Medicaid be moved to a special appropriation in FY27, as the fund cannot sustain this expense on a permanent basis (see Issues and Accomplishments below).

In total, the FY27 request for HCAF is **\$205,264.1**. If this request is not approved, the HCA will not be able to utilize funds distributed to the HCAF to implement these important health care coverage affordability initiatives.

Issues or Accomplishments

HCA has successfully implemented all Marketplace and Small Business Initiative changes for FY26, which will help individuals, families, and businesses weather significant premium increases and federal cuts. The Taxation and Revenue Department projects that HCAF revenue will decrease compared to previous projections due to changes in HR 1 (the federal reconciliation bill passed in July 2025), putting a strain on the fund balance in future fiscal years. This will need to be closely monitored to ensure fund solvency and program sustainability.

Medical Assistance Division Behavioral Health Administration (MAD BH Admin) (P766)

Agency Briefing Sheet		(in the thousands)									
AGENCY	BU	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST	Base Inc.	% Base Inc.	Expansion Inc.	% Exp. Inc.	TOTAL FY27 REQUEST	\$ Diff. FY25-26	% Diff. FY25-26
HCA - Medical Assistance Division	63000										
	General Fund	\$0.0	\$0.0	\$0.0	\$0.0	0.0%	\$0.0	0.0%	\$0.0	\$0.0	0.0%
	Federal/Other Funds	\$0.0	\$7,214.0	\$14,428.0	\$7,214.0	100.0%	\$0.0	0.0%	\$14,428.0	\$7,214.0	100.0%
	GRAND TOTAL	\$0.0	\$7,214.0	\$14,428.0	\$7,214.0	100.0%	\$0.0	0.0%	\$14,428.0	\$7,214.0	100.0%
	200-PS & EB	\$0.0	\$0.0	\$800.0	\$800.0	0%	\$0.0	0%	\$800.0	\$800.0	0.0%
	300 - Contracts	\$0.0	\$0.0	\$13,553.8	\$13,553.8	0%	\$0.0	0%	\$13,553.8	\$13,553.8	0.0%
	400 - Other	\$0.0	\$7,214.0	\$74.2	(\$7,139.8)	0%	\$0.0	0%	\$74.2	(\$7,139.8)	-99.0%
	500 - Other Financing Uses	\$0.0	\$0.0	\$0.0	\$0.0	0%	\$0.0	0%	\$0.0	\$0.0	0.0%
	GRAND TOTAL	\$0.0	\$7,214.0	\$14,428.0	\$7,214.0	100.0%	\$0.0	0.0%	\$14,428.0	\$7,214.0	100.0%
	Authorized FTE	0	0	7	7		0		7		
	Budget FTE	168	203	203	0		0		203		
	# vacant positions as of 7/8/2024	-168			0				0		
	Vacancy Rate based on budget	17.2%	0.0%	0.0%					0.0%		

Behavioral Health Services Division (BHSD) Administration (P767)

Agency Briefing Sheet		(in the thousands)									
AGENCY	BU										
HCA - Behavioral Health Services Division	63000	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST	Base Inc.	% Base Inc.	Expansion Inc.	% Exp. Inc.	TOTAL FY27 REQUEST	TOTAL \$ Diff. FY26-27	TOTAL % Diff. FY26-27
		\$58,672.4	\$60,216.5	\$73,197.9	\$12,981.4	21.6%	\$0.0	0.0%	\$73,197.9	\$12,981.4	21.6%
		\$49,123.1	\$40,163.1	\$37,957.6	(\$2,205.5)	-5.5%	\$0.0	0.0%	\$37,957.6	(\$2,205.5)	-5.5%
		\$107,795.5	\$100,379.6	\$111,155.5	\$10,775.9	10.7%	\$0.0	0.0%	\$111,155.5	\$10,775.9	10.7%
		\$4,422.3	\$6,811.8	\$7,508.2	\$696.4	10.2%	\$0.0	0.0%	\$7,508.2	\$696.4	10.2%
		\$101,255.0	\$91,286.9	\$101,186.9	\$9,900.0	10.8%	\$0.0	0.0%	\$101,186.9	\$9,900.0	10.8%
		\$2,118.2	\$2,280.9	\$2,460.4	\$179.5	7.9%	\$0.0	0.0%	\$2,460.4	\$179.5	7.9%
		\$0.0	\$0.0	\$0.0	\$0.0	0.0%	\$0.0	0.0%	\$0.0	\$0.0	0.0%
		\$107,795.5	\$100,379.6	\$111,155.5	\$10,775.9	10.7%	\$0.0	0.0%	\$111,155.5	\$10,775.9	10.7%
		70	70	70	0	0%	0	0%	70	0	0.0%
		49									35.7%
		25									

The Behavioral Health Services Division (BHSD) serves as New Mexico’s single state authority for behavioral health and is responsible for managing the public behavioral health service system. BHSD funds adult behavioral health services using both state General Fund and federal dollars, focusing on individuals who are ineligible for Medicaid and services that are not reimbursable through Medicaid.

BHSD collaborates with state agencies and community stakeholders to ensure the delivery of comprehensive prevention, treatment, and recovery services for individuals with substance use disorders, mental health conditions, and co-occurring disorders. Additionally, BHSD oversees the behavioral health components of the state’s Medicaid Managed Care contracts, including Turquoise Care.

FY27 Budget Request Narrative

The Behavioral Health Services Division (BHSD) FY27 Operating Budget Request reflects a 10.7% increase over FY26, focused on sustaining core services and strengthening key behavioral health infrastructure. The request includes a General Fund increase of \$696.4, which covers continued funding for five positions previously supported by a one-time federal grant, as well as rising insurance premiums. It also includes a \$3,288.0 General Fund request to replace expiring Opioid Settlement funds that currently support BHSD’s supportive housing program.

A central component of the request is an investment in the 988 Suicide & Crisis Lifeline. BHSD estimates that operating a fully developed and effective 988 system will require \$12.6 million annually. To support this need, the FY27 request includes \$9,000.0 in General Fund and establishes \$3,600.0 in Other Transfers to reflect anticipated revenue from the telecommunications surcharge authorized under Senate Bill 535. This combined funding strategy will support a sustainable 988 system within the recurring budget and reduce reliance on special appropriations.

These targeted investments advance BHSD’s mission to ensure continuity of care, expand crisis response capacity, and preserve behavioral health access for uninsured and underinsured New Mexicans.

Issues or Accomplishments:

- **Joint review and selection of prospective CCBHCs** in coordination with MCOs, fostering shared accountability and strategic network development.
- **Mandated provision of Medication for Opioid Use Disorder (MOUD)** as an evidence-based practice across all CCBHCs, reinforcing clinical standards and access.
- **Integration of care coordination standards through MCO contracts**, requiring CCBHCs to meet defined benchmarks for care transitions, interdisciplinary collaboration, and member engagement. These standards are helping to integrate whole-person care and ensure that SUD services are not siloed from broader behavioral and physical health supports.
- **Ongoing engagement between HCA and MCOs** to monitor implementation fidelity, address operational challenges, and support sustainability.

This approach has not only expanded access to SUD services but also strengthened the infrastructure for evidence-based care delivery statewide.

BHSD also is actively laying the foundation for the implementation of SB3, the Behavioral Health Reform and Investment Act, through strategic collaboration with the Administrative Office of the Courts (AOC) to coordinate regional stakeholder meetings, develop rubrics, and support the planning required for future community-led behavioral health investments. This critical groundwork is positioning the state for long-term, regionally tailored service expansion aligned with the Act.

BHSD continues to manage and oversee nearly 550 scopes of work (SOWs) annually. This proactive approach ensures that appropriated dollars are swiftly directed to providers and communities where behavioral health services are most needed.

Increased naloxone distribution has significantly reduced opioid overdose deaths by enabling individuals and first responders to quickly reverse overdoses and save lives. BHSD expanded overdose prevention efforts statewide by increasing naloxone distribution, achieving the targeted 28,218 kits distributed in FY25. The target for FY26 is 30,000 kits. To maximize impact, BHSD's prevention programs combine training with other prevention strategies.

The Yellow Ribbon Suicide Prevention Program is dedicated to preventing suicide among youth through community-based education, awareness, and empowerment, connecting those in crisis with support. BHSD partnered with the Yellow Ribbon Program to complete 108 training sessions statewide in FY25—exceeding the target goal of 50 sessions.

The Fresh Start Rental Assistance Program provides move-in and eviction prevention assistance for individuals diagnosed with Opioid Use Disorder who are currently homeless or at risk of homelessness. Funds support those receiving behavioral health services, recovery services, or Medication Assisted Treatment. Qualifying individuals may receive financial assistance up to \$10,000 or nine months of rental support, whichever comes first. In FY25, 374 individuals were served, with \$2,434,666 expended.

The PAX Good Behavior Game (GBG) is a trauma-informed, evidence-based intervention used in classrooms to teach students self-regulation, self-control, and self-management skills. Utilizing science-based behavioral techniques, teachers create positive classroom environments that foster cooperation, improve attention and focus, reduce disruptive behavior, enhance academic performance, and promote lifelong mental health and well-being. In FY25, BHSD completed 29 training sessions with 488 teachers in attendance.

EXPANSION REQUESTS

Please see the accompanying justification forms for details on HCA expansion requests.

CONCLUSION

Many more details and nuances about the HCA FY 2027 budget request that cannot be covered in this letter are included in the following pages. We are available at your request to answer any questions or provide additional information. You may contact me by phone at (505) 249-8773 or at Kari.Armijo@hca.nm.gov or Carolee Graham by phone at (505) 490-1055 or Carolee.Graham@hca.nm.gov.

APPROPRIATION REQUEST CERTIFICATION FORM S-1

Agency Name: Health Care Authority Department

Business Unit: 63000

I hereby certify that the accompanying summary and detailed statements are true and correct to the best of my knowledge and belief and that the arithmetic accuracy of all numeric information has been verified.

DocuSigned by:



1BA9EB5EAD00499...

Kari Armijo, Cabinet Secretary

,



Carolee Graham, ASD Director/CFO

1474 Rodeo Rd.
Santa Fe, NM 87505

505-827-9412

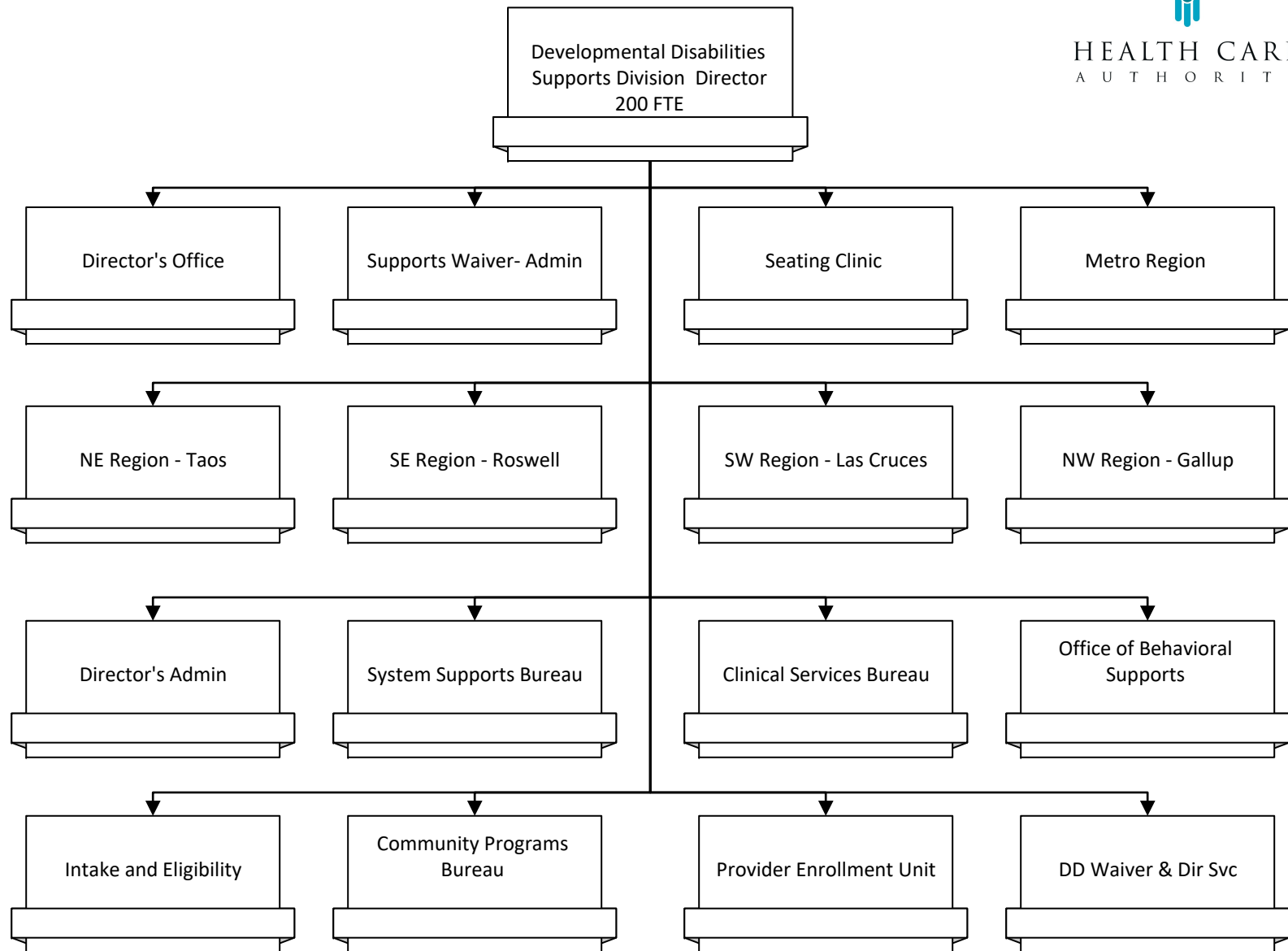
Note: Appropriation Requests for agencies headed by a board or commission must be approved by the board or commission by official action and signed by the chairperson. Operating Budgets of other agencies must be signed by the director or secretary. Appropriation Requests not properly signed will be returned.

HCA DDSD Organizational Chart

FY 27 Budget Request



HEALTH CARE
AUTHORITY

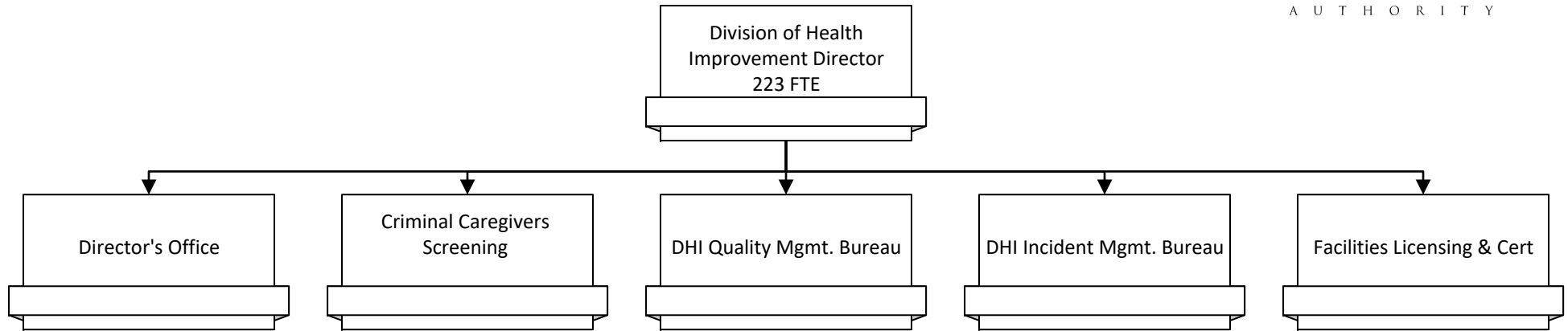


HCA DHI Organizational Chart

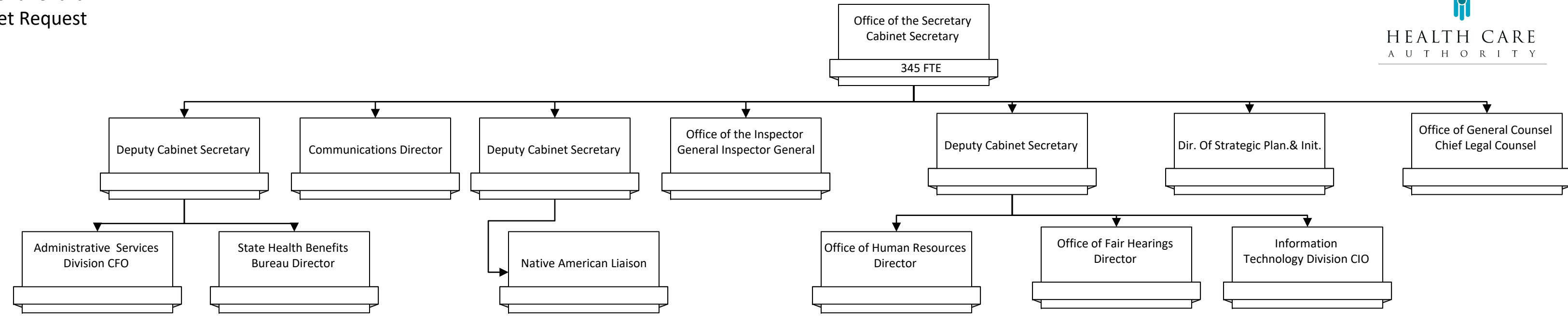
FY 27 Budget Request



HEALTH CARE
AUTHORITY



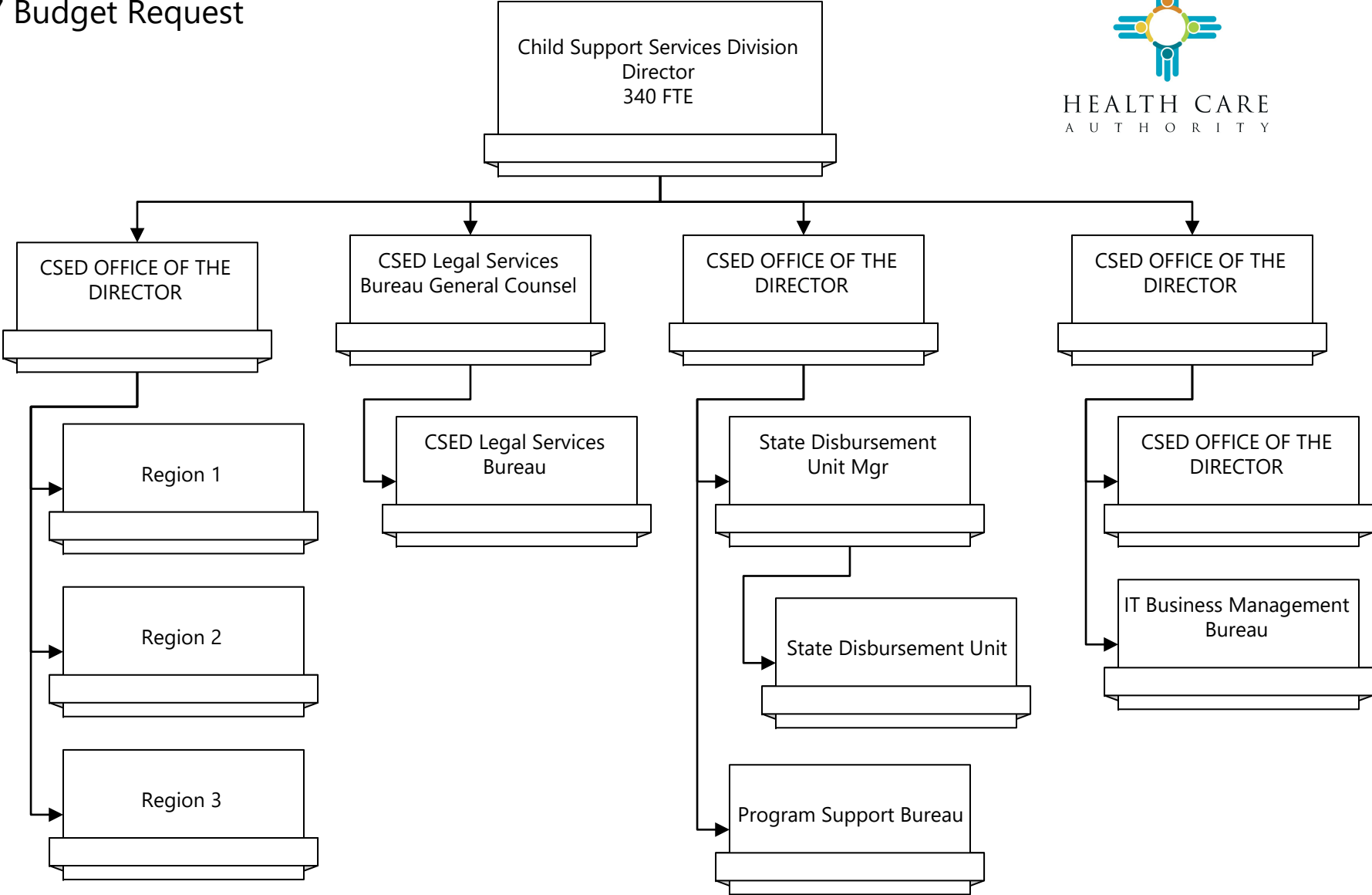
HCA Program Support with ASD & ITD
Organizational Chart
FY 27 Budget Request



HCA CSSD Organizational Chart FY 27 Budget Request



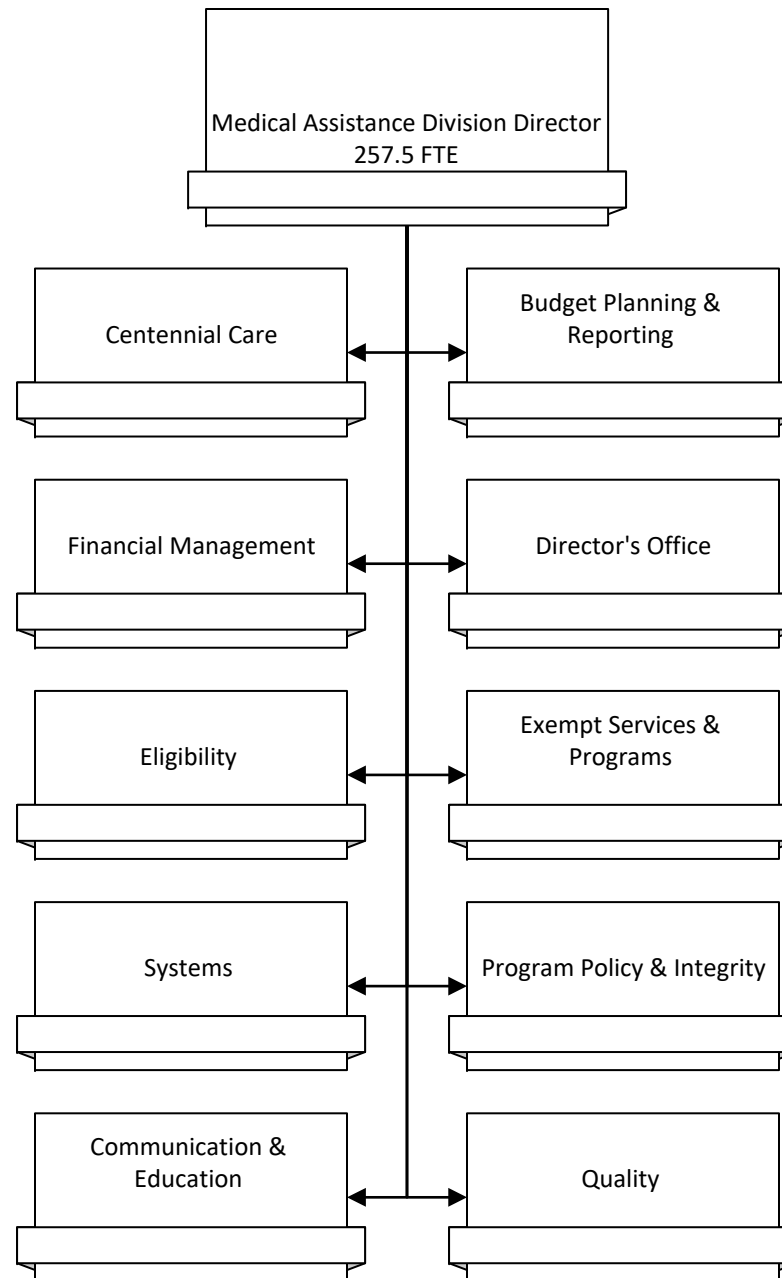
HEALTH CARE
AUTHORITY



HCA MAD Organizational Chart FY 27 Budget Request



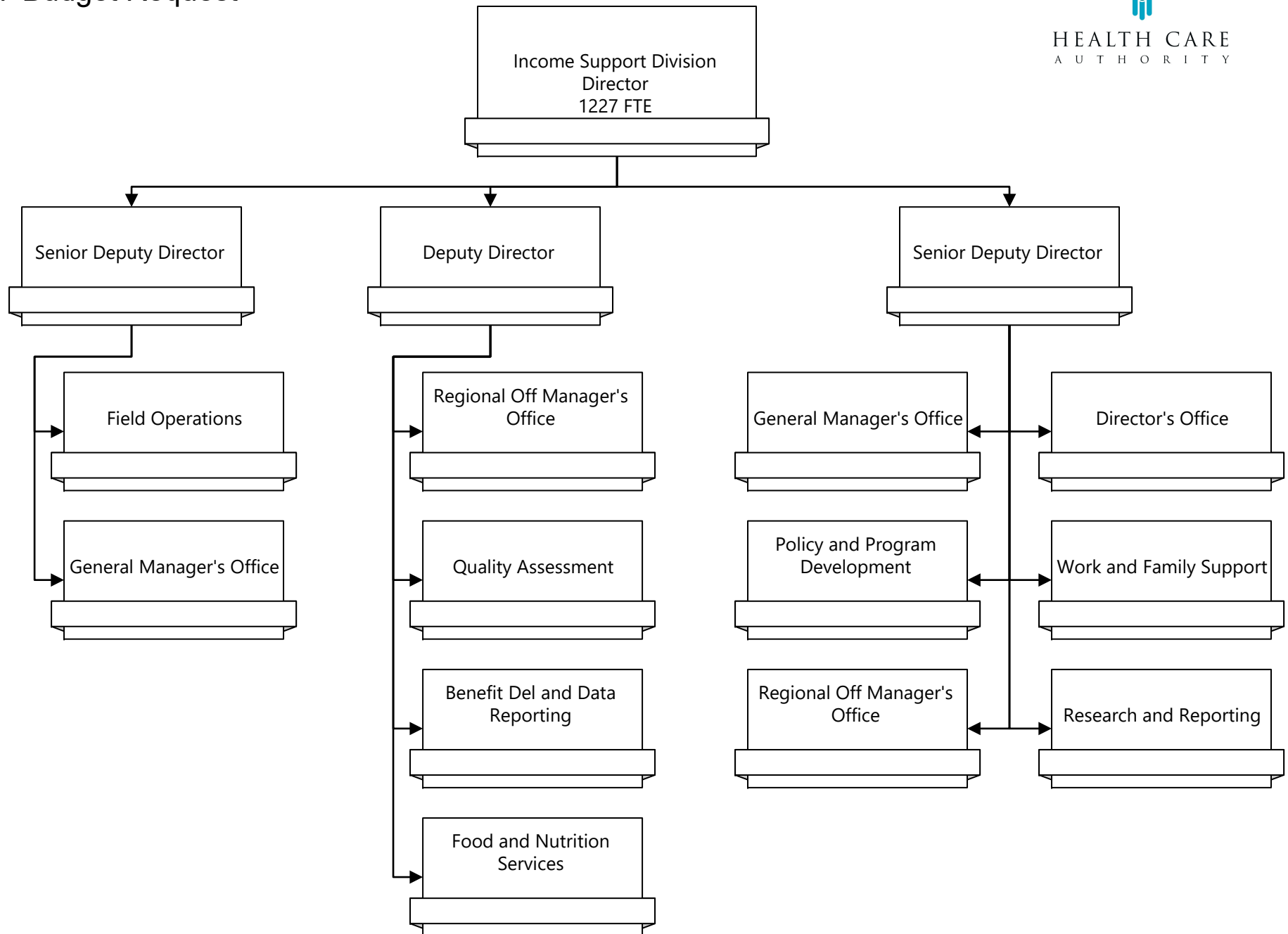
HEALTH CARE
AUTHORITY



HCA ISD Organizational Chart FY 27 Budget Request



HEALTH CARE
AUTHORITY

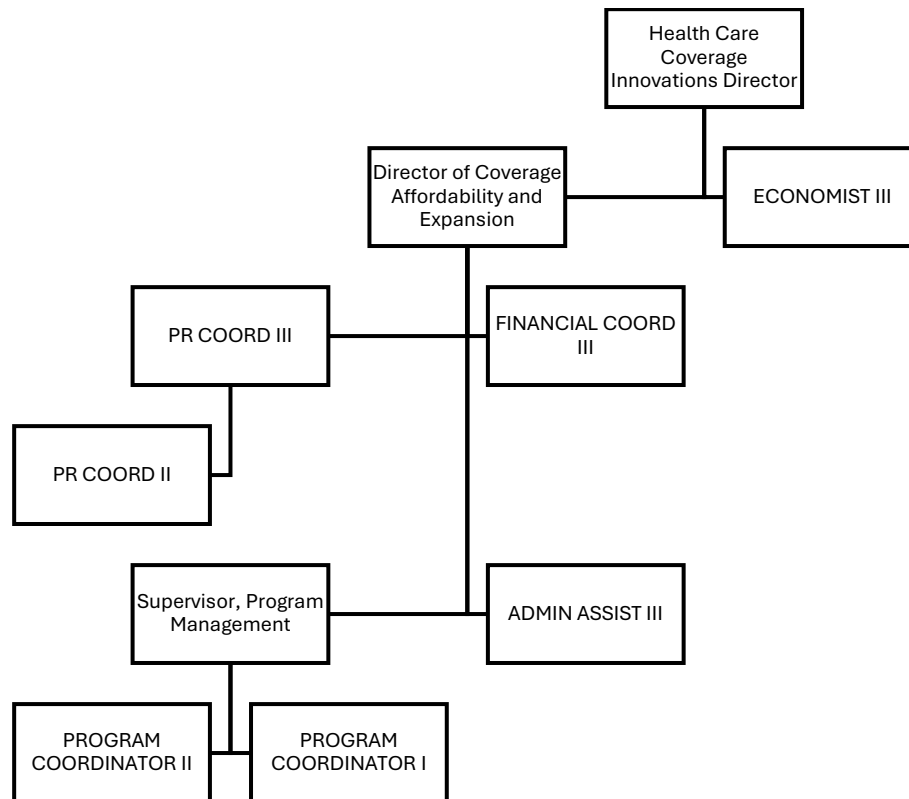


Health Care Affordability Fund

FY 27 Budget Request Organizational Chart



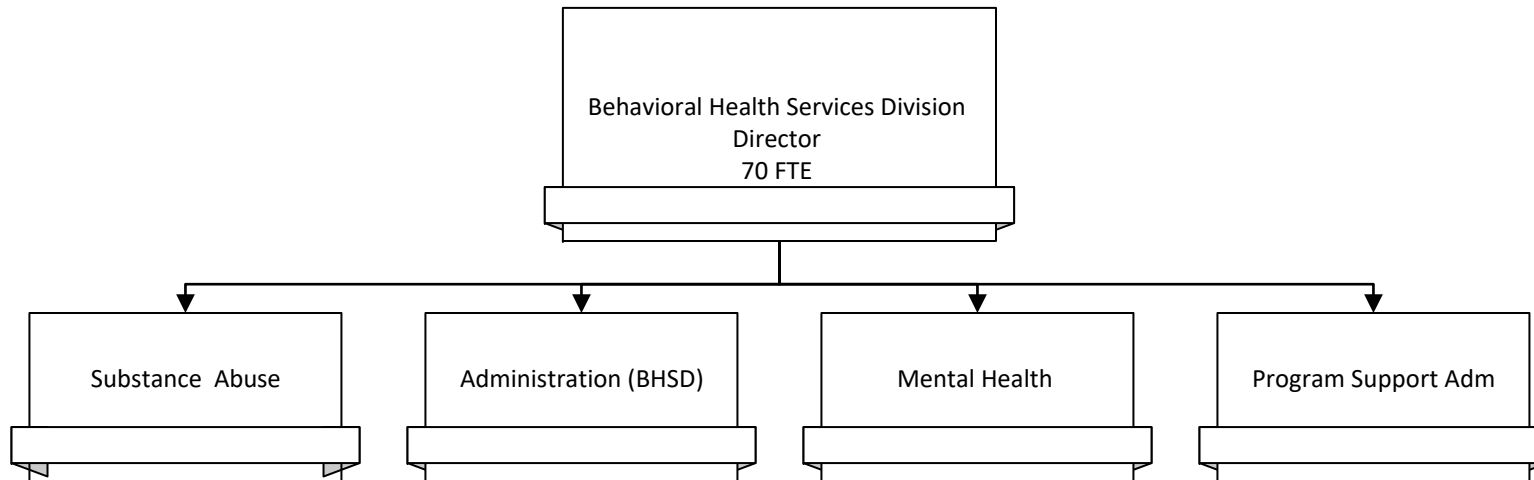
HEALTH CARE
AUTHORITY



HCA BHSD Organizational Chart
FY 27 Budget Request



HEALTH CARE
AUTHORITY



S-8 Financial Summary

(Dollars in Thousands)

BU PCode Department
63000 0000 0000000000

	2024-25 Opbud	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	Base	----- FY 2027 Agency Request ----- Expansion	Total
REVENUE							
112 Other Transfers	0.0	0.0	54,404.5	0.0	0.0	0.0	0.0
Not Used	0.0	0.0	54,404.5	0	0.0	0.0	0.0
111 General Fund Transfers	1,992,879.7	2,064,092.4	2,066,923.3	0.0	2,183,044.6	72,141.5	2,255,186.1
112 Other Transfers	439,654.8	446,554.8	912,916.6	0.0	904,950.5	0.0	904,950.5
120 Federal Revenues	9,047,431.2	8,945,074.5	11,171,751.0	0.0	10,709,305.6	37,187.5	10,746,493.1
130 Other Revenues	706,328.0	752,155.4	862,568.1	0.0	1,052,903.8	1,228.0	1,054,131.8
150 Fund Balance	0.0	15,486.1	811.4	0.0	44,811.4	0.0	44,811.4
REVENUE, TRANSFERS	12,186,293.7	12,223,363.2	15,014,970.4	0	14,895,015.9	110,557.0	15,005,572.9
REVENUE	12,186,293.7	12,223,363.2	15,069,374.9	0	14,895,015.9	110,557.0	15,005,572.9
EXPENSE							
200 Personal services and employee benefits	195,055.4	182,827.0	234,381.7	214,141.9	246,345.8	27,635.8	273,981.6
300 Contractual services	369,311.2	476,673.6	511,309.8	0.0	593,839.2	16,643.5	610,482.7
400 Other	11,387,797.3	11,130,532.0	14,009,358.6	0.0	13,731,406.1	19,277.7	13,750,683.8
EXPENDITURES	11,952,163.9	11,790,032.5	14,755,050.1	214,141.86	14,571,591.1	63,557.0	14,635,148.1
500 Other financing uses	234,129.8	257,719.2	314,324.8	0.0	323,424.8	47,000.0	370,424.8
OTHER FINANCING USES	234,129.8	257,719.2	314,324.8	0	323,424.8	47,000.0	370,424.8
EXPENSE	12,186,293.7	12,047,751.7	15,069,374.9	214,141.86	14,895,015.9	110,557.0	15,005,572.9
FTE POSITIONS							
810 Permanent	2,344.50	1,650.00	2,398.50	2,066.00	2,448.50	302.00	2,750.50
820 Term	68.00	0.00	42.00	0.00	55.00	0.00	55.00
FTEs	2,412.50	1,650.00	2,440.50	2,066.00	2,503.50	302.00	2,805.50
FTE POSITIONS	2,412.50	1,650.00	2,440.50	2,066.00	2,503.50	302.00	2,805.50

S-8 Financial Summary

(Dollars in Thousands)

BU PCode Department
63000 P519 000000

	2024-25 Opbud	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	Base	----- FY 2027 Agency Request ----- Expansion	Total
REVENUE							
111 General Fund Transfers	252,678.6	252,529.2	306,583.2	0.0	347,310.0	47,000.0	394,310.0
112 Other Transfers	0.0	149.4	0.0	0.0	0.0	0.0	0.0
120 Federal Revenues	18,548.7	13,739.2	17,684.5	0.0	19,163.9	0.0	19,163.9
130 Other Revenues	184.6	227.0	184.6	0.0	332.0	0.0	332.0
150 Fund Balance	0.0	338.4	0.0	0.0	0.0	0.0	0.0
REVENUE, TRANSFERS	271,411.9	266,983.3	324,452.3	0.0	366,805.9	47,000.0	413,805.9
REVENUE	271,411.9	266,983.3	324,452.3	0.0	366,805.9	47,000.0	413,805.9
EXPENSE							
200 Personal services and employee benefits	16,213.7	16,186.7	19,261.9	0.0	20,352.4	0.0	20,352.4
300 Contractual services	12,588.9	10,779.4	12,280.6	0.0	12,649.0	0.0	12,649.0
400 Other	8,479.5	5,340.3	8,585.0	0.0	10,379.7	0.0	10,379.7
EXPENDITURES	37,282.1	32,306.4	40,127.5	0	43,381.1	0.0	43,381.1
500 Other financing uses	234,129.8	227,719.2	284,324.8	0.0	323,424.8	47,000.0	370,424.8
OTHER FINANCING USES	234,129.8	227,719.2	284,324.8	0	323,424.8	47,000.0	370,424.8
EXPENSE	271,411.9	260,025.6	324,452.3	0	366,805.9	47,000.0	413,805.9
FTE POSITIONS							
810 Permanent	152.00	0.00	195.00	0.00	200.00	0.00	200.00
820 Term	43.00	0.00	0.00	0.00	0.00	0.00	0.00
FTEs	195.00	0.00	195.00	0.00	200.00	0.00	200.00
FTE POSITIONS	195.00	0.00	195.00	0.00	200.00	0.00	200.00

Health Improvement

State of New Mexico

S-8 Financial Summary

(Dollars in Thousands)

BU PCode Department
63000 P520 000000

	2024-25 Opbud	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	Base	----- FY 2027 Agency Request -----		Total
						Expansion		
REVENUE								
111 General Fund Transfers	11,513.9	11,324.6	13,748.4	0.0	15,191.4	1,100.5		16,291.9
112 Other Transfers	0.0	1,767.7	0.0	0.0	0.0	0.0		0.0
120 Federal Revenues	8,666.1	7,652.4	14,626.4	0.0	14,782.8	1,100.5		15,883.3
130 Other Revenues	1,913.0	1,279.7	1,324.2	0.0	2,703.7	0.0		2,703.7
150 Fund Balance	0.0	3,735.9	0.0	0.0	0.0	0.0		0.0
REVENUE, TRANSFERS	22,093.0	25,760.4	29,699.0	0.0	32,677.9	2,201.0		34,878.9
REVENUE	22,093.0	25,760.4	29,699.0	0.0	32,677.9	2,201.0		34,878.9
EXPENSE								
200 Personal services and employee benefits	19,136.3	16,677.6	25,504.7	0.0	27,189.3	1,900.0		29,089.3
300 Contractual services	922.5	1,599.2	1,322.5	0.0	1,973.0	1.0		1,974.0
400 Other	2,034.2	1,590.2	2,871.8	0.0	3,515.6	300.0		3,815.6
EXPENDITURES	22,093.0	19,867.0	29,699.0	0	32,677.9	2,201.0		34,878.9
EXPENSE	22,093.0	19,867.0	29,699.0	0	32,677.9	2,201.0		34,878.9
FTE POSITIONS								
810 Permanent	197.00	0.00	197.00	0.00	223.00	0.00		223.00
FTEs	197.00	0.00	197.00	0.00	223.00	0.00		223.00
FTE POSITIONS	197.00	0.00	197.00	0.00	223.00	0.00		223.00

State Health Benefits

State of New Mexico

S-8 Financial Summary

(Dollars in Thousands)

BU PCode Department
63000 P521 000000

	2024-25 Opbud	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	Base	----- FY 2027 Agency Request -----		Total
						Expansion		
REVENUE								
112 Other Transfers	0.0	15,000.0	0.0	0.0	0.0	0.0	0.0	0.0
130 Other Revenues	479,368.0	465,716.2	518,353.5	0.0	660,208.1	0.0	0.0	660,208.1
REVENUE, TRANSFERS	479,368.0	480,716.2	518,353.5	0.0	660,208.1	0.0	0.0	660,208.1
REVENUE	479,368.0	480,716.2	518,353.5	0.0	660,208.1	0.0	0.0	660,208.1
EXPENSE								
200 Personal services and employee benefits	1,173.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0
300 Contractual services	32,825.7	32,839.7	37,355.0	0.0	38,475.7	0.0	0.0	38,475.7
400 Other	445,369.0	535,715.4	480,998.5	0.0	621,732.4	0.0	0.0	621,732.4
EXPENDITURES	479,368.0	568,555.1	518,353.5	0	660,208.1	0.0	0.0	660,208.1
EXPENSE	479,368.0	568,555.1	518,353.5	0	660,208.1	0.0	0.0	660,208.1
FTE POSITIONS								
810 Permanent	9.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FTEs	9.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FTE POSITIONS	9.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Program Support

State of New Mexico

S-8 Financial Summary

(Dollars in Thousands)

BU PCode Department
63000 P522 000000

	2024-25 Opbud	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	Base	----- FY 2027 Agency Request ----- Expansion	Total
REVENUE							
111 General Fund Transfers	35,409.4	35,147.8	37,295.2	0.0	54,686.9	3,432.9	58,119.8
112 Other Transfers	2,300.0	329.6	2,300.0	0.0	2,300.0	0.0	2,300.0
120 Federal Revenues	52,249.5	57,641.0	73,540.4	0.0	67,313.3	7,224.5	74,537.8
130 Other Revenues	1,211.4	4,500.0	3,000.0	0.0	4,000.0	0.0	4,000.0
150 Fund Balance	0.0	0.0	0.0	0.0	0.0	0.0	0.0
REVENUE, TRANSFERS	91,170.3	97,618.4	116,135.6	0.0	128,300.2	10,657.4	138,957.6
REVENUE	91,170.3	97,618.4	116,135.6	0.0	128,300.2	10,657.4	138,957.6
EXPENSE							
200 Personal services and employee benefits	33,908.9	25,989.4	36,287.5	43,227.6	37,590.6	0.0	37,590.6
300 Contractual services	41,621.1	50,070.1	58,040.0	0.0	65,960.2	3,100.0	69,060.2
400 Other	15,640.3	21,490.1	21,808.1	0.0	24,749.4	7,557.4	32,306.8
EXPENDITURES	91,170.3	97,549.7	116,135.6	43,227.58	128,300.2	10,657.4	138,957.6
EXPENSE	91,170.3	97,549.7	116,135.6	43,227.58	128,300.2	10,657.4	138,957.6
FTE POSITIONS							
810 Permanent	300.00	239.00	330.00	303.00	330.00	0.00	330.00
820 Term	15.00	0.00	15.00	0.00	15.00	0.00	15.00
FTEs	315.00	239.00	345.00	303.00	345.00	0.00	345.00
FTE POSITIONS	315.00	239.00	345.00	303.00	345.00	0.00	345.00

Child Support Enforcement

BU PCode Department
63000 P523 000000

State of New Mexico
S-8 Financial Summary
(Dollars in Thousands)

	2024-25 Opbud	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	Base	----- FY 2027 Agency Request ----- Expansion	Total
REVENUE							
111 General Fund Transfers	13,156.4	12,875.8	14,328.1	0.0	15,470.7	0.0	15,470.7
112 Other Transfers	0.0	280.6	0.0	0.0	0.0	0.0	0.0
120 Federal Revenues	29,530.5	27,615.7	33,652.9	0.0	33,838.8	0.0	33,838.8
130 Other Revenues	267.0	628.2	201.0	0.0	597.4	0.0	597.4
REVENUE, TRANSFERS	42,953.9	41,400.3	48,182.0	0.0	49,906.9	0.0	49,906.9
REVENUE	42,953.9	41,400.3	48,182.0	0.0	49,906.9	0.0	49,906.9
EXPENSE							
200 Personal services and employee benefits	25,785.6	27,857.8	32,368.6	36,635.1	34,093.5	0.0	34,093.5
300 Contractual services	12,511.3	8,472.0	10,623.2	0.0	10,623.2	0.0	10,623.2
400 Other	4,657.0	5,030.2	5,190.2	0.0	5,190.2	0.0	5,190.2
EXPENDITURES	42,953.9	41,360.0	48,182.0	36,635.14	49,906.9	0.0	49,906.9
EXPENSE	42,953.9	41,360.0	48,182.0	36,635.14	49,906.9	0.0	49,906.9
FTE POSITIONS							
810 Permanent	340.00	296.00	340.00	370.00	340.00	0.00	340.00
FTEs	340.00	296.00	340.00	370.00	340.00	0.00	340.00
FTE POSITIONS	340.00	296.00	340.00	370.00	340.00	0.00	340.00

Child Support Enforcement

BU PCode Department
63000 P523 000000

State of New Mexico
S-8 Financial Summary
(Dollars in Thousands)

	2024-25 Opbud	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	Base	----- FY 2027 Agency Request ----- Expansion	Total
REVENUE							
111 General Fund Transfers	13,156.4	12,875.8	14,328.1	0.0	15,470.7	0.0	15,470.7
112 Other Transfers	0.0	280.6	0.0	0.0	0.0	0.0	0.0
120 Federal Revenues	29,530.5	27,615.7	33,652.9	0.0	33,838.8	0.0	33,838.8
130 Other Revenues	267.0	628.2	201.0	0.0	597.4	0.0	597.4
REVENUE, TRANSFERS	42,953.9	41,400.3	48,182.0	0.0	49,906.9	0.0	49,906.9
REVENUE	42,953.9	41,400.3	48,182.0	0.0	49,906.9	0.0	49,906.9
EXPENSE							
200 Personal services and employee benefits	25,785.6	27,857.8	32,368.6	36,635.1	34,093.5	0.0	34,093.5
300 Contractual services	12,511.3	8,472.0	10,623.2	0.0	10,623.2	0.0	10,623.2
400 Other	4,657.0	5,030.2	5,190.2	0.0	5,190.2	0.0	5,190.2
EXPENDITURES	42,953.9	41,360.0	48,182.0	36,635.14	49,906.9	0.0	49,906.9
EXPENSE	42,953.9	41,360.0	48,182.0	36,635.14	49,906.9	0.0	49,906.9
FTE POSITIONS							
810 Permanent	340.00	296.00	340.00	370.00	340.00	0.00	340.00
FTEs	340.00	296.00	340.00	370.00	340.00	0.00	340.00
FTE POSITIONS	340.00	296.00	340.00	370.00	340.00	0.00	340.00

Medical Assistance

BU PCode Department
63000 P524 000000

State of New Mexico
S-8 Financial Summary
(Dollars in Thousands)

	2024-25 Opbud	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	Base	----- FY 2027 Agency Request -----		Total
						Expansion		
REVENUE								
112 Other Transfers	0.0	0.0	54,404.5	0.0	0.0	0.0	0.0	0.0
Not Used	0.0	0.0	54,404.5	0.0	0.0	0.0	0.0	0.0
111 General Fund Transfers	1,370,129.4	1,442,991.7	1,363,990.8	0.0	1,280,717.7	2,859.6		1,283,577.3
112 Other Transfers	426,229.7	417,922.5	900,114.6	0.0	895,803.0	0.0		895,803.0
120 Federal Revenues	6,952,493.4	6,855,767.0	8,808,763.4	0.0	8,173,184.8	4,352.5		8,177,537.3
130 Other Revenues	136,556.4	95,195.8	161,242.0	0.0	179,564.2	1,228.0		180,792.2
150 Fund Balance	0.0	44.0	811.4	0.0	44,811.4	0.0		44,811.4
REVENUE, TRANSFERS	8,885,408.9	8,811,921.0	11,234,922.2	0.0	10,574,081.1	8,440.1		10,582,521.2
REVENUE	8,885,408.9	8,811,921.0	11,289,326.7	0.0	10,574,081.1	8,440.1		10,582,521.2
EXPENSE								
200 Personal services and employee benefits	19,172.1	17,821.4	22,279.1	27,255.4	24,246.2	4,849.4		29,095.6
300 Contractual services	131,102.5	195,582.6	192,915.6	0.0	214,118.6	3,145.5		217,264.1
400 Other	8,735,134.3	8,452,469.0	11,074,132.0	0.0	10,335,716.3	445.2		10,336,161.5
EXPENDITURES	8,885,408.9	8,665,873.0	11,289,326.7	27,255.44	10,574,081.1	8,440.1		10,582,521.2
EXPENSE	8,885,408.9	8,665,873.0	11,289,326.7	27,255.44	10,574,081.1	8,440.1		10,582,521.2
FTE POSITIONS								
810 Permanent	221.50	163.00	221.50	220.00	215.50	42.00		257.50
820 Term	0.00	0.00	2.00	0.00	0.00	0.00		0.00
FTEs	221.50	163.00	223.50	220.00	215.50	42.00		257.50
FTE POSITIONS	221.50	163.00	223.50	220.00	215.50	42.00		257.50

STATE OF NEW MEXICO
HEALTH CARE AUTHORITY
Medical Assistance Division

Expenditures
FY 27 June 2025 Data Budget Projection Trend Model (\$000s)

FY27

No.	Description	FY 26 Title XIX & XXI Projection	FY 26 Title XIX Projected Claims	Δ Price	\$ Impact	Δ Recipient	\$ Impact	Δ Utilization	\$ Impact	Δ Projected \$ Lump Sum & Others	FY 27 TOTAL Medicaid Projection	Change from FY26	% Change from FY26	March 2025 Data Projection	Change from Previous	% Change from Previous	No.
A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
1	Inpatient Hospital	62,309	62,023	0.00%	-	-1.08%	(672)	2.01%	1,233	-	62,870	561	0.90%	-	62,870	--	1
2	DSH/GME/IME	199,358	199,358	0.00%	-	0.00%	-	0.00%	-	-	199,358	-	0.00%	-	199,358	--	2
3	UC Pool/TAP	-	-	--	-	--	-	--	-	-	-	-	--	-	-	--	3
4	Physician Services	38,003	37,471	0.00%	-	-0.09%	(35)	0.94%	352	-	38,320	317	0.83%	-	38,320	--	4
5	IHS Hospital	192,040	187,335	2.10%	3,937	-0.70%	(1,345)	0.00%	-	-	194,632	2,592	1.35%	-	194,632	--	5
6	ICF IID	35,195	35,195	1.20%	422	-0.80%	(285)	1.30%	459	-	35,792	597	1.70%	-	35,792	--	6
7	Clinic Services	96,322	94,708	0.00%	-	-0.06%	(55)	0.33%	309	-	96,575	254	0.26%	-	96,575	--	7
8	Federal Qualified Health Centers	3,722	3,650	0.00%	-	-0.30%	(11)	1.22%	45	-	3,755	33	0.90%	-	3,755	--	8
9	Other Practitioners	53,457	51,087	0.00%	-	0.00%	()	0.94%	481	-	53,938	481	0.90%	-	53,938	--	9
10	Outpatient Hospital	39,259	38,680	0.00%	-	0.20%	78	0.71%	275	-	39,612	353	0.90%	-	39,612	--	10
11	BH FFS	68,737	65,598	0.22%	142	0.84%	553	0.00%	-	-	69,431	695	1.01%	-	69,431	--	11
12	Others	141,623	138,806	0.10%	140	0.71%	987	-2.69%	(3,758)	-	142,992	1,369	0.97%	-	142,992	--	12
13	HBCS-ARPA Reinvestment - FFS	-	-	0.00%	-	-	-	-	-	-	-	-	--	-	-	--	13
14																	14
15	Fee-For-Service Subtotal	930,026	913,912	0.51%	4,641	-0.09%	(786)	-0.07%	(605)	-	937,277	7,251	0.78%	-	937,277	--	15
16	DD, MF & Mi Via	1,026,922	1,015,617	1.47%	14,882	6.49%	66,828	1.89%	20,781	-	1,129,414	102,491	9.98%	-	1,129,414	--	16
17	HBCS-ARPA Reinvestment - DD, MF & Mi Via	-	-	-	-	-	-	-	-	-	-	-	--	-	-	--	17
18																	18
19	Waivers Subtotal	1,026,922	1,015,617	1.47%	14,882	6.49%	66,828	1.89%	20,781	-	1,129,414	102,491	9.98%	-	1,129,414	--	19
20	TC - Physical Health	2,316,921	2,200,784	0.00%	-	-0.64%	(14,035)	3.96%	86,486	(20)	2,389,352	72,431	3.13%	-	2,389,352	--	20
21	TC - LTSS	1,912,918	1,908,835	0.00%	-	2.35%	44,842	4.20%	82,082	31,425	2,071,267	158,349	8.28%	-	2,071,267	--	21
22	TC - Behavioral Health	723,535	680,326	0.00%	-	-0.37%	(2,545)	4.70%	31,822	-	752,812	29,277	4.05%	-	752,812	--	22
23	TC Medicaid Expansion-Physical Health	2,016,358	2,016,358	0.00%	-	-11.54%	(232,733)	5.53%	98,563	-	1,882,189	(134,169)	-6.65%	-	1,882,189	--	23
24	TC Medicaid Expansion-Behavioral Health	386,489	386,489	0.00%	-	-12.82%	(49,541)	6.23%	20,981	-	357,929	(28,560)	-7.39%	-	357,929	--	24
25	HBCS-ARPA Reinvestment - MCO	-	-	-100.00%	-	-	-	-	-	-	-	-	--	-	-	--	25
26																	26
27	Turquoise Care Managed Care Subtotal	7,356,221	7,192,792	0.00%	-	-3.53%	(254,010)	4.61%	319,934	31,404	7,453,549	97,328	1.32%	-	7,453,549	--	27
28	Medicare Part A	3,078	3,078	5.67%	174	2.70%	88	0.15%	5	-	3,345	267	8.69%	-	3,345	--	28
29	Medicare Part B	236,590	236,590	6.03%	14,273	2.60%	6,530	0.15%	394	-	257,787	21,197	8.96%	-	257,787	--	29
30	Medicare Part D	59,079	59,079	7.51%	4,439	-1.04%	(662)	-0.08%	(50)	-	62,806	3,727	6.31%	-	62,806	--	30
31	Medicare Subtotal	298,747	298,747	6.32%	18,887	1.88%	5,956	0.11%	349	-	323,938	25,192	8.43%	-	323,938	--	31
32	Health Information Technology	-	-	--	-	--	-	--	-	-	-	-	--	-	-	--	32
33	Utilization Review & Contracts	-	-	--	-	--	-	--	-	-	-	-	--	-	-	--	33
34	Healthcare Delivery and Access Act (HDAA)	1,649,878	1,649,878	0.00%	-	0.00%	-	0.00%	-	-	1,649,878	-	0.00%	-	1,649,878	--	34
35	Ambulance Services Payment Program (ASPP)	18,512	18,512	0.00%	-	0.00%	-	0.00%	-	-	18,512	-	0.00%	-	18,512	--	35
36	Hospital & Provider Rate Increases CY25	83,506	83,506	0.00%	-	0.00%	-	0.00%	-	-	-	(83,506)	-100.00%	-	-	--	36
37	Hospital & Provider Rate Increases FY27	-	-	--	-	--	-	--	-	62,765	62,765	62,765	--	-	62,765	--	37
38	Expansion Items CY25	6,001	6,001	0.00%	-	0.00%	-	0.00%	-	-	6,001	-	0.00%	-	6,001	--	38
39	Expansion Items FY26	19,181	19,181	0.00%	-	0.00%	-	0.00%	-	-	19,181	-	0.00%	-	19,181	--	39
40	SB246 Health Care Quality Surcharge	12,372	12,372	0.00%	-	0.00%	-	0.00%	-	(12,372)	-	(12,372)	-100.00%	-	-	--	40
41	1115 Program Implementation FY26 & Other	47,852	47,852	0.00%	-	0.00%	-	0.00%	-	(864)	46,988	(864)	-1.81%	-	46,988	--	41
42	Other Subtotal	1,837,302	1,837,302	0.00%	-	0.00%	-	0.00%	-	49,529	1,803,325	(33,977)	-1.85%	-	1,803,325	--	42
43	Grand Total	11,449,218	11,258,370	0.34%	38,409	-1.61%	(182,012)	3.06%	340,460	80,934	11,647,503	198,285	1.73%	-	11,647,503	--	43
44																	44
45	HB2 GF supports Rural & Underserved (SB7)	150,000	150,000	0.00%	-	0.00%	-	0.00%	-	-	-	(150,000)	-100.00%	-	-	--	45
46		-	-	--	-	--	-	--	-	-	-	-	--	-	-	--	46

Notes:

- (Line 2) Disproportionate Share Hospital (DSH), Direct Graduate Medical Education (GME), Indirect Medical Education (IME)
- (Line 7) Clinic Services consists primarily of Medicaid School-Based Services (MSBS) with small amounts also going to clinics providing a variety of services.
- (Line 12) Others contains: Transportation, Lab/X-Ray, Prosthetics, RHC, Hospice, Home Health, Medical Supplies, Prescribed Drugs, Dental Services, EPSDT, Nursing Facility, Maintenance, Family Planning, Ambulance, PACE, and Case Management.

No.	State Share Revenues:	FY26 Budget Appropriation	Billed	Collected	FY27 HCA Projection	Change from FY26	Change From Prior
48	HCA DDS Intra Agency Transfer	284,325			323,440	39,116	
49	DDSD Recurring Supp Waiver, Prov Rates						
50	HCA DDS Additional Need /(Surplus)				-	(7,258)	
51	Early Childhood Education Childcare Dept. for FIT, rate increases ¹⁵	15,902			15,902	-	
52	Early Childhood Education Medicaid Behavioral Health				-	-	
53	Department of Health for FQHCs	462			462	-	
54	Early Childhood Education Childcare Care Fund	39,300			39,300	-	
55	Health Care Affordability Fund	30,000			-	(30,000)	
56	County Supported Medicaid Fund	62,969			59,391	(3,578)	
57	Tobacco Settlement Revenue, Base	10,263			14,144	3,881	
58	MAD BH for Opioid	7,214			-	-	
59	UNM IGT	150,576			136,847	1,104	
60	Healthcare Delivery and Access Act (HDAA) ¹⁶	304,883			304,883	-	
61	Miner's Colfax IGT(move to sm box, also an IGT) ¹⁴	675			675	-	
62	Total Operating Transfers In	906,569			895,044	3,264	
63							
64	Health Care and Disability Health Care Facility Funds ¹⁷	35,465			29,279	(6,186)	
65	Physician UPL UNM	779			796	8	
66	Safety Net Care Pool (SNCP) ¹²	77,341			77,341	-	
67	Ambulance Svc Pmt Prg (ASPP), Emrg Grnd Amb Svc (EGAS)	6,660			6,660	-	
68	SB 42 Inpatient Services-Counties ¹⁴	-			-	-	
69	Drug Rebates	33,000			53,000	20,000	
70	Drug Rebates - non-recurring revenue from fund balance				44,000	44,000	
71	Fraud	872			872	-	
72	Income Diversion Trust	486			486	-	
73	Buy-In Recovery	215			215	-	
74	Cost Settlement	500			500	-	
75	Estate Recovery	9			9	-	
76	HMS-RAC-TPL/Subrogation				-	-	
77	Total Other Revenues	155,326			213,157	57,822	
78							
79	FY26 General Fund Need	1,479,225					
80	FY26 Surplus / (Shortfall)	38,683					
81							
82	House Bill 2 Appropriation FY26	1,486,508					
83	<i>GF Transfer to Administrative Hearings Office (AHO)</i>	<i>(100)</i>					
84	FY26 Appropriation After GF Support and GF Transfer	1,486,408					
85	FY26 Balance for Health Care facility subsidies	18,000					
86	FY26 & Prior yrs Rural & Underserved Health Care Fund Balance	76,000					
87							
88	FY26 GF CCBHC (GRO Funding, BHSD)	3,000					
89	FY26 Special Appropriation: Government Results and Opportunity fund (GRO) (1115 initiatives)	14,289					
90	FY26 Special Appropriation: Non-Recurring Section 5 (Expansion Items 1115 initiatives)	13,710					
91	FY26 appropriation and GRO fund	1,517,408					
92	FY27 GRO fund for Traditional Healing and CCBHC service providers				9,813		
93	FY27 General Fund Need				1,518,805	30,267	
94	FY27 State Revenue Surplus / (Shortfall)				8,416	(30,267)	
95	<i>Federal Funds Surplus / (Shortfall)</i>				28,535	(106,320)	
96	<i>Total Expenditures associated with Surplus / (Shortfall)</i>				36,951	(136,587)	

No.	PROJECTED REVENUES	Funds Available	Funds Remaining	Revenues Projection	Change from FY26	Change From Prior
97	Medicaid Projection			11,647,503	198,285	
98	Federal Revenues			8,994,616	97,508	
99	HCBS-ARPA Revenues ¹⁹			-	-	
100	Federal Disallowance ¹¹			-	-	
101	Federal Audit ¹⁹			-	-	
102	MSBS CPE ¹³			25,881	111	
103	IHS Referrals at 100% FFP			-	-	
104	Medicare Part A & B Premiums Interest			-	-	
105	HBZ GF supports Rural & Underserved			-	-	
106	UNM IGT (Additional)			-	-	
107	All State Revenues			2,627,006	100,666	

Notes:

- HIT, IHS, QI-1 Medicare Part B premiums, Refugees are eligible for 100% FFP.
- Under ACA, the Medicaid Expansion population will be federally funded 90%.
- Health Homes, sterilization and family planning service costs are eligible for 90% FFP.
- Breast and cervical cancer (BCC) program receives enhanced FMAP. The Final FFY2026 EFMAP is 80.16%. The preliminary FFY2027 EFMAP is 79.95%.
- CHIP is a Title XXI program with enhanced FMAP. CHIP was reauthorized on 1/22/2018. The Final FFY2026 EFMAP is 80.16%. The preliminary FFY2026 EFMAP is 79.95%.
- Utilization review and some other admin. Expenses are federally matched at 75%.
- Title XIX expenditures with regular FMAP. The Final FFY2026 FMAP is 71.66%. The preliminary FFY2027 FMAP is 71.36%.
- Administration expenditures are eligible for 50% FFP.
- Pregnancy termination, special needs and state only buy-in for Medicare Part B and all Medicare Part D buy-ins (Claw back) expenditures are not eligible for FFP and are 100% GF.
- DOH for DD, MF and MI Via waiver services; projected revenue is without the 3% for admin.
- Includes potential disallowance for 100% IHS referral.
- This line is the 1/12th% of the gross receipts tax contributed by the counties to support the Safety Net Care Pool and Hospital Payments.
- Starting in FY16, school districts contribute the state share of Medicaid School-Based Services through Certified Public Expenditures.
- SB 42 stated that counties will contribute the state share of payments for fee-for-service inpatient services for their respective incarcerated populations.
- FIT is in the new Early Childhood Education Childcare Department (formerly part of DOH).
- SB17 2024 - Healthcare Delivery and Access Act (HDAA) funds will be transferred to HCA/MAD.
- Per SB246 in 2019 funds deposited in this fund will be appropriated to HCA/MAD.
- Children's wrap around is currently treated as a lump sum expenditure on physical health line.
- Federal Audit Risks include CMS Overpayments and OIG Audits

Income Support

BU PCode Department
63000 P525 000000

State of New Mexico
S-8 Financial Summary
(Dollars in Thousands)

	2024-25 Opbud	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	Base	----- FY 2027 Agency Request ----- Expansion	Total
REVENUE							
111 General Fund Transfers	78,080.2	77,350.5	93,054.0	0.0	140,080.0	17,748.5	157,828.5
112 Other Transfers	0.0	729.7	0.0	0.0	0.0	0.0	0.0
120 Federal Revenues	1,278,779.9	1,308,613.5	1,435,259.3	0.0	1,431,926.4	24,510.0	1,456,436.4
130 Other Revenues	60.8	3,664.3	60.8	0.0	60.8	0.0	60.8
REVENUE, TRANSFERS	1,356,920.9	1,390,358.0	1,528,374.1	0.0	1,572,067.2	42,258.5	1,614,325.7
REVENUE	1,356,920.9	1,390,358.0	1,528,374.1	0.0	1,572,067.2	42,258.5	1,614,325.7
EXPENSE							
200 Personal services and employee benefits	73,824.3	72,666.9	90,938.0	98,822.4	93,485.1	20,886.4	114,371.5
300 Contractual services	46,742.4	78,491.7	106,486.0	0.0	138,299.8	10,397.0	148,696.8
400 Other	1,236,354.2	1,239,178.6	1,330,950.1	0.0	1,340,282.3	10,975.1	1,351,257.4
EXPENDITURES	1,356,920.9	1,390,337.3	1,528,374.1	98,822.36	1,572,067.2	42,258.5	1,614,325.7
EXPENSE	1,356,920.9	1,390,337.3	1,528,374.1	98,822.36	1,572,067.2	42,258.5	1,614,325.7
FTE POSITIONS							
810 Permanent	1,052.00	907.00	1,050.00	1,103.00	1,075.00	260.00	1,335.00
820 Term	8.00	0.00	10.00	0.00	10.00	0.00	10.00
FTEs	1,060.00	907.00	1,060.00	1,103.00	1,085.00	260.00	1,345.00
FTE POSITIONS	1,060.00	907.00	1,060.00	1,103.00	1,085.00	260.00	1,345.00

TANF MAP

PROGRAM	FY25 Actuals				FY26 Opbud				FY27 Request			
	GF	OSF	FF	TOTAL	GF	OSF	FF	TOTAL	GF	OSF	FF	TOTAL
General Funds in HSD for TANF-MOE	-	-	-	-	150.6	-	-	150.6	150.6	-	-	150.6
TANF Transition Bonus: Pitch for the People	1,821.6	-	-	1,821.6	1,821.6	-	-	1,821.6	1,821.6	-	-	1,821.6
Unspent balances from prior 3/4 qtrs	-	-	101,684.5	101,684.5	-	-	116,984.4	116,984.4	-	-	102,552.9	102,552.9
TANF Block Grant 1/4 qtrs	-	-	27,480.0	27,480.0	-	-	27,480.0	27,480.0	-	-	27,480.0	27,480.0
TANF Block Grant 3/4 qtrs	-	-	82,439.9	82,439.9	-	-	82,439.9	82,439.9	-	-	82,439.9	82,439.9
TANF Contingency	-	-	14,480.1	14,480.1	-	-	14,480.1	14,480.1	-	-	14,480.1	14,480.1
TANF General Fund	-	-	-	-	-	-	-	-	-	-	-	-
TOTAL REVENUE	1,821.6	-	226,084.5	227,906.1	1,972.2	-	241,384.4	243,356.6	1,972.2	-	226,952.9	228,925.1
Program Support ADMIN	-	-	2,528.0	2,528.0	-	-	2,528.0	2,528.0	-	-	2,528.0	2,528.0
ISD ADMIN	-	-	1,908.9	2,829.6	-	-	8,979.7	8,979.7	-	-	8,979.7	8,979.7
ADMIN TOTAL	-	-	4,436.9	5,357.6	-	-	11,507.7	11,507.7	-	-	11,507.7	11,507.7
Cash Assistance	-	-	41,307.9	33,457.8	-	-	55,670.8	55,670.8	-	-	55,670.8	55,670.8
Transition Bonus	640.5	-	-	586.9	1,821.6	-	-	1,821.6	1,821.6	-	-	1,821.6
Clothing Allowance	-	-	2,228.6	1,534.9	-	-	2,228.6	2,228.6	-	-	2,228.6	2,228.6
Diversion Payments	-	-	61.4	46.9	-	-	52.8	52.8	-	-	52.8	52.8
State Funded Legal Alien - MOE	97.5	-	0.0	161.4	150.6	-	-	150.6	150.6	-	-	150.6
Employment Retention Bonus	-	-	0.0	-	-	-	-	-	-	-	-	-
Cash Assistance Total	738.0	-	43,597.9	35,787.9	1,972.2	-	57,952.2	59,924.4	1,972.2	-	57,952.2	59,924.4
NMW Workforce Program	-	-	-	-	-	-	-	-	-	-	-	-
Transportation/HSE/Youthbuild	-	-	8,576.8	5,246.4	-	-	7,650.0	7,650.0	-	-	7,650.0	7,650.0
Wage Subsidy Program-100%	-	-	1,679.6	1,330.4	-	-	2,569.2	2,569.2	-	-	2,569.2	2,569.2
Vocational Training (DWS)	-	-	533.2	394.0	-	-	500.0	500.0	-	-	500.0	500.0
High School Equivalency	-	-	413.5	500.0	-	-	500.0	500.0	-	-	500.0	500.0
NMW- Career Links (DWS)	-	-	759.2	546.3	-	-	2,569.2	2,569.2	-	-	2,569.2	2,569.2
TANF-Employment Related Costs	-	-	462.9	423.4	-	-	700.0	700.0	-	-	700.0	700.0
Support Services Total	-	-	12,425.2	8,440.5	-	-	14,488.3	14,488.3	-	-	14,488.3	14,488.3
ECECD - Childcare Training	-	-	31,527.5	26,272.9	-	-	31,527.5	31,527.5	-	-	31,527.5	31,527.5
T-CYFD CARA/DSCM	-	-	1,208.9	795.8	-	-	2,173.0	2,173.0	-	-	2,173.0	2,173.0
T-CYFD Admin	-	-	1,241.3	782.3	-	-	1,618.1	1,618.1	-	-	1,618.1	1,618.1
T-CYFD Family Outreach	-	-	10,342.2	6,298.4	-	-	5,284.8	5,284.8	-	-	5,284.8	5,284.8
T-CYFD Keeping Families Together	-	-	862.0	729.0	-	-	8,722.8	8,722.8	-	-	8,722.8	8,722.8
T-HED Adult Basic Education	-	-	1,953.1	783.6	-	-	4,000.0	4,000.0	-	-	4,000.0	4,000.0
T-HED Skilled Training Programs	-	-	947.9	372.6	-	-	1,000.0	1,000.0	-	-	1,000.0	1,000.0
T-ECECD - Pre-K Program	-	-	-	-	-	-	-	-	-	-	-	-
T-PED- Graduation	-	-	500.0	500.0	-	-	500.0	500.0	-	-	500.0	500.0
Other Agencies Total	-	-	48,582.9	36,534.7	-	-	54,826.1	54,826.1	-	-	54,826.1	54,826.1
Support Svcs/Other Agencies	-	-	61,008.1	44,975.2	-	-	69,314.4	69,314.4	-	-	69,314.4	69,314.4
ISD PROGRAM -TANF	738.0	-	104,606.0	80,763.1	1,972.2	-	127,266.6	129,238.8	1,972.2	-	127,266.6	129,238.8
PROGRAM SUPPORT ADMIN - TANF	-	-	2,528.0	2,528.0	-	-	2,528.0	2,528.0	-	-	2,528.0	2,528.0
ISD ADMIN - TANF	-	-	1,908.9	1,908.9	-	-	8,979.7	8,979.7	-	-	8,979.7	8,979.7
ISD ADMIN - TANF Deloitte	-	-	-	-	-	-	-	-	-	-	-	-
TOTAL HSD Exp. - TANF	738.0	-	109,042.9	85,200.0	1,972.2	-	138,774.3	140,746.5	1,972.2	-	138,774.3	140,746.5
SWCAP	-	-	57.2	57.2	-	-	57.2	57.2	-	-	57.2	57.2
Prior Year Adjustments	-	-	-	-	-	-	-	-	-	-	-	-
TOTAL HSD Exp. - TANF W/ SWCAP &ADJ.	738.0	-	109,100.1	85,257.2	1,972.2	-	138,831.5	140,803.7	1,972.2	-	138,831.5	140,803.7
Calculated Carryover Balance	1,083.60	-	116,984.4	142,648.9	-	-	102,552.9	102,552.9	-	-	88,121.4	88,121.4

S-8 Financial Summary

(Dollars in Thousands)

BU **PCode** **Department**
 63000 P762 000000

	2024-25 Opbud	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	Base	----- FY 2027 Agency Request ----- Expansion	Total
REVENUE							
111 General Fund Transfers	0.0	0.0	0.0	0.0	0.0	0.0	0.0
112 Other Transfers	0.0	0.0	0.0	0.0	0.0	0.0	0.0
130 Other Revenues	0.0	97,825.0	178,028.5	0.0	205,264.1	0.0	205,264.1
150 Fund Balance	0.0	11,367.7	0.0	0.0	0.0	0.0	0.0
REVENUE, TRANSFERS	0.0	109,192.7	178,028.5	0.0	205,264.1	0.0	205,264.1
REVENUE	0.0	109,192.7	178,028.5	0.0	205,264.1	0.0	205,264.1
EXPENSE							
200 Personal services and employee benefits	0.0	406.4	1,028.5	0.0	1,080.5	0.0	1,080.5
300 Contractual services	0.0	0.0	1,000.0	0.0	2,200.0	0.0	2,200.0
400 Other	0.0	68,721.4	146,000.0	0.0	201,983.6	0.0	201,983.6
EXPENDITURES	0.0	69,127.9	148,028.5	0	205,264.1	0.0	205,264.1
500 Other financing uses	0.0	30,000.0	30,000.0	0.0	0.0	0.0	0.0
OTHER FINANCING USES	0.0	30,000.0	30,000.0	0	0.0	0.0	0.0
EXPENSE	0.0	99,127.9	178,028.5	0	205,264.1	0.0	205,264.1
FTE POSITIONS							
810 Permanent	0.00	0.00	10.00	0.00	10.00	0.00	10.00
FTEs	0.00	0.00	10.00	0.00	10.00	0.00	10.00
FTE POSITIONS	0.00	0.00	10.00	0.00	10.00	0.00	10.00

S-8 Financial Summary

(Dollars in Thousands)

BU PCode Department
63000 P766 000000

	2024-25 Opbud	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	Base	----- FY 2027 Agency Request -----		Total
						Expansion		
REVENUE								
111 General Fund Transfers	171,892.6	171,892.6	177,692.1	0.0	256,390.0	0.0		256,390.0
112 Other Transfers	7,837.2	7,128.0	7,214.0	0.0	3,247.5	0.0		3,247.5
120 Federal Revenues	672,619.9	630,799.0	751,635.9	0.0	934,911.5	0.0		934,911.5
130 Other Revenues	86,597.3	83,113.2	0.0	0.0	0.0	0.0		0.0
REVENUE, TRANSFERS	938,947.0	892,932.9	936,542.0	0.0	1,194,549.0	0.0		1,194,549.0
REVENUE	938,947.0	892,932.9	936,542.0	0.0	1,194,549.0	0.0		1,194,549.0
EXPENSE								
200 Personal services and employee benefits	548.4	0.0	0.0	0.0	800.0	0.0		800.0
300 Contractual services	950.0	0.0	0.0	0.0	8,352.8	0.0		8,352.8
400 Other	937,448.6	799,011.0	936,542.0	0.0	1,185,396.2	0.0		1,185,396.2
EXPENDITURES	938,947.0	799,011.0	936,542.0	0	1,194,549.0	0.0		1,194,549.0
EXPENSE	938,947.0	799,011.0	936,542.0	0	1,194,549.0	0.0		1,194,549.0
FTE POSITIONS								
810 Permanent	5.00	0.00	0.00	0.00	0.00	0.00		0.00
FTEs	5.00	0.00	0.00	0.00	0.00	0.00		0.00
FTE POSITIONS	5.00	0.00	0.00	0.00	0.00	0.00		0.00

S-8 Financial Summary

(Dollars in Thousands)

BU **PCode** **Department**
 63000 P767 000000

	2024-25 Opbud	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	Base	----- FY 2027 Agency Request ----- Expansion	Total
REVENUE							
111 General Fund Transfers	60,019.2	59,980.2	60,231.5	0.0	73,197.9	0.0	73,197.9
112 Other Transfers	3,287.9	3,247.2	3,288.0	0.0	3,600.0	0.0	3,600.0
120 Federal Revenues	34,543.2	43,246.7	36,588.2	0.0	34,184.1	0.0	34,184.1
130 Other Revenues	169.5	6.0	173.5	0.0	173.5	0.0	173.5
REVENUE, TRANSFERS	98,019.8	106,480.1	100,281.2	0.0	111,155.5	0.0	111,155.5
REVENUE	98,019.8	106,480.1	100,281.2	0.0	111,155.5	0.0	111,155.5
EXPENSE							
200 Personal services and employee benefits	5,292.8	5,220.7	6,713.4	8,201.3	7,508.2	0.0	7,508.2
300 Contractual services	90,046.8	98,838.9	91,286.9	0.0	101,186.9	0.0	101,186.9
400 Other	2,680.2	1,985.6	2,280.9	0.0	2,460.4	0.0	2,460.4
EXPENDITURES	98,019.8	106,045.2	100,281.2	8,201.35	111,155.5	0.0	111,155.5
EXPENSE	98,019.8	106,045.2	100,281.2	8,201.35	111,155.5	0.0	111,155.5
FTE POSITIONS							
810 Permanent	68.00	0.00	55.00	70.00	55.00	0.00	55.00
820 Term	2.00	0.00	15.00	0.00	30.00	0.00	30.00
FTEs	70.00	0.00	70.00	70.00	85.00	0.00	85.00
FTE POSITIONS	70.00	0.00	70.00	70.00	85.00	0.00	85.00

BU PCode Department
63000 0000 0000000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
499105	General Fd. Appropriation	1,992,879.7	2,064,092.4	2,066,923.3	0.0	2,183,044.6	72,141.5	2,255,186.1
111	General Fund Transfers	1,992,879.7	2,064,092.4	2,066,923.3	0.0	2,183,044.6	72,141.5	2,255,186.1
416509	Trade & Pro Perm & Licen-Inter	0.0	1.7	0.0	0.0	0.0	0.0	0.0
425909	Other Services - Interagency	12,000.0	14.9	0.0	0.0	0.0	0.0	0.0
451909	Federal Contract - Interagency	2,300.0	1,644.7	2,300.0	0.0	2,300.0	0.0	2,300.0
499901	Transfer In of Capital Asset	0.0	0.0	54,404.5	0.0	0.0	0.0	0.0
499905	Other Financing Sources	349,596.9	310,619.0	445,715.4	0.0	442,363.5	0.0	442,363.5
499906	OFS - INTRA-Agency	0.0	0.0	314,324.8	0.0	323,440.0	0.0	323,440.0
499999	O/F Sources - Higher Ed Instit	75,757.9	134,274.5	150,576.4	0.0	136,847.0	0.0	136,847.0
112	Other Transfers	439,654.8	446,554.8	967,321.1	0.0	904,950.5	0.0	904,950.5
451903	Federal Direct - Operating	9,045,231.2	8,940,509.9	11,165,457.1	0.0	10,708,305.6	37,187.5	10,745,493.1
452003	Federal - Indirect	0.0	180.2	70.7	0.0	1,000.0	0.0	1,000.0
453001	Federal - Contracts & Other	2,200.0	4,384.3	6,223.2	0.0	0.0	0.0	0.0
120	Federal Revenues	9,047,431.2	8,945,074.5	11,171,751.0	0.0	10,709,305.6	37,187.5	10,746,493.1
407101	Insurance Tax	86,597.3	180,938.2	178,028.5	0.0	205,264.1	0.0	205,264.1
416402	Trade & Professions Licenses	508.0	579.7	0.0	0.0	2,703.7	0.0	2,703.7
416909	Other Licenses & Permits-Inter	5.0	9.7	0.0	0.0	0.0	0.0	0.0
422001	Rebates	32,838.2	57,180.5	41,754.8	0.0	62,754.8	0.0	62,754.8
422002	Recoveries	0.0	502.4	0.0	0.0	0.0	0.0	0.0
422902	Other Fees	2,171.8	1,662.3	2,030.0	0.0	705.8	0.0	705.8
425902	Other Services	0.0	0.0	0.0	0.0	0.0	0.0	0.0
425906	Other Services - CU	1,037.0	0.0	778.5	0.0	796.0	0.0	796.0
433102	License Plates	40.0	57.6	0.0	0.0	52.0	0.0	52.0
434301	Payment for Care - 3rd Party	1,587.0	2,081.7	1,587.0	0.0	1,587.0	0.0	1,587.0
434302	Payments For Care-Government	65,373.0	79,008.5	77,340.5	0.0	77,340.5	0.0	77,340.5
434402	Payments For Care-Individuals	144.6	169.2	6,844.6	0.0	6,940.0	0.0	6,940.0
441201	Interest On Investments	0.0	81.2	0.0	0.0	0.0	0.0	0.0
461402	Other Penalties	0.0	57.6	0.0	0.0	0.0	0.0	0.0
461502	Traffic Violation Fees	811.4	0.0	0.0	0.0	0.0	0.0	0.0
472302	Insurance Assessments	479,368.0	465,716.2	518,353.5	0.0	660,208.1	0.0	660,208.1
482202	Premium Surcharges	0.0	0.0	0.0	0.0	0.0	0.0	0.0
482302	Health Care Quality Surcharge	35,465.0	7,224.8	35,465.0	0.0	33,769.7	1,228.0	34,997.7
496902	Miscellaneous Revenue	201.0	252.8	201.0	0.0	597.4	0.0	597.4

BU PCode Department
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S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
496903	Miscellaneous Revenue	180.7	(43,867.0)	184.7	0.0	184.7	0.0	184.7
496908	In-Kind Revenue	0.0	0.0	0.0	0.0	0.0	0.0	0.0
496909	Misc Revenue - Interagency	0.0	500.0	0.0	0.0	0.0	0.0	0.0
130	Other Revenues	706,328.0	752,155.4	862,568.1	0.0	1,052,903.8	1,228.0	1,054,131.8
325900	Restricted FB - Gov	0.0	11,411.7	811.4	0.0	811.4	0.0	811.4
327900	Assigned FB - GOV	0.0	(89.8)	0.0	0.0	44,000.0	0.0	44,000.0
328900	Unassigned FB - Gov	0.0	4,164.1	0.0	0.0	0.0	0.0	0.0
150	Fund Balance	0.0	15,486.1	811.4	0.0	44,811.4	0.0	44,811.4
TOTAL REVENUE		12,186,293.7	12,223,363.2	15,069,374.9	0	14,895,015.9	110,557.0	15,005,572.9
520100	Exempt Perm Positions P/T&F/T	2,037.9	2,362.1	4,067.2	2,504.8	4,641.6	0.0	4,641.6
520200	Term Positions	2,638.8	9,226.3	3,362.2	8.4	2,498.3	0.0	2,498.3
520300	Classified Perm Positions F/T	139,904.9	115,424.9	152,526.8	147,639.0	164,559.6	19,930.6	184,490.2
520400	Classified Perm Positions P/T	68.3	232.5	68.3	0.0	250.0	0.0	250.0
520500	Temporary Positions F/T & P/T	0.0	76.6	6,176.3	0.0	0.0	0.0	0.0
520600	Paid Unused Sick Leave	41.7	131.5	124.3	0.0	105.6	6.6	112.2
520700	Overtime & Other Premium Pay	2,583.7	1,034.7	3,846.6	0.0	949.6	97.5	1,047.1
520800	Annl & Comp Paid At Separation	297.7	439.7	1,006.9	0.0	1,942.1	46.8	1,988.9
520900	Differential Pay	0.6	1.1	0.9	0.0	1,501.7	0.2	1,501.9
521100	Group Insurance Premium	14,219.5	14,584.8	17,155.6	22,824.1	22,710.9	2,540.2	25,251.1
521200	Retirement Contributions	19,743.6	25,084.5	28,387.9	28,827.4	27,413.4	3,361.5	30,774.9
521300	F I C A	9,449.1	9,520.8	11,494.9	9,204.6	12,587.8	1,313.4	13,901.2
521400	Workers' Comp Assessment Fee	19.7	318.9	20.7	0.0	25.7	0.0	25.7
521410	GSD Work Comp Insur Premium	278.4	0.0	335.0	0.0	270.1	0.0	270.1
521500	Unemployment Comp Premium	88.0	98.7	134.5	0.0	206.3	0.0	206.3
521600	Employee Liability Ins Premium	1,557.4	1,669.4	2,763.8	0.0	4,037.5	0.0	4,037.5
521700	RHC Act Contributions	2,112.8	2,614.4	2,909.8	3,133.5	2,645.6	339.0	2,984.6
521900	Other Employee Benefits	0.0	4.2	0.0	0.0	0.0	0.0	0.0
523000	COVID Related Admin Leave	12.3	0.0	0.0	0.0	0.0	0.0	0.0
523200	COVID Related Time Worked	1.0	1.8	0.0	0.0	0.0	0.0	0.0
200	Personal services and employee benef	195,055.4	182,827.0	234,381.7	214,141.9	246,345.8	27,635.8	273,981.6
535100	Medical Services	90,010.8	97,429.0	101,491.8	0.0	108,552.7	0.0	108,552.7
535200	Professional Services	62,140.9	80,785.4	97,018.2	0.0	81,826.9	3,101.0	84,927.9
535209	Professional Svcs - Interagenc	0.0	0.0	0.0	0.0	0.0	0.0	0.0

BU PCode Department
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S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
535300	Other Services	137,543.1	111,261.4	131,786.9	0.0	209,287.9	3,145.5	212,433.4
535309	Other Services - Interagency	4,884.0	4,344.5	4,339.9	0.0	7,772.4	0.0	7,772.4
535310	Other Services - Higher Ed	10,748.1	169.8	377.9	0.0	333.2	0.0	333.2
535400	Audit Services	3,407.9	289.5	1,986.7	0.0	1,844.2	0.0	1,844.2
535500	Attorney Services	265.2	397.7	397.1	0.0	149.6	0.0	149.6
535600	IT Services	53,311.2	174,376.9	166,411.3	0.0	176,421.7	10,397.0	186,818.7
535609	IT Services- Interagency	0.0	0.0	0.0	0.0	0.0	0.0	0.0
535900	Insurance Contract Premiums	7,000.0	7,619.4	7,500.0	0.0	7,650.6	0.0	7,650.6
300	Contractual services	369,311.2	476,673.6	511,309.8	0.0	593,839.2	16,643.5	610,482.7
542100	Employee I/S Mileage & Fares	76.3	16.2	233.7	0.0	421.3	50.0	471.3
542200	Employee I/S Meals & Lodging	425.3	350.5	620.6	0.0	975.7	0.0	975.7
542500	Transp - Fuel & Oil	155.5	142.6	293.8	0.0	282.0	0.0	282.0
542600	Transp - Parts & Supplies	89.7	82.7	267.5	0.0	267.6	0.0	267.6
542700	Transp - Transp Insurance	2.1	2.1	2.3	0.0	1.5	0.0	1.5
542800	State Transp Pool Charges	587.0	730.5	853.4	0.0	1,132.9	0.0	1,132.9
543100	Maint - Grounds & Roadways	0.0	0.1	0.0	0.0	0.0	0.0	0.0
543200	Maint - Furn, Fixt, Equipment	86.4	120.0	325.9	0.0	316.3	0.0	316.3
543300	Maint - Buildings & Structures	208.2	350.0	737.3	0.0	635.6	0.0	635.6
543400	Maint - Property Insurance	1.3	1.3	1.2	0.0	3.8	0.0	3.8
543500	Maint - Supplies	3.3	2.6	16.3	0.0	11.3	0.0	11.3
543700	Maintenance Services	5.0	0.6	2.0	0.0	2.0	0.0	2.0
543820	Maintenance IT	120.0	257.1	1,301.0	0.0	2,037.6	0.0	2,037.6
543830	IT HW/SW Agreements	13,160.0	39,673.7	22,519.5	0.0	22,029.6	12,338.9	34,368.5
544000	Supply Inventory IT	1,008.7	588.7	932.0	0.0	1,477.1	218.5	1,695.6
544100	Supplies-Office Supplies	151.6	147.3	226.4	0.0	224.4	0.0	224.4
544200	Supplies-Medical, Lab, Personal	76.4	12.4	112.0	0.0	20.0	0.0	20.0
544400	Supplies-Field Supplies	2.7	6.3	21.5	0.0	363.3	0.0	363.3
544700	Supplies-Clothing, Unifrms, Linen	0.2	0.0	0.0	0.0	0.0	0.0	0.0
544800	Supplies-Education&Recreation	11.4	0.0	10.0	0.0	142.4	0.0	142.4
544900	Supplies-Inventory Exempt	107.2	1,969.6	538.2	0.0	504.8	0.0	504.8
545600	Reporting & Recording	90.3	96.5	109.6	0.0	125.6	0.0	125.6
545609	Report/Record Inter St Agency	100.0	616.1	100.0	0.0	100.0	0.0	100.0
545700	ISD Services	1,084.3	1,767.9	1,675.7	0.0	2,863.6	0.0	2,863.6

BU PCode Department
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S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

	2024-25 Opbud	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	----- FY 2027 Agency Request -----			
					Base	Expansion	Total	
545710	DOIT HCM Assessment Fees	871.4	791.3	788.0	0.0	1,018.5	0.0	1,018.5
545900	Printing & Photo Services	49.2	261.9	156.7	0.0	118.9	0.0	118.9
546100	Postage & Mail Services	13,519.6	3,259.7	11,813.6	0.0	11,351.0	0.0	11,351.0
546109	Postage&Mail Svcs - Int Agency	0.0	0.0	290.0	0.0	0.0	0.0	0.0
546310	Utilities - Sewer/Garbage	23.0	18.4	25.0	0.0	25.0	0.0	25.0
546320	Utilities - Electricity	165.0	146.3	180.0	0.0	200.0	0.0	200.0
546330	Utilities - Water	19.0	13.7	19.0	0.0	30.0	0.0	30.0
546340	Utilities - Natural Gas	25.3	12.1	25.3	0.0	25.3	0.0	25.3
546400	Rent Of Land & Buildings	19,367.1	16,963.9	20,858.1	0.0	23,799.6	5,695.2	29,494.8
546409	Rent Expense - Interagency	20.0	9.0	447.2	0.0	14.0	0.0	14.0
546500	Rent Of Equipment	607.9	538.7	641.5	0.0	590.2	0.0	590.2
546600	Communications	138.0	114.3	118.0	0.0	119.9	0.0	119.9
546610	DOIT Telecommunications	2,284.6	2,681.2	2,607.4	0.0	2,722.8	0.0	2,722.8
546700	Subscriptions/Dues/License Fee	579.3	1,001.0	618.5	0.0	623.2	0.0	623.2
546800	Employee Training & Education	132.0	147.7	168.8	0.0	185.0	0.0	185.0
546900	Advertising	1,054.6	129.3	384.2	0.0	311.4	0.0	311.4
547000	Legal Settlements	0.0	1,047.5	0.0	0.0	0.0	0.0	0.0
547300	Care & Support	10,712,222.9	10,353,731.5	13,217,494.4	0.0	12,732,374.5	0.0	12,732,374.5
547309	Care & Support InterSt Agency	0.0	1,943.9	186.8	0.0	1,955.9	0.0	1,955.9
547350	Claims and Benefits Expenses	445,354.4	532,774.1	480,998.5	0.0	619,678.4	0.0	619,678.4
547360	Insurance Premiums-non_payroll	85,000.0	68,679.3	145,768.9	0.0	201,853.1	0.0	201,853.1
547400	Grants To Local Governments	426.3	0.0	0.0	0.0	0.0	0.0	0.0
547410	Grants To Public Schools&Univ	0.0	0.0	440.4	0.0	0.0	0.0	0.0
547440	Grants To Other Entities	296.5	1,030.0	325.4	0.0	296.5	0.0	296.5
547450	Grants to Other Agencies	86,868.3	88,591.1	92,708.1	0.0	96,831.8	0.0	96,831.8
547900	Miscellaneous Expense	347.5	3,662.1	446.8	0.0	646.8	0.0	646.8
547909	Misc Expense Interagency	0.0	1,731.0	0.0	0.0	0.0	0.0	0.0
547999	Request to Pay Prior Year	2.9	1,698.0	2.5	0.0	57.5	0.0	57.5
548200	Furniture & Fixtures	20.0	950.0	235.9	0.0	949.6	975.1	1,924.7
548300	Information Tech Equipment	551.3	1,483.2	305.5	0.0	286.8	0.0	286.8
548400	Other Equipment	0.0	17.7	25.0	0.0	75.7	0.0	75.7
549600	Employee O/S Mileage & Fares	161.3	75.9	208.0	0.0	138.0	0.0	138.0
549700	Employee O/S Meals & Lodging	137.0	93.7	171.2	0.0	188.5	0.0	188.5

BU PCode Department
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S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
549900	Brd & Comm O/S Meals & Lodging	0.0	0.0	0.0	0.0	999.8	0.0	999.8
400	Other	11,387,797.3	11,130,532.0	14,009,358.6	0.0	13,731,406.1	19,277.7	13,750,683.8
550000	Other Financing Uses	234,129.8	0.0	284,324.8	0.0	0.0	0.0	0.0
555100	Other Financing Uses	0.0	227,719.2	0.0	0.0	323,424.8	47,000.0	370,424.8
555106	OFU - INTRA-Agency	0.0	30,000.0	30,000.0	0.0	0.0	0.0	0.0
500	Other financing uses	234,129.8	257,719.2	314,324.8	0.0	323,424.8	47,000.0	370,424.8
TOTAL EXPENSE		12,186,293.7	12,047,751.7	15,069,374.9	214,141.86	14,895,015.9	110,557.0	15,005,572.9
810	Permanent	2,344.50	1,650.00	2,411.50	2,066.00	2,448.50	302.00	2,750.50
810	Permanent	2,344.50	1,650.00	2,411.50	2,066.00	2,448.50	302.00	2,750.50
820	Term	68.00	0.00	8.00	0.00	55.00	0.00	55.00
820	Term	68.00	0.00	8.00	0.00	55.00	0.00	55.00
TOTAL FTE POSITIONS		2,412.50	1,650.00	2,419.50	2,066.00	2,503.50	302.00	2,805.50

Developmental Disabilities Support

State of New Mexico

BU PCode Department
63000 P519 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
499105	General Fd. Appropriation	252,678.6	252,529.2	306,583.2	0.0	347,310.0	47,000.0	394,310.0
111	General Fund Transfers	252,678.6	252,529.2	306,583.2	0.0	347,310.0	47,000.0	394,310.0
499905	Other Financing Sources	0.0	149.4	0.0	0.0	0.0	0.0	0.0
112	Other Transfers	0.0	149.4	0.0	0.0	0.0	0.0	0.0
451903	Federal Direct - Operating	18,548.7	13,739.2	17,684.5	0.0	19,163.9	0.0	19,163.9
120	Federal Revenues	18,548.7	13,739.2	17,684.5	0.0	19,163.9	0.0	19,163.9
433102	License Plates	40.0	57.6	0.0	0.0	52.0	0.0	52.0
434402	Payments For Care-Individuals	144.6	169.2	184.6	0.0	280.0	0.0	280.0
496903	Miscellaneous Revenue	0.0	0.2	0.0	0.0	0.0	0.0	0.0
130	Other Revenues	184.6	227.0	184.6	0.0	332.0	0.0	332.0
328900	Unassigned FB - Gov	0.0	338.4	0.0	0.0	0.0	0.0	0.0
150	Fund Balance	0.0	338.4	0.0	0.0	0.0	0.0	0.0
TOTAL REVENUE		271,411.9	266,983.3	324,452.3	0.0	366,805.9	47,000.0	413,805.9
520100	Exempt Perm Positions P/T&F/T	0.0	136.2	96.1	0.0	159.0	0.0	159.0
520200	Term Positions	1,705.8	5,101.8	0.0	0.0	0.0	0.0	0.0
520300	Classified Perm Positions F/T	11,816.0	5,766.7	13,099.4	0.0	13,315.0	0.0	13,315.0
520400	Classified Perm Positions P/T	0.0	232.5	0.0	0.0	232.8	0.0	232.8
520600	Paid Unused Sick Leave	2.9	6.2	3.4	0.0	15.4	0.0	15.4
520700	Overtime & Other Premium Pay	192.6	231.9	525.2	0.0	245.0	0.0	245.0
520800	Annl & Comp Paid At Separation	21.2	32.6	144.2	0.0	20.8	0.0	20.8
520900	Differential Pay	0.0	0.4	0.0	0.0	0.4	0.0	0.4
521100	Group Insurance Premium	554.8	1,299.4	1,250.8	0.0	2,214.4	0.0	2,214.4
521200	Retirement Contributions	1,160.6	2,162.1	2,636.6	0.0	2,562.4	0.0	2,562.4
521300	F I C A	473.0	823.1	1,026.4	0.0	1,000.8	0.0	1,000.8
521400	Workers' Comp Assessment Fee	1.6	25.8	1.6	0.0	1.8	0.0	1.8
521410	GSD Work Comp Insur Premium	22.5	0.0	25.7	0.0	19.4	0.0	19.4
521500	Unemployment Comp Premium	7.1	8.0	10.3	0.0	14.8	0.0	14.8
521600	Employee Liability Ins Premium	125.7	135.2	212.4	0.0	289.4	0.0	289.4
521700	RHC Act Contributions	129.9	224.8	229.8	0.0	261.0	0.0	261.0
200	Personal services and employee benef	16,213.7	16,186.7	19,261.9	0.0	20,352.4	0.0	20,352.4
535100	Medical Services	0.0	1,840.5	2,313.6	0.0	164.0	0.0	164.0
535200	Professional Services	3,084.6	6,771.6	7,377.8	0.0	4,917.2	0.0	4,917.2
535300	Other Services	1,156.2	1,850.7	2,206.0	0.0	7,229.6	0.0	7,229.6

Developmental Disabilities Support

State of New Mexico

BU PCode Department
63000 P519 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
535310	Other Services - Higher Ed	8,248.1	316.3	377.9	0.0	333.2	0.0	333.2
535600	IT Services	100.0	0.3	5.3	0.0	5.0	0.0	5.0
300	Contractual services	12,588.9	10,779.4	12,280.6	0.0	12,649.0	0.0	12,649.0
542100	Employee I/S Mileage & Fares	10.0	6.9	30.0	0.0	30.0	0.0	30.0
542200	Employee I/S Meals & Lodging	10.0	11.2	60.0	0.0	60.0	0.0	60.0
542500	Transp - Fuel & Oil	16.2	25.4	60.0	0.0	60.0	0.0	60.0
542600	Transp - Parts & Supplies	6.2	4.9	15.0	0.0	15.0	0.0	15.0
542700	Transp - Transp Insurance	0.2	0.2	0.2	0.0	0.1	0.0	0.1
542800	State Transp Pool Charges	178.3	174.8	300.0	0.0	300.0	0.0	300.0
543200	Maint - Furn, Fixt, Equipment	7.4	6.6	80.0	0.0	80.0	0.0	80.0
543300	Maint - Buildings & Structures	0.0	3.0	25.0	0.0	25.0	0.0	25.0
543400	Maint - Property Insurance	0.1	0.1	0.1	0.0	0.3	0.0	0.3
543830	IT HW/SW Agreements	113.2	1,150.1	1,700.0	0.0	2,009.2	0.0	2,009.2
544000	Supply Inventory IT	144.2	22.5	75.0	0.0	22.0	0.0	22.0
544100	Supplies-Office Supplies	19.1	14.1	35.0	0.0	20.0	0.0	20.0
544200	Supplies-Medical, Lab, Personal	19.8	12.2	55.4	0.0	20.0	0.0	20.0
544400	Supplies-Field Supplies	2.2	4.1	20.0	0.0	7.0	0.0	7.0
544700	Supplies-Clothing, Unifrms, Linen	0.2	0.0	0.0	0.0	0.0	0.0	0.0
544800	Supplies-Education&Recreation	1.4	0.0	0.0	0.0	0.0	0.0	0.0
544900	Supplies-Inventory Exempt	16.8	5.2	35.0	0.0	35.0	0.0	35.0
545600	Reporting & Recording	0.0	0.0	0.6	0.0	0.0	0.0	0.0
545700	ISD Services	0.0	0.0	0.0	0.0	0.0	0.0	0.0
545710	DOIT HCM Assessment Fees	70.3	0.0	0.0	0.0	0.0	0.0	0.0
545900	Printing & Photo Services	0.6	1.2	7.2	0.0	8.0	0.0	8.0
546100	Postage & Mail Services	9.8	3.7	7.0	0.0	7.0	0.0	7.0
546400	Rent Of Land & Buildings	993.6	754.2	1,261.4	0.0	3,000.0	0.0	3,000.0
546500	Rent Of Equipment	10.5	15.1	18.0	0.0	20.0	0.0	20.0
546600	Communications	6.4	0.0	0.0	0.0	0.0	0.0	0.0
546610	DOIT Telecommunications	184.4	187.0	200.3	0.0	195.1	0.0	195.1
546700	Subscriptions/Dues/License Fee	70.3	61.7	90.0	0.0	90.0	0.0	90.0
546800	Employee Training & Education	33.0	6.7	10.0	0.0	10.0	0.0	10.0
546900	Advertising	1.0	0.1	0.5	0.0	0.6	0.0	0.6
547300	Care & Support	6,532.7	2,593.5	4,233.5	0.0	4,000.0	0.0	4,000.0
547309	Care & Support InterSt Agency	0.0	187.0	186.8	0.0	175.4	0.0	175.4

Developmental Disabilities Support

State of New Mexico

BU PCode Department
63000 P519 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
547900	Miscellaneous Expense	0.0	0.5	10.8	0.0	11.0	0.0	11.0
547999	Request to Pay Prior Year	0.0	50.0	0.0	0.0	55.0	0.0	55.0
548300	Information Tech Equipment	3.0	0.0	0.0	0.0	0.0	0.0	0.0
548400	Other Equipment	0.0	17.7	0.0	0.0	20.0	0.0	20.0
549600	Employee O/S Mileage & Fares	8.6	10.0	48.0	0.0	50.0	0.0	50.0
549700	Employee O/S Meals & Lodging	10.0	10.6	20.2	0.0	54.0	0.0	54.0
400	Other	8,479.5	5,340.3	8,585.0	0.0	10,379.7	0.0	10,379.7
550000	Other Financing Uses	234,129.8	0.0	284,324.8	0.0	0.0	0.0	0.0
555100	Other Financing Uses	0.0	227,719.2	0.0	0.0	323,424.8	47,000.0	370,424.8
555106	OFU - INTRA-Agency	0.0	0.0	0.0	0.0	0.0	0.0	0.0
500	Other financing uses	234,129.8	227,719.2	284,324.8	0.0	323,424.8	47,000.0	370,424.8
TOTAL EXPENSE		271,411.9	260,025.6	324,452.3	0.0	366,805.9	47,000.0	413,805.9
810	Permanent	152.00	0.00	195.00	0.00	200.00	0.00	200.00
810	Permanent	152.00	0.00	195.00	0.00	200.00	0.00	200.00
820	Term	43.00	0.00	0.00	0.00	0.00	0.00	0.00
820	Term	43.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL FTE POSITIONS		195.00	0.00	195.00	0.00	200.00	0.00	200.00

Health Improvement

State of New Mexico

BU PCode Department
63000 P520 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
499105	General Fd. Appropriation	11,513.9	11,324.6	13,748.4	0.0	15,191.4	1,100.5	16,291.9
111	General Fund Transfers	11,513.9	11,324.6	13,748.4	0.0	15,191.4	1,100.5	16,291.9
416509	Trade & Pro Perm & Licen-Inter	0.0	1.7	0.0	0.0	0.0	0.0	0.0
451909	Federal Contract - Interagency	0.0	1,576.7	0.0	0.0	0.0	0.0	0.0
499905	Other Financing Sources	0.0	189.3	0.0	0.0	0.0	0.0	0.0
112	Other Transfers	0.0	1,767.7	0.0	0.0	0.0	0.0	0.0
451903	Federal Direct - Operating	8,666.1	7,652.4	14,626.4	0.0	14,782.8	1,100.5	15,883.3
120	Federal Revenues	8,666.1	7,652.4	14,626.4	0.0	14,782.8	1,100.5	15,883.3
416402	Trade & Professions Licenses	508.0	579.7	0.0	0.0	2,703.7	0.0	2,703.7
416909	Other Licenses & Permits-Inter	5.0	9.7	0.0	0.0	0.0	0.0	0.0

Health Improvement

State of New Mexico

BU PCode Department
63000 P520 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
422902	Other Fees	1,400.0	632.8	1,324.2	0.0	0.0	0.0	0.0
425902	Other Services	0.0	0.0	0.0	0.0	0.0	0.0	0.0
461402	Other Penalties	0.0	57.6	0.0	0.0	0.0	0.0	0.0
130	Other Revenues	1,913.0	1,279.7	1,324.2	0.0	2,703.7	0.0	2,703.7
328900	Unassigned FB - Gov	0.0	3,735.9	0.0	0.0	0.0	0.0	0.0
150	Fund Balance	0.0	3,735.9	0.0	0.0	0.0	0.0	0.0
TOTAL REVENUE		22,093.0	25,760.4	29,699.0	0.0	32,677.9	2,201.0	34,878.9
520100	Exempt Perm Positions P/T&F/T	130.8	118.8	250.0	0.0	159.0	0.0	159.0
520200	Term Positions	0.0	2,803.3	2,100.0	0.0	86.9	0.0	86.9
520300	Classified Perm Positions F/T	14,371.6	8,556.6	16,783.3	0.0	19,226.3	1,900.0	21,126.3
520600	Paid Unused Sick Leave	0.0	3.1	0.0	0.0	17.2	0.0	17.2
520700	Overtime & Other Premium Pay	456.9	399.7	750.0	0.0	273.5	0.0	273.5
520800	Annl & Comp Paid At Separation	9.2	26.1	95.0	0.0	23.2	0.0	23.2
520900	Differential Pay	0.0	0.0	0.0	0.0	0.5	0.0	0.5
521100	Group Insurance Premium	1,163.5	1,265.3	1,500.0	0.0	2,471.2	0.0	2,471.2
521200	Retirement Contributions	1,751.5	2,200.4	2,500.0	0.0	3,046.7	0.0	3,046.7
521300	F I C A	802.9	862.3	1,000.0	0.0	1,205.2	0.0	1,205.2
521400	Workers' Comp Assessment Fee	2.0	32.3	1.7	0.0	2.1	0.0	2.1
521410	GSD Work Comp Insur Premium	28.5	0.0	27.2	0.0	21.6	0.0	21.6
521500	Unemployment Comp Premium	9.0	10.1	10.9	0.0	16.5	0.0	16.5
521600	Employee Liability Ins Premium	159.3	171.4	224.6	0.0	322.7	0.0	322.7
521700	RHC Act Contributions	251.1	228.2	262.0	0.0	316.7	0.0	316.7
200	Personal services and employee benef	19,136.3	16,677.6	25,504.7	0.0	27,189.3	1,900.0	29,089.3
535100	Medical Services	4.7	0.0	0.0	0.0	0.0	0.0	0.0
535200	Professional Services	675.9	0.0	0.0	0.0	12.0	1.0	13.0
535300	Other Services	172.2	1,599.2	1,145.0	0.0	600.5	0.0	600.5
535500	Attorney Services	7.1	0.0	177.5	0.0	0.0	0.0	0.0
535600	IT Services	62.6	0.0	0.0	0.0	1,360.5	0.0	1,360.5
300	Contractual services	922.5	1,599.2	1,322.5	0.0	1,973.0	1.0	1,974.0
542100	Employee I/S Mileage & Fares	18.2	1.7	118.2	0.0	202.7	50.0	252.7
542200	Employee I/S Meals & Lodging	335.0	248.0	435.0	0.0	250.0	0.0	250.0
542500	Transp - Fuel & Oil	19.3	25.1	19.3	0.0	10.0	0.0	10.0
542600	Transp - Parts & Supplies	0.0	3.6	0.0	0.0	1.0	0.0	1.0
542700	Transp - Transp Insurance	0.2	0.2	0.2	0.0	0.1	0.0	0.1

Health Improvement

State of New Mexico

BU PCode Department
63000 P520 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
542800	State Transp Pool Charges	84.6	258.2	134.6	0.0	550.0	0.0	550.0
543100	Maint - Grounds & Roadways	0.0	0.1	0.0	0.0	0.0	0.0	0.0
543200	Maint - Furn, Fixt, Equipment	0.0	22.1	0.0	0.0	2.5	0.0	2.5
543300	Maint - Buildings & Structures	7.2	0.9	57.2	0.0	2.5	0.0	2.5
543400	Maint - Property Insurance	0.1	0.1	0.1	0.0	0.3	0.0	0.3
543830	IT HW/SW Agreements	126.0	14.6	175.0	0.0	15.0	0.0	15.0
544000	Supply Inventory IT	184.0	19.7	209.3	0.0	15.0	0.0	15.0
544100	Supplies-Office Supplies	14.5	25.5	14.5	0.0	20.0	0.0	20.0
544200	Supplies-Medical, Lab, Personal	56.6	0.2	56.6	0.0	0.0	0.0	0.0
544400	Supplies-Field Supplies	0.0	0.1	0.0	0.0	0.8	0.0	0.8
544900	Supplies-Inventory Exempt	24.7	20.3	24.7	0.0	30.0	0.0	30.0
545600	Reporting & Recording	0.0	0.0	0.0	0.0	0.5	0.0	0.5
545710	DOIT HCM Assessment Fees	89.2	0.0	0.0	0.0	0.0	0.0	0.0
545900	Printing & Photo Services	2.3	7.8	2.3	0.0	10.0	0.0	10.0
546100	Postage & Mail Services	23.3	15.8	23.3	0.0	25.0	0.0	25.0
546400	Rent Of Land & Buildings	672.2	648.0	1,150.0	0.0	2,000.0	250.0	2,250.0
546500	Rent Of Equipment	16.4	15.1	16.4	0.0	35.0	0.0	35.0
546600	Communications	0.6	0.7	0.6	0.0	2.5	0.0	2.5
546610	DOIT Telecommunications	233.7	185.0	211.9	0.0	217.6	0.0	217.6
546700	Subscriptions/Dues/License Fee	7.1	2.4	7.1	0.0	10.0	0.0	10.0
546800	Employee Training & Education	1.7	1.2	1.7	0.0	39.1	0.0	39.1
546900	Advertising	1.7	6.2	1.7	0.0	20.0	0.0	20.0
547900	Miscellaneous Expense	1.7	6.0	1.7	0.0	44.5	0.0	44.5
547999	Request to Pay Prior Year	0.0	53.4	0.0	0.0	1.5	0.0	1.5
548300	Information Tech Equipment	86.0	0.0	182.5	0.0	0.0	0.0	0.0
549600	Employee O/S Mileage & Fares	19.6	3.7	19.6	0.0	5.0	0.0	5.0
549700	Employee O/S Meals & Lodging	8.3	4.5	8.3	0.0	5.0	0.0	5.0
400	Other	2,034.2	1,590.2	2,871.8	0.0	3,515.6	300.0	3,815.6
TOTAL EXPENSE		22,093.0	19,867.0	29,699.0	0.0	32,677.9	2,201.0	34,878.9
810	Permanent	197.00	0.00	197.00	0.00	223.00	0.00	223.00
810	Permanent	197.00	0.00	197.00	0.00	223.00	0.00	223.00
TOTAL FTE POSITIONS		197.00	0.00	197.00	0.00	223.00	0.00	223.00

State Health Benefits

State of New Mexico

BU PCode Department
63000 P521 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
499905	Other Financing Sources	0.0	15,000.0	0.0	0.0	0.0	0.0	0.0
112	Other Transfers	0.0	15,000.0	0.0	0.0	0.0	0.0	0.0
472302	Insurance Assessments	479,368.0	465,716.2	518,353.5	0.0	660,208.1	0.0	660,208.1
130	Other Revenues	479,368.0	465,716.2	518,353.5	0.0	660,208.1	0.0	660,208.1
TOTAL REVENUE		479,368.0	480,716.2	518,353.5	0.0	660,208.1	0.0	660,208.1
520100	Exempt Perm Positions P/T&F/T	156.1	0.0	0.0	0.0	0.0	0.0	0.0
520300	Classified Perm Positions F/T	681.9	0.0	0.0	0.0	0.0	0.0	0.0
521100	Group Insurance Premium	88.3	0.0	0.0	0.0	0.0	0.0	0.0
521200	Retirement Contributions	161.3	0.0	0.0	0.0	0.0	0.0	0.0
521300	F I C A	64.1	0.0	0.0	0.0	0.0	0.0	0.0
521400	Workers' Comp Assessment Fee	0.1	0.0	0.0	0.0	0.0	0.0	0.0
521410	GSD Work Comp Insur Premium	1.1	0.0	0.0	0.0	0.0	0.0	0.0
521500	Unemployment Comp Premium	0.4	0.0	0.0	0.0	0.0	0.0	0.0
521600	Employee Liability Ins Premium	6.2	0.0	0.0	0.0	0.0	0.0	0.0
521700	RHC Act Contributions	13.8	0.0	0.0	0.0	0.0	0.0	0.0
200	Personal services and employee benef	1,173.3	0.0	0.0	0.0	0.0	0.0	0.0
535100	Medical Services	3,455.0	0.0	0.0	0.0	0.0	0.0	0.0
535200	Professional Services	22,370.7	0.0	29,855.0	0.0	5,434.1	0.0	5,434.1
535300	Other Services	0.0	25,220.3	0.0	0.0	25,391.0	0.0	25,391.0
535900	Insurance Contract Premiums	7,000.0	7,619.4	7,500.0	0.0	7,650.6	0.0	7,650.6
300	Contractual services	32,825.7	32,839.7	37,355.0	0.0	38,475.7	0.0	38,475.7
544100	Supplies-Office Supplies	0.0	4.7	0.0	0.0	4.7	0.0	4.7
544900	Supplies-Inventory Exempt	0.0	0.3	0.0	0.0	0.5	0.0	0.5
545710	DOIT HCM Assessment Fees	4.0	0.0	0.0	0.0	0.0	0.0	0.0
545900	Printing & Photo Services	0.0	2.0	0.0	0.0	2.3	0.0	2.3
546100	Postage & Mail Services	0.0	19.2	0.0	0.0	22.2	0.0	22.2
546400	Rent Of Land & Buildings	0.0	45.9	0.0	0.0	66.8	0.0	66.8
546500	Rent Of Equipment	0.0	2.4	0.0	0.0	2.5	0.0	2.5
546610	DOIT Telecommunications	10.6	0.0	0.0	0.0	0.0	0.0	0.0
547309	Care & Support InterSt Agency	0.0	1,756.9	0.0	0.0	1,780.5	0.0	1,780.5
547350	Claims and Benefits Expenses	445,354.4	532,769.8	480,998.5	0.0	619,678.4	0.0	619,678.4
547900	Miscellaneous Expense	0.0	172.2	0.0	0.0	172.5	0.0	172.5
547999	Request to Pay Prior Year	0.0	941.0	0.0	0.0	0.0	0.0	0.0

State Health Benefits

State of New Mexico

BU PCode Department
63000 P521 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
549600	Employee O/S Mileage & Fares	0.0	0.5	0.0	0.0	1.0	0.0	1.0
549700	Employee O/S Meals & Lodging	0.0	0.5	0.0	0.0	1.0	0.0	1.0
400	Other	445,369.0	535,715.4	480,998.5	0.0	621,732.4	0.0	621,732.4
TOTAL EXPENSE		479,368.0	568,555.1	518,353.5	0.0	660,208.1	0.0	660,208.1
810	Permanent	9.00	0.00	0.00	0.00	0.00	0.00	0.00
810	Permanent	9.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL FTE POSITIONS		9.00	0.00	0.00	0.00	0.00	0.00	0.00

Program Support

State of New Mexico

BU PCode Department
63000 P522 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
499105	General Fd. Appropriation	35,409.4	35,147.8	37,295.2	0.0	54,686.9	3,432.9	58,119.8
111	General Fund Transfers	35,409.4	35,147.8	37,295.2	0.0	54,686.9	3,432.9	58,119.8
451909	Federal Contract - Interagency	2,300.0	68.0	2,300.0	0.0	2,300.0	0.0	2,300.0
499905	Other Financing Sources	0.0	261.6	0.0	0.0	0.0	0.0	0.0
112	Other Transfers	2,300.0	329.6	2,300.0	0.0	2,300.0	0.0	2,300.0
451903	Federal Direct - Operating	52,249.5	57,641.0	73,469.7	0.0	66,313.3	7,224.5	73,537.8
452003	Federal - Indirect	0.0	0.0	70.7	0.0	1,000.0	0.0	1,000.0
120	Federal Revenues	52,249.5	57,641.0	73,540.4	0.0	67,313.3	7,224.5	74,537.8
422001	Rebates	1,211.4	4,500.0	3,000.0	0.0	4,000.0	0.0	4,000.0
130	Other Revenues	1,211.4	4,500.0	3,000.0	0.0	4,000.0	0.0	4,000.0
328900	Unassigned FB - Gov	0.0	0.0	0.0	0.0	0.0	0.0	0.0
150	Fund Balance	0.0	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL REVENUE		91,170.3	97,618.4	116,135.6	0.0	128,300.2	10,657.4	138,957.6
520100	Exempt Perm Positions P/T&F/T	1,186.8	1,451.3	3,168.8	1,644.6	3,555.4	0.0	3,555.4
520200	Term Positions	0.0	170.0	120.0	0.9	351.9	0.0	351.9
520300	Classified Perm Positions F/T	27,274.3	17,089.3	25,119.9	29,668.5	24,996.4	0.0	24,996.4
520600	Paid Unused Sick Leave	0.0	38.6	45.0	0.0	0.0	0.0	0.0
520700	Overtime & Other Premium Pay	0.0	9.2	22.5	0.0	0.0	0.0	0.0
520800	Annl & Comp Paid At Separation	0.0	69.7	135.0	0.0	1,146.6	0.0	1,146.6
520900	Differential Pay	0.0	0.0	0.0	0.0	1,500.0	0.0	1,500.0

Program Support

State of New Mexico

BU PCode Department
63000 P522 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
521100	Group Insurance Premium	1,589.0	1,536.6	1,705.1	3,327.8	800.0	0.0	800.0
521200	Retirement Contributions	1,677.1	3,600.4	3,750.0	6,011.7	1,934.6	0.0	1,934.6
521300	F I C A	1,800.9	1,363.1	1,375.0	1,920.1	2,678.8	0.0	2,678.8
521400	Workers' Comp Assessment Fee	2.7	43.3	3.1	0.0	3.2	0.0	3.2
521410	GSD Work Comp Insur Premium	38.1	0.0	49.8	0.0	33.3	0.0	33.3
521500	Unemployment Comp Premium	12.1	13.6	20.1	0.0	25.5	0.0	25.5
521600	Employee Liability Ins Premium	213.8	230.0	411.2	0.0	499.2	0.0	499.2
521700	RHC Act Contributions	114.1	374.3	362.0	654.1	65.7	0.0	65.7
200	Personal services and employee benef	33,908.9	25,989.4	36,287.5	43,227.6	37,590.6	0.0	37,590.6
535200	Professional Services	100.4	608.3	2,256.2	0.0	1,962.4	3,100.0	5,062.4
535209	Professional Svcs - Interagenc	0.0	0.0	0.0	0.0	0.0	0.0	0.0
535300	Other Services	4,539.4	595.6	1,422.3	0.0	1,750.0	0.0	1,750.0
535400	Audit Services	398.8	277.9	543.8	0.0	401.1	0.0	401.1
535600	IT Services	36,582.5	48,588.2	53,817.7	0.0	61,846.7	0.0	61,846.7
535609	IT Services- Interagency	0.0	0.0	0.0	0.0	0.0	0.0	0.0
300	Contractual services	41,621.1	50,070.1	58,040.0	0.0	65,960.2	3,100.0	69,060.2
542100	Employee I/S Mileage & Fares	0.6	2.3	30.0	0.0	30.5	0.0	30.5
542200	Employee I/S Meals & Lodging	14.7	27.9	39.5	0.0	40.0	0.0	40.0
542500	Transp - Fuel & Oil	5.8	5.8	6.0	0.0	2.5	0.0	2.5
542600	Transp - Parts & Supplies	1.0	0.2	1.1	0.0	0.1	0.0	0.1
542700	Transp - Transp Insurance	0.3	0.3	0.4	0.0	0.2	0.0	0.2
542800	State Transp Pool Charges	59.3	57.4	51.5	0.0	50.1	0.0	50.1
543200	Maint - Furn, Fixt, Equipment	3.9	69.8	78.5	0.0	70.3	0.0	70.3
543300	Maint - Buildings & Structures	0.0	72.4	153.6	0.0	56.5	0.0	56.5
543400	Maint - Property Insurance	0.2	0.2	0.1	0.0	0.4	0.0	0.4
543500	Maint - Supplies	0.0	0.0	5.0	0.0	0.0	0.0	0.0
543820	Maintenance IT	0.0	243.5	1,300.0	0.0	2,008.5	0.0	2,008.5
543830	IT HW/SW Agreements	9,691.7	12,760.6	12,786.4	0.0	12,148.6	7,338.9	19,487.5
544000	Supply Inventory IT	623.7	426.0	601.3	0.0	1,000.1	218.5	1,218.6
544100	Supplies-Office Supplies	60.4	9.3	81.4	0.0	9.0	0.0	9.0
544400	Supplies-Field Supplies	0.0	1.2	1.5	0.0	0.5	0.0	0.5
544800	Supplies-Education&Recreation	0.0	0.0	0.0	0.0	92.3	0.0	92.3
544900	Supplies-Inventory Exempt	25.3	397.0	109.5	0.0	0.0	0.0	0.0
545600	Reporting & Recording	27.3	2.2	17.5	0.0	23.6	0.0	23.6

Program Support

State of New Mexico

BU PCode Department
63000 P522 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
545700	ISD Services	1,084.3	1,767.9	1,675.7	0.0	2,863.6	0.0	2,863.6
545710	DOIT HCM Assessment Fees	119.6	791.3	788.0	0.0	1,018.5	0.0	1,018.5
545900	Printing & Photo Services	7.8	180.7	56.7	0.0	1.1	0.0	1.1
546100	Postage & Mail Services	13.7	23.7	38.2	0.0	8.7	0.0	8.7
546109	Postage&Mail Svcs - Int Agency	0.0	0.0	290.0	0.0	0.0	0.0	0.0
546400	Rent Of Land & Buildings	2,445.4	1,943.1	2,292.3	0.0	2,529.0	0.0	2,529.0
546500	Rent Of Equipment	101.4	36.6	110.1	0.0	40.0	0.0	40.0
546600	Communications	1.0	0.0	5.0	0.0	5.0	0.0	5.0
546610	DOIT Telecommunications	313.6	1,155.2	387.9	0.0	336.6	0.0	336.6
546700	Subscriptions/Dues/License Fee	341.2	747.1	323.9	0.0	325.0	0.0	325.0
546800	Employee Training & Education	60.6	28.7	101.1	0.0	65.0	0.0	65.0
546900	Advertising	44.8	46.1	54.5	0.0	5.7	0.0	5.7
547000	Legal Settlements	0.0	0.0	0.0	0.0	0.0	0.0	0.0
547900	Miscellaneous Expense	5.8	4.3	8.2	0.0	1.0	0.0	1.0
547999	Request to Pay Prior Year	1.9	3.3	1.5	0.0	0.0	0.0	0.0
548200	Furniture & Fixtures	0.0	0.0	223.7	0.0	621.2	0.0	621.2
548300	Information Tech Equipment	457.3	656.9	110.8	0.0	286.8	0.0	286.8
548400	Other Equipment	0.0	0.0	25.0	0.0	55.7	0.0	55.7
549600	Employee O/S Mileage & Fares	66.3	14.0	33.0	0.0	15.0	0.0	15.0
549700	Employee O/S Meals & Lodging	61.4	15.1	19.2	0.0	38.5	0.0	38.5
549900	Brd & Comm O/S Meals & Lodging	0.0	0.0	0.0	0.0	999.8	0.0	999.8
400	Other	15,640.3	21,490.1	21,808.1	0.0	24,749.4	7,557.4	32,306.8
TOTAL EXPENSE		91,170.3	97,549.7	116,135.6	43,227.6	128,300.2	10,657.4	138,957.6
810	Permanent	300.00	239.00	330.00	303.00	330.00	0.00	330.00
810	Permanent	300.00	239.00	330.00	303.00	330.00	0.00	330.00
820	Term	15.00	0.00	0.00	0.00	15.00	0.00	15.00
820	Term	15.00	0.00	0.00	0.00	15.00	0.00	15.00
TOTAL FTE POSITIONS		315.00	239.00	330.00	303.00	345.00	0.00	345.00

Child Support Enforcement

State of New Mexico

BU PCode Department
63000 P523 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
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Child Support Enforcement

State of New Mexico

BU PCode Department
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S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
499105	General Fd. Appropriation	13,156.4	12,875.8	14,328.1	0.0	15,470.7	0.0	15,470.7
111	General Fund Transfers	13,156.4	12,875.8	14,328.1	0.0	15,470.7	0.0	15,470.7
499905	Other Financing Sources	0.0	280.6	0.0	0.0	0.0	0.0	0.0
112	Other Transfers	0.0	280.6	0.0	0.0	0.0	0.0	0.0
451903	Federal Direct - Operating	27,330.5	24,988.2	27,429.7	0.0	33,838.8	0.0	33,838.8
453001	Federal - Contracts & Other	2,200.0	2,627.5	6,223.2	0.0	0.0	0.0	0.0
120	Federal Revenues	29,530.5	27,615.7	33,652.9	0.0	33,838.8	0.0	33,838.8
422002	Recoveries	0.0	354.5	0.0	0.0	0.0	0.0	0.0
422902	Other Fees	66.0	20.9	0.0	0.0	0.0	0.0	0.0
496902	Miscellaneous Revenue	201.0	252.8	201.0	0.0	597.4	0.0	597.4
130	Other Revenues	267.0	628.2	201.0	0.0	597.4	0.0	597.4
TOTAL REVENUE		42,953.9	41,400.3	48,182.0	0.0	49,906.9	0.0	49,906.9
520100	Exempt Perm Positions P/T&F/T	82.4	145.2	152.9	157.2	170.0	0.0	170.0
520300	Classified Perm Positions F/T	18,899.6	19,427.3	22,490.9	25,238.5	22,230.8	0.0	22,230.8
520600	Paid Unused Sick Leave	11.4	38.8	39.9	0.0	44.4	0.0	44.4
520700	Overtime & Other Premium Pay	0.0	1.9	8.0	0.0	8.9	0.0	8.9
520800	Annl & Comp Paid At Separation	90.0	62.9	492.6	0.0	548.6	0.0	548.6
521100	Group Insurance Premium	2,304.0	2,276.7	2,608.3	4,227.2	3,877.7	0.0	3,877.7
521200	Retirement Contributions	2,720.0	3,768.4	4,148.3	4,923.9	4,546.5	0.0	4,546.5
521300	F I C A	1,080.0	1,418.9	1,562.8	1,556.6	1,678.7	0.0	1,678.7
521400	Workers' Comp Assessment Fee	3.0	48.8	2.8	0.0	3.1	0.0	3.1
521410	GSD Work Comp Insur Premium	42.3	0.0	44.7	0.0	33.0	0.0	33.0
521500	Unemployment Comp Premium	13.3	15.0	17.9	0.0	25.1	0.0	25.1
521600	Employee Liability Ins Premium	236.3	254.2	368.3	0.0	492.0	0.0	492.0
521700	RHC Act Contributions	290.0	399.0	431.2	531.7	434.7	0.0	434.7
523000	COVID Related Admin Leave	12.3	0.0	0.0	0.0	0.0	0.0	0.0
523200	COVID Related Time Worked	1.0	0.7	0.0	0.0	0.0	0.0	0.0
200	Personal services and employee benef	25,785.6	27,857.8	32,368.6	36,635.1	34,093.5	0.0	34,093.5
535100	Medical Services	22.0	34.9	60.0	0.0	45.0	0.0	45.0
535200	Professional Services	3,847.8	80.0	160.0	0.0	119.0	0.0	119.0
535300	Other Services	2,731.8	2,044.1	2,542.6	0.0	1,703.2	0.0	1,703.2
535309	Other Services - Interagency	4,214.0	3,669.9	3,669.9	0.0	3,910.6	0.0	3,910.6
535400	Audit Services	12.8	11.6	12.0	0.0	12.1	0.0	12.1
535500	Attorney Services	0.5	0.0	0.0	0.0	0.0	0.0	0.0
535600	IT Services	1,682.4	2,631.5	4,178.7	0.0	4,833.3	0.0	4,833.3

Child Support Enforcement

State of New Mexico

BU PCode Department
63000 P523 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

	2024-25 Opbud	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	----- FY 2027 Agency Request -----		
					Base	Expansion	Total
300 Contractual services	12,511.3	8,472.0	10,623.2	0.0	10,623.2	0.0	10,623.2
542100 Employee I/S Mileage & Fares	1.1	0.8	1.0	0.0	1.0	0.0	1.0
542200 Employee I/S Meals & Lodging	9.0	16.0	15.0	0.0	15.0	0.0	15.0
542500 Transp - Fuel & Oil	10.0	4.6	5.5	0.0	5.5	0.0	5.5
542600 Transp - Parts & Supplies	0.2	2.0	1.2	0.0	1.2	0.0	1.2
542700 Transp - Transp Insurance	0.3	0.3	0.3	0.0	0.2	0.0	0.2
542800 State Transp Pool Charges	95.3	87.6	95.8	0.0	85.0	0.0	85.0
543200 Maint - Furn, Fixt, Equipment	20.0	7.4	7.4	0.0	7.4	0.0	7.4
543300 Maint - Buildings & Structures	0.5	24.4	1.0	0.0	1.0	0.0	1.0
543400 Maint - Property Insurance	0.2	0.2	0.2	0.0	0.5	0.0	0.5
543500 Maint - Supplies	0.5	0.0	0.0	0.0	0.0	0.0	0.0
543830 IT HW/SW Agreements	122.0	154.7	336.8	0.0	336.8	0.0	336.8
544000 Supply Inventory IT	15.0	3.5	6.0	0.0	6.0	0.0	6.0
544100 Supplies-Office Supplies	30.0	15.2	16.0	0.0	20.0	0.0	20.0
544400 Supplies-Field Supplies	0.5	0.0	0.0	0.0	0.0	0.0	0.0
544900 Supplies-Inventory Exempt	15.0	10.1	6.0	0.0	10.0	0.0	10.0
545600 Reporting & Recording	8.0	5.8	6.5	0.0	6.5	0.0	6.5
545710 DOIT HCM Assessment Fees	132.2	0.0	0.0	0.0	0.0	0.0	0.0
545900 Printing & Photo Services	2.0	29.6	47.5	0.0	47.5	0.0	47.5
546100 Postage & Mail Services	220.1	613.9	595.0	0.0	595.0	0.0	595.0
546320 Utilities - Electricity	0.0	0.0	0.0	0.0	0.0	0.0	0.0
546400 Rent Of Land & Buildings	2,906.8	2,921.2	3,049.3	0.0	3,061.5	0.0	3,061.5
546500 Rent Of Equipment	200.0	141.5	144.8	0.0	144.8	0.0	144.8
546600 Communications	25.0	11.8	7.4	0.0	7.4	0.0	7.4
546610 DOIT Telecommunications	346.5	440.7	347.4	0.0	331.8	0.0	331.8
546700 Subscriptions/Dues/License Fee	106.8	89.9	82.4	0.0	82.4	0.0	82.4
546800 Employee Training & Education	10.0	37.1	14.0	0.0	14.0	0.0	14.0
546900 Advertising	54.0	50.8	53.6	0.0	53.6	0.0	53.6
547000 Legal Settlements	0.0	38.0	0.0	0.0	0.0	0.0	0.0
547300 Care & Support	0.0	12.6	10.0	0.0	10.0	0.0	10.0
547900 Miscellaneous Expense	300.0	205.5	316.1	0.0	316.1	0.0	316.1
547999 Request to Pay Prior Year	1.0	84.0	1.0	0.0	1.0	0.0	1.0
549600 Employee O/S Mileage & Fares	10.0	12.4	13.0	0.0	16.0	0.0	16.0
549700 Employee O/S Meals & Lodging	15.0	8.4	10.0	0.0	13.0	0.0	13.0

Child Support Enforcement

BU PCode Department
63000 P523 000000

State of New Mexico

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
400	Other	4,657.0	5,030.2	5,190.2	0.0	5,190.2	0.0	5,190.2
TOTAL EXPENSE		42,953.9	41,360.0	48,182.0	36,635.1	49,906.9	0.0	49,906.9
810	Permanent	340.00	296.00	340.00	370.00	340.00	0.00	340.00
810	Permanent	340.00	296.00	340.00	370.00	340.00	0.00	340.00
TOTAL FTE POSITIONS		340.00	296.00	340.00	370.00	340.00	0.00	340.00

Medical Assistance

BU PCode Department
63000 P524 000000

State of New Mexico

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
499105	General Fd. Appropriation	1,370,129.4	1,442,991.7	1,363,990.8	0.0	1,280,717.7	2,859.6	1,283,577.3
111	General Fund Transfers	1,370,129.4	1,442,991.7	1,363,990.8	0.0	1,280,717.7	2,859.6	1,283,577.3
425909	Other Services - Interagency	12,000.0	0.0	0.0	0.0	0.0	0.0	0.0
499901	Transfer In of Capital Asset	0.0	0.0	54,404.5	0.0	0.0	0.0	0.0
499905	Other Financing Sources	338,471.8	283,648.1	435,213.4	0.0	435,516.0	0.0	435,516.0
499906	OFS - INTRA-Agency	0.0	0.0	314,324.8	0.0	323,440.0	0.0	323,440.0
499999	O/F Sources - Higher Ed Instit	75,757.9	134,274.5	150,576.4	0.0	136,847.0	0.0	136,847.0
112	Other Transfers	426,229.7	417,922.5	954,519.1	0.0	895,803.0	0.0	895,803.0
451903	Federal Direct - Operating	6,952,493.4	6,855,767.0	8,808,763.4	0.0	8,173,184.8	4,352.5	8,177,537.3
120	Federal Revenues	6,952,493.4	6,855,767.0	8,808,763.4	0.0	8,173,184.8	4,352.5	8,177,537.3
422001	Rebates	31,626.8	49,680.5	38,754.8	0.0	58,754.8	0.0	58,754.8
422002	Recoveries	0.0	147.9	0.0	0.0	0.0	0.0	0.0
422902	Other Fees	645.0	844.4	645.0	0.0	645.0	0.0	645.0
425906	Other Services - CU	1,037.0	0.0	778.5	0.0	796.0	0.0	796.0
434301	Payment for Care - 3rd Party	1,587.0	2,081.7	1,587.0	0.0	1,587.0	0.0	1,587.0
434302	Payments For Care-Government	65,373.0	79,008.5	77,340.5	0.0	77,340.5	0.0	77,340.5
434402	Payments For Care-Individuals	0.0	0.0	6,660.0	0.0	6,660.0	0.0	6,660.0
441201	Interest On Investments	0.0	81.2	0.0	0.0	0.0	0.0	0.0
461502	Traffic Violation Fees	811.4	0.0	0.0	0.0	0.0	0.0	0.0
482302	Health Care Quality Surcharge	35,465.0	7,224.8	35,465.0	0.0	33,769.7	1,228.0	34,997.7
496903	Miscellaneous Revenue	11.2	(43,873.1)	11.2	0.0	11.2	0.0	11.2
130	Other Revenues	136,556.4	95,195.8	161,242.0	0.0	179,564.2	1,228.0	180,792.2

Medical Assistance

State of New Mexico

BU PCode Department
63000 P524 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
325900	Restricted FB - Gov	0.0	44.0	811.4	0.0	811.4	0.0	811.4
327900	Assigned FB - GOV	0.0	(89.8)	0.0	0.0	44,000.0	0.0	44,000.0
328900	Unassigned FB - Gov	0.0	89.8	0.0	0.0	0.0	0.0	0.0
150	Fund Balance	0.0	44.0	811.4	0.0	44,811.4	0.0	44,811.4
TOTAL REVENUE		8,885,408.9	8,811,921.0	11,289,326.7	0.0	10,574,081.1	8,440.1	10,582,521.2
520100	Exempt Perm Positions P/T&F/T	119.0	217.0	119.0	226.7	119.0	0.0	119.0
520200	Term Positions	0.0	6.6	0.0	0.8	0.0	0.0	0.0
520300	Classified Perm Positions F/T	14,043.8	12,530.1	17,043.9	19,128.9	18,446.4	3,697.8	22,144.2
520400	Classified Perm Positions P/T	17.2	0.0	17.2	0.0	17.2	0.0	17.2
520600	Paid Unused Sick Leave	0.0	16.0	0.0	0.0	0.0	0.0	0.0
520700	Overtime & Other Premium Pay	0.0	2.8	0.0	0.0	0.0	0.0	0.0
520800	Annl & Comp Paid At Separation	0.0	22.8	0.0	0.0	0.0	0.0	0.0
521100	Group Insurance Premium	1,502.6	1,217.3	1,457.8	2,527.9	1,493.5	88.1	1,581.6
521200	Retirement Contributions	2,155.5	2,453.9	2,155.5	3,769.3	2,442.2	706.6	3,148.8
521300	F I C A	914.7	916.8	914.7	1,186.5	1,029.4	282.9	1,312.3
521400	Workers' Comp Assessment Fee	1.7	27.8	2.0	0.0	2.5	0.0	2.5
521410	GSD Work Comp Insur Premium	24.3	0.0	33.1	0.0	24.9	0.0	24.9
521500	Unemployment Comp Premium	7.7	8.7	13.3	0.0	19.0	0.0	19.0
521600	Employee Liability Ins Premium	136.1	146.4	273.1	0.0	372.6	0.0	372.6
521700	RHC Act Contributions	249.5	255.1	249.5	415.3	279.5	74.0	353.5
200	Personal services and employee benef	19,172.1	17,821.4	22,279.1	27,255.4	24,246.2	4,849.4	29,095.6
535100	Medical Services	368.7	26.4	11,936.0	0.0	11,936.0	0.0	11,936.0
535200	Professional Services	28,017.3	54,454.3	29,479.0	0.0	37,229.1	0.0	37,229.1
535300	Other Services	89,888.2	40,120.3	76,894.1	0.0	100,101.1	3,145.5	103,246.6
535309	Other Services - Interagency	670.0	670.5	670.0	0.0	670.0	0.0	670.0
535310	Other Services - Higher Ed	2,500.0	(146.5)	0.0	0.0	0.0	0.0	0.0
535400	Audit Services	2,996.3	0.0	1,430.9	0.0	1,431.0	0.0	1,431.0
535500	Attorney Services	257.6	17.9	149.6	0.0	149.6	0.0	149.6
535600	IT Services	6,404.4	100,439.7	72,356.0	0.0	62,601.8	0.0	62,601.8
300	Contractual services	131,102.5	195,582.6	192,915.6	0.0	214,118.6	3,145.5	217,264.1
542100	Employee I/S Mileage & Fares	1.0	0.8	0.0	0.0	0.0	0.0	0.0
542200	Employee I/S Meals & Lodging	4.0	3.6	3.0	0.0	3.1	0.0	3.1
542500	Transp - Fuel & Oil	2.0	0.6	2.0	0.0	2.0	0.0	2.0
542600	Transp - Parts & Supplies	2.0	0.0	0.2	0.0	0.2	0.0	0.2

Medical Assistance

State of New Mexico

BU PCode Department
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S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
542700	Transp - Transp Insurance	0.2	0.2	0.2	0.0	0.1	0.0	0.1
542800	State Transp Pool Charges	8.5	8.7	8.5	0.0	9.1	0.0	9.1
543200	Maint - Furn, Fixt, Equipment	0.0	0.0	0.0	0.0	0.0	0.0	0.0
543300	Maint - Buildings & Structures	0.0	61.2	0.0	0.0	0.0	0.0	0.0
543400	Maint - Property Insurance	0.1	0.1	0.1	0.0	0.4	0.0	0.4
543830	IT HW/SW Agreements	1,300.0	22,082.2	1,000.0	0.0	1,000.0	0.0	1,000.0
544000	Supply Inventory IT	1.0	63.5	4.0	0.0	4.0	0.0	4.0
544100	Supplies-Office Supplies	1.0	5.1	2.0	0.0	2.0	0.0	2.0
544900	Supplies-Inventory Exempt	0.0	293.3	158.0	0.0	140.0	0.0	140.0
545600	Reporting & Recording	50.0	85.3	80.0	0.0	80.0	0.0	80.0
545710	DOIT HCM Assessment Fees	76.2	0.0	0.0	0.0	0.0	0.0	0.0
545900	Printing & Photo Services	0.0	1.9	2.0	0.0	2.0	0.0	2.0
546100	Postage & Mail Services	3,546.0	29.7	1,000.0	0.0	1,077.9	0.0	1,077.9
546400	Rent Of Land & Buildings	1,325.6	428.6	1,104.0	0.0	1,104.0	445.2	1,549.2
546500	Rent Of Equipment	0.0	58.8	60.0	0.0	60.0	0.0	60.0
546600	Communications	0.0	0.0	0.0	0.0	0.0	0.0	0.0
546610	DOIT Telecommunications	199.7	197.0	257.7	0.0	251.3	0.0	251.3
546700	Subscriptions/Dues/License Fee	20.0	23.6	30.0	0.0	30.0	0.0	30.0
546800	Employee Training & Education	2.0	39.9	12.0	0.0	12.0	0.0	12.0
546900	Advertising	250.0	20.3	30.0	0.0	30.0	0.0	30.0
547000	Legal Settlements	0.0	1,009.5	0.0	0.0	0.0	0.0	0.0
547300	Care & Support	8,710,758.2	8,399,352.2	11,049,040.9	0.0	10,311,597.1	0.0	10,311,597.1
547450	Grants to Other Agencies	17,551.8	22,360.8	21,295.4	0.0	20,269.1	0.0	20,269.1
547900	Miscellaneous Expense	0.0	3,213.7	0.0	0.0	0.0	0.0	0.0
547909	Misc Expense Interagency	0.0	1,731.0	0.0	0.0	0.0	0.0	0.0
547999	Request to Pay Prior Year	0.0	2.4	0.0	0.0	0.0	0.0	0.0
548200	Furniture & Fixtures	15.0	528.5	0.0	0.0	0.0	0.0	0.0
548300	Information Tech Equipment	0.0	826.3	0.0	0.0	0.0	0.0	0.0
549600	Employee O/S Mileage & Fares	10.0	17.5	18.0	0.0	18.0	0.0	18.0
549700	Employee O/S Meals & Lodging	10.0	22.8	24.0	0.0	24.0	0.0	24.0
400	Other	8,735,134.3	8,452,469.0	11,074,132.0	0.0	10,335,716.3	445.2	10,336,161.5
TOTAL EXPENSE		8,885,408.9	8,665,873.0	11,289,326.7	27,255.4	10,574,081.1	8,440.1	10,582,521.2
810	Permanent	221.50	163.00	222.50	220.00	215.50	42.00	257.50
810	Permanent	221.50	163.00	222.50	220.00	215.50	42.00	257.50

Medical Assistance

BU PCode Department
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S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

TOTAL FTE POSITIONS	221.50	163.00	222.50	220.00	215.50	42.00	257.50
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Income Support

BU PCode Department
63000 P525 000000

State of New Mexico

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

	2024-25 Opbud	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	----- FY 2027 Agency Request -----		
					Base	Expansion	Total
499105 General Fd. Appropriation	78,080.2	77,350.5	93,054.0	0.0	140,080.0	17,748.5	157,828.5
111 General Fund Transfers	78,080.2	77,350.5	93,054.0	0.0	140,080.0	17,748.5	157,828.5
499905 Other Financing Sources	0.0	729.7	0.0	0.0	0.0	0.0	0.0
112 Other Transfers	0.0	729.7	0.0	0.0	0.0	0.0	0.0
451903 Federal Direct - Operating	1,278,779.9	1,306,856.6	1,435,259.3	0.0	1,431,926.4	24,510.0	1,456,436.4
453001 Federal - Contracts & Other	0.0	1,756.8	0.0	0.0	0.0	0.0	0.0
120 Federal Revenues	1,278,779.9	1,308,613.5	1,435,259.3	0.0	1,431,926.4	24,510.0	1,456,436.4
422001 Rebates	0.0	3,000.0	0.0	0.0	0.0	0.0	0.0
422902 Other Fees	60.8	164.3	60.8	0.0	60.8	0.0	60.8
496909 Misc Revenue - Interagency	0.0	500.0	0.0	0.0	0.0	0.0	0.0
130 Other Revenues	60.8	3,664.3	60.8	0.0	60.8	0.0	60.8
TOTAL REVENUE	1,356,920.9	1,390,358.0	1,528,374.1	0.0	1,572,067.2	42,258.5	1,614,325.7
520100 Exempt Perm Positions P/T&F/T	116.7	155.0	120.2	161.9	163.8	0.0	163.8
520200 Term Positions	403.7	418.6	403.6	3.7	540.5	0.0	540.5
520300 Classified Perm Positions F/T	49,609.5	48,840.0	53,378.7	67,972.2	61,548.7	14,332.8	75,881.5
520400 Classified Perm Positions P/T	51.1	0.0	51.1	0.0	0.0	0.0	0.0
520500 Temporary Positions F/T & P/T	0.0	76.6	6,176.3	0.0	0.0	0.0	0.0
520600 Paid Unused Sick Leave	27.4	26.0	36.0	0.0	28.6	6.6	35.2
520700 Overtime & Other Premium Pay	1,934.2	388.5	2,540.9	0.0	422.2	97.5	519.7
520800 Annl & Comp Paid At Separation	177.3	213.8	140.1	0.0	202.9	46.8	249.7
520900 Differential Pay	0.6	0.7	0.9	0.0	0.8	0.2	1.0
521100 Group Insurance Premium	6,451.0	6,669.5	8,132.3	12,111.9	10,962.1	2,452.1	13,414.2
521200 Retirement Contributions	9,308.4	10,114.4	12,123.4	12,990.4	11,713.9	2,654.9	14,368.8
521300 F I C A	3,974.6	3,840.5	5,186.8	4,176.5	4,543.8	1,030.5	5,574.3
521400 Workers' Comp Assessment Fee	8.1	133.2	8.8	0.0	12.3	0.0	12.3
521410 GSD Work Comp Insur Premium	114.8	0.0	142.6	0.0	130.1	0.0	130.1
521500 Unemployment Comp Premium	36.3	40.9	57.2	0.0	99.5	0.0	99.5
521600 Employee Liability Ins Premium	642.2	692.5	1,176.0	0.0	1,945.8	0.0	1,945.8

Income Support

State of New Mexico

BU PCode Department
63000 P525 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
521700	RHC Act Contributions	968.4	1,051.4	1,263.1	1,405.7	1,170.1	265.0	1,435.1
521900	Other Employee Benefits	0.0	4.2	0.0	0.0	0.0	0.0	0.0
523200	COVID Related Time Worked	0.0	1.1	0.0	0.0	0.0	0.0	0.0
200	Personal services and employee benef	73,824.3	72,666.9	90,938.0	98,822.4	93,485.1	20,886.4	114,371.5
535100	Medical Services	1.0	0.8	1.0	0.0	1.2	0.0	1.2
535200	Professional Services	2,654.2	16,060.3	26,890.2	0.0	30,283.1	0.0	30,283.1
535300	Other Services	35,607.9	39,607.6	43,471.2	0.0	62,241.1	0.0	62,241.1
535500	Attorney Services	0.0	379.8	70.0	0.0	0.0	0.0	0.0
535600	IT Services	8,479.3	22,443.2	36,053.6	0.0	45,774.4	10,397.0	56,171.4
300	Contractual services	46,742.4	78,491.7	106,486.0	0.0	138,299.8	10,397.0	148,696.8
542100	Employee I/S Mileage & Fares	10.0	1.1	25.0	0.0	152.8	0.0	152.8
542200	Employee I/S Meals & Lodging	40.0	22.6	25.0	0.0	585.6	0.0	585.6
542500	Transp - Fuel & Oil	100.1	80.1	200.0	0.0	200.0	0.0	200.0
542600	Transp - Parts & Supplies	80.0	72.0	250.0	0.0	250.1	0.0	250.1
542700	Transp - Transp Insurance	0.8	0.9	0.9	0.0	0.8	0.0	0.8
542800	State Transp Pool Charges	139.1	132.0	250.0	0.0	125.7	0.0	125.7
543200	Maint - Furn, Fixt, Equipment	50.3	12.7	150.0	0.0	151.1	0.0	151.1
543300	Maint - Buildings & Structures	200.0	188.2	500.0	0.0	550.1	0.0	550.1
543400	Maint - Property Insurance	0.3	0.6	0.5	0.0	1.8	0.0	1.8
543500	Maint - Supplies	1.5	2.6	10.0	0.0	10.0	0.0	10.0
543700	Maintenance Services	5.0	0.6	2.0	0.0	2.0	0.0	2.0
543820	Maintenance IT	120.0	13.0	1.0	0.0	27.6	0.0	27.6
543830	IT HW/SW Agreements	1,700.0	3,505.8	6,501.3	0.0	6,515.0	5,000.0	11,515.0
544000	Supply Inventory IT	1.0	28.8	20.0	0.0	420.0	0.0	420.0
544100	Supplies-Office Supplies	10.0	63.0	60.0	0.0	60.0	0.0	60.0
544400	Supplies-Field Supplies	0.0	0.9	0.0	0.0	355.0	0.0	355.0
544800	Supplies-Education&Recreation	10.0	0.0	10.0	0.0	50.1	0.0	50.1
544900	Supplies-Inventory Exempt	7.2	1,184.1	150.0	0.0	224.3	0.0	224.3
545600	Reporting & Recording	5.0	3.2	5.0	0.0	15.0	0.0	15.0
545710	DOIT HCM Assessment Fees	359.3	0.0	0.0	0.0	0.0	0.0	0.0
545900	Printing & Photo Services	36.0	34.4	36.0	0.0	36.0	0.0	36.0
546100	Postage & Mail Services	9,704.4	2,481.5	10,100.1	0.0	9,542.2	0.0	9,542.2
546310	Utilities - Sewer/Garbage	23.0	18.4	25.0	0.0	25.0	0.0	25.0
546320	Utilities - Electricity	165.0	146.2	180.0	0.0	200.0	0.0	200.0

Income Support

BU PCode Department
63000 P525 000000

State of New Mexico

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
546330	Utilities - Water	19.0	13.7	19.0	0.0	30.0	0.0	30.0
546340	Utilities - Natural Gas	25.3	12.1	25.3	0.0	25.3	0.0	25.3
546400	Rent Of Land & Buildings	10,249.8	9,712.3	11,171.9	0.0	11,171.5	5,000.0	16,171.5
546409	Rent Expense - Interagency	20.0	0.0	447.2	0.0	14.0	0.0	14.0
546500	Rent Of Equipment	261.7	252.5	270.0	0.0	270.0	0.0	270.0
546600	Communications	105.0	101.7	105.0	0.0	105.0	0.0	105.0
546610	DOIT Telecommunications	942.0	377.9	1,109.5	0.0	1,312.3	0.0	1,312.3
546700	Subscriptions/Dues/License Fee	5.0	23.3	30.0	0.0	30.0	0.0	30.0
546800	Employee Training & Education	15.0	12.7	15.0	0.0	15.0	0.0	15.0
546900	Advertising	700.0	4.8	239.5	0.0	200.0	0.0	200.0
547300	Care & Support	1,142,682.3	1,153,378.3	1,227,668.0	0.0	1,236,415.9	0.0	1,236,415.9
547350	Claims and Benefits Expenses	0.0	4.3	0.0	0.0	0.0	0.0	0.0
547410	Grants To Public Schools&Univ	0.0	0.0	440.4	0.0	0.0	0.0	0.0
547440	Grants To Other Entities	296.5	1,030.0	325.4	0.0	296.5	0.0	296.5
547450	Grants to Other Agencies	68,199.7	65,259.3	70,441.2	0.0	70,441.2	0.0	70,441.2
547900	Miscellaneous Expense	40.0	59.3	108.5	0.0	100.0	0.0	100.0
547999	Request to Pay Prior Year	0.0	497.9	0.0	0.0	0.0	0.0	0.0
548200	Furniture & Fixtures	0.0	421.4	0.0	0.0	320.4	975.1	1,295.5
549600	Employee O/S Mileage & Fares	9.9	11.6	15.0	0.0	15.0	0.0	15.0
549700	Employee O/S Meals & Lodging	15.0	12.7	17.4	0.0	20.0	0.0	20.0
400	Other	1,236,354.2	1,239,178.6	1,330,950.1	0.0	1,340,282.3	10,975.1	1,351,257.4
TOTAL EXPENSE		1,356,920.9	1,390,337.3	1,528,374.1	98,822.4	1,572,067.2	42,258.5	1,614,325.7
810	Permanent	1,052.00	907.00	1,052.00	1,103.00	1,075.00	260.00	1,335.00
810	Permanent	1,052.00	907.00	1,052.00	1,103.00	1,075.00	260.00	1,335.00
820	Term	8.00	0.00	8.00	0.00	10.00	0.00	10.00
820	Term	8.00	0.00	8.00	0.00	10.00	0.00	10.00
TOTAL FTE POSITIONS		1,060.00	907.00	1,060.00	1,103.00	1,085.00	260.00	1,345.00

Health Care Affordability Fund

BU PCode Department
63000 P762 000000

State of New Mexico

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total

Health Care Affordability Fund

State of New Mexico

BU PCode Department
63000 P762 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
499105	General Fd. Appropriation	0.0	0.0	0.0	0.0	0.0	0.0	0.0
111	General Fund Transfers	0.0	0.0	0.0	0.0	0.0	0.0	0.0
499905	Other Financing Sources	0.0	0.0	0.0	0.0	0.0	0.0	0.0
112	Other Transfers	0.0	0.0	0.0	0.0	0.0	0.0	0.0
407101	Insurance Tax	0.0	97,825.0	178,028.5	0.0	205,264.1	0.0	205,264.1
130	Other Revenues	0.0	97,825.0	178,028.5	0.0	205,264.1	0.0	205,264.1
325900	Restricted FB - Gov	0.0	11,367.7	0.0	0.0	0.0	0.0	0.0
150	Fund Balance	0.0	11,367.7	0.0	0.0	0.0	0.0	0.0
TOTAL REVENUE		0.0	109,192.7	178,028.5	0.0	205,264.1	0.0	205,264.1
520300	Classified Perm Positions F/T	0.0	294.0	660.0	0.0	722.4	0.0	722.4
520800	Annl & Comp Paid At Separation	0.0	0.1	0.0	0.0	0.0	0.0	0.0
521100	Group Insurance Premium	0.0	23.6	70.5	0.0	107.4	0.0	107.4
521200	Retirement Contributions	0.0	56.6	187.0	0.0	167.2	0.0	167.2
521300	F I C A	0.0	21.0	76.5	0.0	53.3	0.0	53.3
521400	Workers' Comp Assessment Fee	0.0	0.8	0.1	0.0	0.1	0.0	0.1
521410	GSD Work Comp Insur Premium	0.0	0.0	1.5	0.0	1.0	0.0	1.0
521500	Unemployment Comp Premium	0.0	0.2	0.6	0.0	0.7	0.0	0.7
521600	Employee Liability Ins Premium	0.0	4.3	12.3	0.0	14.5	0.0	14.5
521700	RHC Act Contributions	0.0	5.9	20.0	0.0	13.9	0.0	13.9
200	Personal services and employee benef	0.0	406.4	1,028.5	0.0	1,080.5	0.0	1,080.5
535200	Professional Services	0.0	0.0	1,000.0	0.0	1,700.0	0.0	1,700.0
535300	Other Services	0.0	0.0	0.0	0.0	500.0	0.0	500.0
300	Contractual services	0.0	0.0	1,000.0	0.0	2,200.0	0.0	2,200.0
542100	Employee I/S Mileage & Fares	0.0	0.9	24.5	0.0	1.2	0.0	1.2
542200	Employee I/S Meals & Lodging	0.0	1.2	24.3	0.0	1.2	0.0	1.2
542500	Transp - Fuel & Oil	0.0	0.0	0.0	0.0	1.0	0.0	1.0
542700	Transp - Transp Insurance	0.0	0.0	0.0	0.0	0.0	0.0	0.0
543820	Maintenance IT	0.0	0.6	0.0	0.0	1.5	0.0	1.5
544000	Supply Inventory IT	0.0	0.9	11.4	0.0	9.0	0.0	9.0
544100	Supplies-Office Supplies	0.0	2.6	7.5	0.0	4.5	0.0	4.5
544900	Supplies-Inventory Exempt	0.0	3.3	0.0	0.0	5.0	0.0	5.0
545700	ISD Services	0.0	0.0	0.0	0.0	0.0	0.0	0.0
545710	DOIT HCM Assessment Fees	0.0	0.0	0.0	0.0	0.0	0.0	0.0
545900	Printing & Photo Services	0.0	1.2	0.0	0.0	7.0	0.0	7.0

Health Care Affordability Fund

State of New Mexico

BU PCode Department
63000 P762 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
546100	Postage & Mail Services	0.0	0.8	0.0	0.0	1.0	0.0	1.0
546400	Rent Of Land & Buildings	0.0	0.0	29.2	0.0	66.8	0.0	66.8
546409	Rent Expense - Interagency	0.0	19.3	0.0	0.0	0.0	0.0	0.0
546500	Rent Of Equipment	0.0	0.8	7.3	0.0	1.0	0.0	1.0
546610	DOIT Telecommunications	0.0	0.0	11.6	0.0	9.8	0.0	9.8
546700	Subscriptions/Dues/License Fee	0.0	0.7	0.0	0.0	0.7	0.0	0.7
546800	Employee Training & Education	0.0	2.6	0.0	0.0	2.6	0.0	2.6
546900	Advertising	0.0	0.0	2.4	0.0	0.0	0.0	0.0
547360	Insurance Premiums-non_payroll	0.0	68,679.3	145,768.9	0.0	201,853.1	0.0	201,853.1
547900	Miscellaneous Expense	0.0	0.1	0.0	0.0	0.2	0.0	0.2
548200	Furniture & Fixtures	0.0	0.0	12.2	0.0	8.0	0.0	8.0
548300	Information Tech Equipment	0.0	0.0	12.2	0.0	0.0	0.0	0.0
549600	Employee O/S Mileage & Fares	0.0	3.1	46.4	0.0	5.0	0.0	5.0
549700	Employee O/S Meals & Lodging	0.0	4.1	42.1	0.0	5.0	0.0	5.0
400	Other	0.0	68,721.4	146,000.0	0.0	201,983.6	0.0	201,983.6
555106	OFU - INTRA-Agency	0.0	30,000.0	30,000.0	0.0	0.0	0.0	0.0
500	Other financing uses	0.0	30,000.0	30,000.0	0.0	0.0	0.0	0.0
TOTAL EXPENSE		0.0	99,127.9	178,028.5	0.0	205,264.1	0.0	205,264.1
810	Permanent	0.00	0.00	5.00	0.00	10.00	0.00	10.00
810	Permanent	0.00	0.00	5.00	0.00	10.00	0.00	10.00
TOTAL FTE POSITIONS		0.00	0.00	5.00	0.00	10.00	0.00	10.00

Medicaid Behavioral Health

State of New Mexico

BU PCode Department
63000 P766 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
499105	General Fd. Appropriation	171,892.6	171,892.6	177,692.1	0.0	256,390.0	0.0	256,390.0
111	General Fund Transfers	171,892.6	171,892.6	177,692.1	0.0	256,390.0	0.0	256,390.0
499905	Other Financing Sources	7,837.2	7,128.0	7,214.0	0.0	3,247.5	0.0	3,247.5
112	Other Transfers	7,837.2	7,128.0	7,214.0	0.0	3,247.5	0.0	3,247.5
451903	Federal Direct - Operating	672,619.9	630,799.0	751,635.9	0.0	934,911.5	0.0	934,911.5
120	Federal Revenues	672,619.9	630,799.0	751,635.9	0.0	934,911.5	0.0	934,911.5

Medicaid Behavioral Health

State of New Mexico

BU PCode Department
63000 P766 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
407101	Insurance Tax	86,597.3	83,113.2	0.0	0.0	0.0	0.0	0.0
482202	Premium Surcharges	0.0	0.0	0.0	0.0	0.0	0.0	0.0
130	Other Revenues	86,597.3	83,113.2	0.0	0.0	0.0	0.0	0.0
TOTAL REVENUE		938,947.0	892,932.9	936,542.0	0.0	1,194,549.0	0.0	1,194,549.0
520300	Classified Perm Positions F/T	396.0	0.0	0.0	0.0	610.0	0.0	610.0
521100	Group Insurance Premium	34.6	0.0	0.0	0.0	14.6	0.0	14.6
521200	Retirement Contributions	75.1	0.0	0.0	0.0	116.6	0.0	116.6
521300	F I C A	29.9	0.0	0.0	0.0	46.6	0.0	46.6
521400	Workers' Comp Assessment Fee	0.1	0.0	0.0	0.0	0.0	0.0	0.0
521410	GSD Work Comp Insur Premium	0.7	0.0	0.0	0.0	0.0	0.0	0.0
521500	Unemployment Comp Premium	0.2	0.0	0.0	0.0	0.0	0.0	0.0
521600	Employee Liability Ins Premium	4.0	0.0	0.0	0.0	0.0	0.0	0.0
521700	RHC Act Contributions	7.8	0.0	0.0	0.0	12.2	0.0	12.2
200	Personal services and employee benef	548.4	0.0	0.0	0.0	800.0	0.0	800.0
535200	Professional Services	950.0	0.0	0.0	0.0	0.0	0.0	0.0
535300	Other Services	0.0	0.0	0.0	0.0	5,161.0	0.0	5,161.0
535309	Other Services - Interagency	0.0	0.0	0.0	0.0	3,191.8	0.0	3,191.8
300	Contractual services	950.0	0.0	0.0	0.0	8,352.8	0.0	8,352.8
542100	Employee I/S Mileage & Fares	10.0	0.0	0.0	0.0	0.0	0.0	0.0
542200	Employee I/S Meals & Lodging	10.0	0.0	0.0	0.0	0.0	0.0	0.0
542700	Transp - Transp Insurance	0.1	0.0	0.0	0.0	0.0	0.0	0.0
544000	Supply Inventory IT	3.1	0.0	0.0	0.0	0.0	0.0	0.0
544100	Supplies-Office Supplies	0.2	0.0	0.0	0.0	74.2	0.0	74.2
545609	Report/Record Inter St Agency	100.0	616.1	100.0	0.0	100.0	0.0	100.0
545710	DOIT HCM Assessment Fees	2.2	0.0	0.0	0.0	0.0	0.0	0.0
546400	Rent Of Land & Buildings	18.4	0.0	0.0	0.0	0.0	0.0	0.0
546500	Rent Of Equipment	3.0	0.0	0.0	0.0	0.0	0.0	0.0
546610	DOIT Telecommunications	5.9	0.0	0.0	0.0	0.0	0.0	0.0
546900	Advertising	1.0	0.0	0.0	0.0	0.0	0.0	0.0
547300	Care & Support	852,249.7	798,394.9	936,442.0	0.0	1,180,072.0	0.0	1,180,072.0
547360	Insurance Premiums-non_payroll	85,000.0	0.0	0.0	0.0	0.0	0.0	0.0
547450	Grants to Other Agencies	0.0	0.0	0.0	0.0	5,150.0	0.0	5,150.0
548200	Furniture & Fixtures	5.0	0.0	0.0	0.0	0.0	0.0	0.0
548300	Information Tech Equipment	5.0	0.0	0.0	0.0	0.0	0.0	0.0

Medicaid Behavioral Health

BU PCode Department
63000 P766 000000

State of New Mexico

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
549600	Employee O/S Mileage & Fares	17.7	0.0	0.0	0.0	0.0	0.0	0.0
549700	Employee O/S Meals & Lodging	17.3	0.0	0.0	0.0	0.0	0.0	0.0
400	Other	937,448.6	799,011.0	936,542.0	0.0	1,185,396.2	0.0	1,185,396.2
TOTAL EXPENSE		938,947.0	799,011.0	936,542.0	0.0	1,194,549.0	0.0	1,194,549.0
810	Permanent	5.00	0.00	0.00	0.00	0.00	0.00	0.00
810	Permanent	5.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL FTE POSITIONS		5.00	0.00	0.00	0.00	0.00	0.00	0.00

Behavioral Health Services

BU PCode Department
63000 P767 000000

State of New Mexico

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
499105	General Fd. Appropriation	60,019.2	59,980.2	60,231.5	0.0	73,197.9	0.0	73,197.9
111	General Fund Transfers	60,019.2	59,980.2	60,231.5	0.0	73,197.9	0.0	73,197.9
425909	Other Services - Interagency	0.0	14.9	0.0	0.0	0.0	0.0	0.0
499905	Other Financing Sources	3,287.9	3,232.4	3,288.0	0.0	3,600.0	0.0	3,600.0
112	Other Transfers	3,287.9	3,247.2	3,288.0	0.0	3,600.0	0.0	3,600.0
451903	Federal Direct - Operating	34,543.2	43,066.5	36,588.2	0.0	34,184.1	0.0	34,184.1
452003	Federal - Indirect	0.0	180.2	0.0	0.0	0.0	0.0	0.0
120	Federal Revenues	34,543.2	43,246.7	36,588.2	0.0	34,184.1	0.0	34,184.1
496903	Miscellaneous Revenue	169.5	6.0	173.5	0.0	173.5	0.0	173.5
496908	In-Kind Revenue	0.0	0.0	0.0	0.0	0.0	0.0	0.0
130	Other Revenues	169.5	6.0	173.5	0.0	173.5	0.0	173.5
TOTAL REVENUE		98,019.8	106,480.1	100,281.2	0.0	111,155.5	0.0	111,155.5
520100	Exempt Perm Positions P/T&F/T	246.1	138.6	160.2	314.4	315.4	0.0	315.4
520200	Term Positions	529.3	726.0	738.6	3.0	1,519.0	0.0	1,519.0
520300	Classified Perm Positions F/T	2,812.2	2,921.0	3,950.7	5,630.8	3,463.6	0.0	3,463.6
520600	Paid Unused Sick Leave	0.0	2.8	0.0	0.0	0.0	0.0	0.0
520700	Overtime & Other Premium Pay	0.0	0.8	0.0	0.0	0.0	0.0	0.0
520800	Annl & Comp Paid At Separation	0.0	11.8	0.0	0.0	0.0	0.0	0.0
521100	Group Insurance Premium	531.7	296.4	430.8	629.3	770.0	0.0	770.0
521200	Retirement Contributions	734.1	728.3	887.1	1,132.1	883.3	0.0	883.3

Behavioral Health Services

State of New Mexico

BU PCode Department
63000 P767 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
521300	F I C A	309.0	275.2	352.7	364.8	351.2	0.0	351.2
521400	Workers' Comp Assessment Fee	0.4	6.8	0.6	0.0	0.6	0.0	0.6
521410	GSD Work Comp Insur Premium	6.1	0.0	10.4	0.0	6.8	0.0	6.8
521500	Unemployment Comp Premium	1.9	2.1	4.2	0.0	5.2	0.0	5.2
521600	Employee Liability Ins Premium	33.8	35.3	85.9	0.0	101.3	0.0	101.3
521700	RHC Act Contributions	88.2	75.7	92.2	126.8	91.8	0.0	91.8
200	Personal services and employee benef	5,292.8	5,220.7	6,713.4	8,201.3	7,508.2	0.0	7,508.2
535100	Medical Services	86,159.4	95,526.5	87,181.2	0.0	96,406.5	0.0	96,406.5
535200	Professional Services	440.0	2,810.9	0.0	0.0	170.0	0.0	170.0
535300	Other Services	3,447.4	223.5	4,105.7	0.0	4,610.4	0.0	4,610.4
535309	Other Services - Interagency	0.0	4.1	0.0	0.0	0.0	0.0	0.0
535600	IT Services	0.0	274.0	0.0	0.0	0.0	0.0	0.0
300	Contractual services	90,046.8	98,838.9	91,286.9	0.0	101,186.9	0.0	101,186.9
542100	Employee I/S Mileage & Fares	25.4	1.7	5.0	0.0	3.1	0.0	3.1
542200	Employee I/S Meals & Lodging	2.6	19.9	18.8	0.0	20.8	0.0	20.8
542500	Transp - Fuel & Oil	2.1	1.0	1.0	0.0	1.0	0.0	1.0
542600	Transp - Parts & Supplies	0.3	0.0	0.0	0.0	0.0	0.0	0.0
542700	Transp - Transp Insurance	0.0	0.0	0.1	0.0	0.0	0.0	0.0
542800	State Transp Pool Charges	21.9	11.8	13.0	0.0	13.0	0.0	13.0
543200	Maint - Furn, Fixt, Equipment	4.8	1.4	10.0	0.0	5.0	0.0	5.0
543300	Maint - Buildings & Structures	0.5	0.0	0.5	0.0	0.5	0.0	0.5
543400	Maint - Property Insurance	0.3	0.0	0.1	0.0	0.1	0.0	0.1
543500	Maint - Supplies	1.3	0.0	1.3	0.0	1.3	0.0	1.3
543830	IT HW/SW Agreements	107.1	5.7	20.0	0.0	5.0	0.0	5.0
544000	Supply Inventory IT	36.7	23.8	5.0	0.0	1.0	0.0	1.0
544100	Supplies-Office Supplies	16.4	7.7	10.0	0.0	10.0	0.0	10.0
544900	Supplies-Inventory Exempt	18.2	55.9	55.0	0.0	60.0	0.0	60.0
545710	DOIT HCM Assessment Fees	18.4	0.0	0.0	0.0	0.0	0.0	0.0
545900	Printing & Photo Services	0.5	3.2	5.0	0.0	5.0	0.0	5.0
546100	Postage & Mail Services	2.3	71.4	50.0	0.0	72.0	0.0	72.0
546400	Rent Of Land & Buildings	755.3	510.5	800.0	0.0	800.0	0.0	800.0
546409	Rent Expense - Interagency	0.0	(10.3)	0.0	0.0	0.0	0.0	0.0
546500	Rent Of Equipment	14.9	15.9	14.9	0.0	16.9	0.0	16.9
546610	DOIT Telecommunications	48.2	138.3	81.1	0.0	68.3	0.0	68.3

Behavioral Health Services

State of New Mexico

BU PCode Department
63000 P767 000000

S-9 Account Code Revenue/Expenditure Summary
(Dollars in Thousands)

		2024-25	2024-25	2025-26	2026-27	----- FY 2027 Agency Request -----		
		Opbud	Actuals	Opbud	PCF Proj	Base	Expansion	Total
546700	Subscriptions/Dues/License Fee	28.9	52.3	55.1	0.0	55.1	0.0	55.1
546800	Employee Training & Education	9.7	18.8	15.0	0.0	27.3	0.0	27.3
546900	Advertising	2.1	0.9	2.0	0.0	1.5	0.0	1.5
547300	Care & Support	0.0	0.0	100.0	0.0	279.5	0.0	279.5
547400	Grants To Local Governments	426.3	0.0	0.0	0.0	0.0	0.0	0.0
547450	Grants to Other Agencies	1,116.8	971.0	971.5	0.0	971.5	0.0	971.5
547900	Miscellaneous Expense	0.0	0.5	1.5	0.0	1.5	0.0	1.5
547999	Request to Pay Prior Year	0.0	66.0	0.0	0.0	0.0	0.0	0.0
549600	Employee O/S Mileage & Fares	19.2	3.1	15.0	0.0	13.0	0.0	13.0
549700	Employee O/S Meals & Lodging	0.0	15.0	30.0	0.0	28.0	0.0	28.0
400	Other	2,680.2	1,985.6	2,280.9	0.0	2,460.4	0.0	2,460.4
TOTAL EXPENSE		98,019.8	106,045.2	100,281.2	8,201.3	111,155.5	0.0	111,155.5
810	Permanent	68.00	45.00	70.00	70.00	55.00	0.00	55.00
810	Permanent	68.00	45.00	70.00	70.00	55.00	0.00	55.00
820	Term	2.00	0.00	0.00	0.00	30.00	0.00	30.00
820	Term	2.00	0.00	0.00	0.00	30.00	0.00	30.00
TOTAL FTE POSITIONS		70.00	45.00	70.00	70.00	85.00	0.00	85.00

APPROPRIATION REQUEST

FORM S-10 FUND BALANCE PROJECTION

(In Whole Dollars)

Agency: <u>Health Care Authority Department</u>	Business Unit: <u>63000</u>
Fund Name: <u>Health Care Affordability Fund</u>	Fund Number: <u>72420</u>
Legal Auth. <u>Laws of 2021, Ch 136, SB 317</u>	
Agency: <u>Health Care Authority Department</u>	Business Unit: <u>63000</u>
Fund Name: <u>Health Care Affordability Fund</u>	Fund Number: <u>72420</u>
Legal Auth. _____	

BEGINNING BALANCE

Unreserved, undesignated fund balance (not cash balance) from SHARE NMS006GL Balance Sheet Report at close of FY25	<u>49,631,800</u>
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ADJUSTMENTS

Add:

Interfund receivables, accounts receivables, and other assets not reflected in fund balance from FCD Reports at close of FY25	<u>14,711,400</u>
Other (explain in detail)	<u>0</u>

Deduct:

Liabilities not reflected in FCD Reports at close of FY25	<u>(8,361,600)</u>
Fund balance designated by law for future expenditure (non-reverting funds)	<u>148,740,400</u>
Amount due to State General Fund or other fund designated by statute	<u>0</u>
Other (explain in detail)	<u>0</u>
FY25 revision not reflected in liabilities	<u>0</u>
Total Adjustments	<u>155,090,200</u>
ADJUSTED UNRESERVED, UNDESIGNATED FUND BALANCE at close of FY25	<u>204,722,000</u>

Add:

Projected revenue/sources (less fund balance budgeted) for FY26	<u>205,264,100</u>
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Deduct:

Projected total expenditures for FY26	<u>(248,700,000)</u>
ADJUSTED UNRESERVED/UNDESIGNATED FUND BALANCE at close of FY26	<u>161,286,100</u>

Add:

Projected revenue/sources (less fund balance requested) for FY27	<u>128,300,200</u>
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Deduct:

Total expenditures budgeted in appropriation request	<u>(128,300,200)</u>
ADJUSTED UNRESERVED/UNDESIGNATED FUND BALANCE at close of FY27	<u>161,286,100</u>

APPROPRIATION REQUEST

FORM S-10 FUND BALANCE PROJECTION

(In Whole Dollars)

Agency: Health Care Authority Department Business Unit: 63000
Fund Name: SHBD Group Self Insurance Fund Fund Number: 72440
Legal Auth. 10-7B-7 NMSA 1978

BEGINNING BALANCE

Unreserved, undesignated fund balance (not cash balance) from SHARE NMS006GL Balance Sheet
Report at close of FY25 15,000,000

ADJUSTMENTS

Add:

Interfund receivables, accounts receivables, and other assets not reflected in fund balance from FCD
Reports at close of FY25 466,939,300
Other (explain in detail) 0

Deduct:

Liabilities not reflected in FCD Reports at close of FY25 (481,939,300)
Fund balance designated by law for future expenditure (non-reverting funds) 0
Amount due to State General Fund or other fund designated by statute 0
Other (explain in detail) 0
FY25 revision not reflected in liabilities 0
Total Adjustments (15,000,000)

ADJUSTED UNRESERVED, UNDESIGNATED FUND BALANCE at close of FY25 0

Add:

Projected revenue/sources (less fund balance budgeted) for FY26 510,853,500

Deduct:

Projected total expenditures for FY26 (510,853,500)

ADJUSTED UNRESERVED/UNDESIGNATED FUND BALANCE at close of FY26 0

Add:

Projected revenue/sources (less fund balance requested) for FY27 660,208,100

Deduct:

Total expenditures budgeted in appropriation request (660,208,100)

ADJUSTED UNRESERVED/UNDESIGNATED FUND BALANCE at close of FY27 0

State of New Mexico

S-13 Line Items by Business Unit Expenditures

(Dollars in Thousands)

BusUnit	Line Item		2024-25	2025-26	Request		Recommendation		Opbud		
			Actuals	Opbud	Base	Expansion	Base	Expansion			
63000	P519-R	Developmental Disabilities Sup	520100	Exempt Perm Positions P/T&F/T	272.4	96.1	159	0	0	0	0.0
			520200	Term Positions	10,203.6	0	0	0	0	0	0.0
			520300	Classified Perm Positions F/T	11,533.4	13,099.4	13,315	0	0	0	0.0
			520400	Classified Perm Positions P/T	465	0	232.8	0	0	0	0.0
			520600	Paid Unused Sick Leave	12.4	3.4	15.4	0	0	0	0.0
			520700	Overtime & Other Premium Pay	463.8	525.2	245	0	0	0	0.0
			520800	Annl & Comp Paid At Separation	65.2	144.2	20.8	0	0	0	0.0
			520900	Differential Pay	0.8	0	0.4	0	0	0	0.0
			521100	Group Insurance Premium	2,598.8	1,250.8	2,214.4	0	0	0	0.0
			521200	Retirement Contributions	4,324.2	2,636.6	2,562.4	0	0	0	0.0
			521300	F I C A	1,646.2	1,026.4	1,000.8	0	0	0	0.0
			521400	Workers' Comp Assessment Fee	51.6	1.6	1.8	0	0	0	0.0
			521410	GSD Work Comp Insur Premium	0	25.7	19.4	0	0	0	0.0
			521500	Unemployment Comp Premium	16	10.3	14.8	0	0	0	0.0
			521600	Employee Liability Ins Premium	270.4	212.4	289.4	0	0	0	0.0
			521700	RHC Act Contributions	449.6	229.8	261	0	0	0	0.0
			535100	Medical Services	1,840.5	2,313.6	164	0	0	0	0.0
			535200	Professional Services	6,771.6	7,377.8	4,917.2	0	0	0	0.0
			535300	Other Services	1,850.7	2,206	7,229.6	0	0	0	0.0
			535310	Other Services - Higher Ed	316.3	377.9	333.2	0	0	0	0.0
			535600	IT Services	0.3	5.3	5	0	0	0	0.0
			542100	Employee I/S Mileage & Fares	13.8	30	30	0	0	0	0.0
			542200	Employee I/S Meals & Lodging	22.4	60	60	0	0	0	0.0
			542500	Transp - Fuel & Oil	50.8	60	60	0	0	0	0.0
			542600	Transp - Parts & Supplies	9.8	15	15	0	0	0	0.0
			542700	Transp - Transp Insurance	0.4	0.2	0.1	0	0	0	0.0
			542800	State Transp Pool Charges	349.6	300	300	0	0	0	0.0
			543200	Maint - Furn, Fixt, Equipment	13.2	80	80	0	0	0	0.0
			543300	Maint - Buildings & Structures	6	25	25	0	0	0	0.0
			543400	Maint - Property Insurance	0.2	0.1	0.3	0	0	0	0.0
			543830	IT HW/SW Agreements	2,300.2	1,700	2,009.2	0	0	0	0.0
			544000	Supply Inventory IT	45	75	22	0	0	0	0.0

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(Dollars in Thousands)

544100	Supplies-Office Supplies	28.2	35	20	0	0	0	0.0
544200	Supplies-Medical, Lab, Personal	24.4	55.4	20	0	0	0	0.0
544400	Supplies-Field Supplies	8.2	20	7	0	0	0	0.0
544900	Supplies-Inventory Exempt	10.4	35	35	0	0	0	0.0
545600	Reporting & Recording	0	0.6	0	0	0	0	0.0
545900	Printing & Photo Services	2.4	7.2	8	0	0	0	0.0
546100	Postage & Mail Services	7.4	7	7	0	0	0	0.0
546400	Rent Of Land & Buildings	1,508.4	1,261.4	3,000	0	0	0	0.0
546500	Rent Of Equipment	30.2	18	20	0	0	0	0.0
546610	DOIT Telecommunications	374	200.3	195.1	0	0	0	0.0
546700	Subscriptions/Dues/License Fee	123.4	90	90	0	0	0	0.0
546800	Employee Training & Education	13.4	10	10	0	0	0	0.0
546900	Advertising	0.2	0.5	0.6	0	0	0	0.0
547300	Care & Support	5,187	4,233.5	4,000	0	0	0	0.0
547309	Care & Support InterSt Agency	374	186.8	175.4	0	0	0	0.0
547900	Miscellaneous Expense	1	10.8	11	0	0	0	0.0
547999	Request to Pay Prior Year	100	0	55	0	0	0	0.0
548400	Other Equipment	35.4	0	20	0	0	0	0.0
549600	Employee O/S Mileage & Fares	20	48	50	0	0	0	0.0
549700	Employee O/S Meals & Lodging	21.2	20.2	54	0	0	0	0.0
550000	Other Financing Uses	0	284,324.8	0	0	0	0	0.0
555100	Other Financing Uses	455,438.4	0	323,424.8	47,000	0	0	0.0
Subtotal for:	63000 P519-R Developmental Disabilities Supp	509,271.8	324,452.3	366,805.9	47,000	0	0	0.0

BusUnit	Line Item	2024-25	2025-26	Request		Recommendation		Opbud	
		Actuals	Opbud	Base	Expansion	Base	Expansion		
63000	P520-R Health Improvement	520100 Exempt Perm Positions P/T&F/T	237.6	250	159	0	0	0	0.0
		520200 Term Positions	3,710.2	2,100	86.9	0	0	0	0.0
		520300 Classified Perm Positions F/T	19.09	16,783.3	19,226.3	1,900	0	0	0.0
		520600 Paid Unused Sick Leave	6.2	0	17.2	0	0	0	0.0
		520700 Overtime & Other Premium Pay	799.4	750	273.5	0	0	0	0.0
		520800 Annl & Comp Paid At Separation	52.2	95	23.2	0	0	0	0.0
		520900 Differential Pay	0	0	0.5	0	0	0	0.0
		521100 Group Insurance Premium	2,530.6	1,500	2,471.2	0	0	0	0.0
		521200 Retirement Contributions	4,400.8	2,500	3,046.7	0	0	0	0.0

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(Dollars in Thousands)

521300	F I C A	1,724.6	1,000	1,205.2	0	0	0	0.0
521400	Workers' Comp Assessment Fee	64.6	1.7	2.1	0	0	0	0.0
521410	GSD Work Comp Insur Premium	0	27.2	21.6	0	0	0	0.0
521500	Unemployment Comp Premium	20.2	10.9	16.5	0	0	0	0.0
521600	Employee Liability Ins Premium	342.8	224.6	322.7	0	0	0	0.0
521700	RHC Act Contributions	456.4	262	316.7	0	0	0	0.0
535200	Professional Services	0	0	12	1	0	0	0.0
535300	Other Services	0	1,145	600.5	0	0	0	0.0
535500	Attorney Services	0	177.5	0	0	0	0	0.0
535600	IT Services	0	0	1,360.5	0	0	0	0.0
542100	Employee I/S Mileage & Fares	3.36	118.2	202.7	50	0	0	0.0
542200	Employee I/S Meals & Lodging	496	435	250	0	0	0	0.0
542500	Transp - Fuel & Oil	50.2	19.3	10	0	0	0	0.0
542600	Transp - Parts & Supplies	7.2	0	1	0	0	0	0.0
542700	Transp - Transp Insurance	0.4	0.2	0.1	0	0	0	0.0
542800	State Transp Pool Charges	516.4	134.6	550	0	0	0	0.0
543100	Maint - Grounds & Roadways	0.2	0	0	0	0	0	0.0
543200	Maint - Furn, Fixt, Equipment	44.2	0	2.5	0	0	0	0.0
543300	Maint - Buildings & Structures	1.8	57.2	2.5	0	0	0	0.0
543400	Maint - Property Insurance	0.2	0.1	0.3	0	0	0	0.0
543830	IT HW/SW Agreements	29.2	175	15	0	0	0	0.0
544000	Supply Inventory IT	39.4	209.3	15	0	0	0	0.0
544100	Supplies-Office Supplies	51.06	14.5	20	0	0	0	0.0
544200	Supplies-Medical,Lab,Personal	0.4	56.6	0	0	0	0	0.0
544400	Supplies-Field Supplies	0.2	0	0.8	0	0	0	0.0
544900	Supplies-Inventory Exempt	40.6	24.7	30	0	0	0	0.0
545600	Reporting & Recording	0	0	0.5	0	0	0	0.0
545900	Printing & Photo Services	15.6	2.3	10	0	0	0	0.0
546100	Postage & Mail Services	31.6	23.3	25	0	0	0	0.0
546400	Rent Of Land & Buildings	1,296	1,150	2,000	250	0	0	0.0
546500	Rent Of Equipment	30.2	16.4	35	0	0	0	0.0
546600	Communications	1.4	0.6	2.5	0	0	0	0.0
546610	DOIT Telecommunications	370	211.9	217.6	0	0	0	0.0
546700	Subscriptions/Dues/License Fee	4.8	7.1	10	0	0	0	0.0
546800	Employee Training & Education	2.4	1.7	39.1	0	0	0	0.0

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			546900	Advertising	12.4	1.7	20	0	0	0	0.0
			547900	Miscellaneous Expense	12	1.7	44.5	0	0	0	0.0
			547999	Request to Pay Prior Year	106.8	0	1.5	0	0	0	0.0
			548300	Information Tech Equipment	0	182.5	0	0	0	0	0.0
			549600	Employee O/S Mileage & Fares	7.4	19.6	5	0	0	0	0.0
			549700	Employee O/S Meals & Lodging	9	8.3	5	0	0	0	0.0
Subtotal for:	63000	P520-R		Health Improvement	17,545.11	29,699	32,677.9	2,201	0	0	0.0

BusUnit	Line Item				2024-25	2025-26	Request		Recommendation		Opbud
					Actuals	Opbud	Base	Expansion	Base	Expansion	
63000	P521-R	State Health Benefits	535200	Professional Services	0	29,855	5,434.1	0	0	0	0.0
			535300	Other Services	0	0	25,391	0	0	0	0.0
			535900	Insurance Contract Premiums	0	7,500	7,650.6	0	0	0	0.0
			544100	Supplies-Office Supplies	9.43	0	4.7	0	0	0	0.0
			544900	Supplies-Inventory Exempt	0.6	0	0.5	0	0	0	0.0
			545900	Printing & Photo Services	3.96	0	2.3	0	0	0	0.0
			546100	Postage & Mail Services	38.48	0	22.2	0	0	0	0.0
			546400	Rent Of Land & Buildings	91.83	0	66.8	0	0	0	0.0
			546500	Rent Of Equipment	4.75	0	2.5	0	0	0	0.0
			547309	Care & Support InterSt Agency	3,513.74	0	1,780.5	0	0	0	0.0
			547350	Claims and Benefits Expenses	880,306.13	480,998.5	619,678.4	0	0	0	0.0
			547900	Miscellaneous Expense	344.44	0	172.5	0	0	0	0.0
			547999	Request to Pay Prior Year	1,881.96	0	0	0	0	0	0.0
			549600	Employee O/S Mileage & Fares	1.09	0	1	0	0	0	0.0
			549700	Employee O/S Meals & Lodging	0.93	0	1	0	0	0	0.0
Subtotal for:	63000	P521-R		State Health Benefits	886,197.33	518,353.5	660,208.1	0	0	0	0.0

BusUnit	Line Item				2024-25	2025-26	Request		Recommendation		Opbud
					Actuals	Opbud	Base	Expansion	Base	Expansion	
63000	P522-R	Program Support	520100	Exempt Perm Positions P/T&F/T	1,451.31	3,168.8	3,555.4	0	0	0	0.0
			520200	Term Positions	170.05	120	351.9	0	0	0	0.0
			520300	Classified Perm Positions F/T	17,089.29	25,119.9	24,996.4	0	0	0	0.0
			520600	Paid Unused Sick Leave	38.6	45	0	0	0	0	0.0
			520700	Overtime & Other Premium Pay	9.17	22.5	0	0	0	0	0.0
			520800	Annl & Comp Paid At Separation	69.7	135	1,146.6	0	0	0	0.0

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520900	Differential Pay	0	0	1,500	0	0	0	0.0
521100	Group Insurance Premium	1,536.63	1,705.1	800	0	0	0	0.0
521200	Retirement Contributions	3,600.38	3,750	1,934.6	0	0	0	0.0
521300	F I C A	1,363.08	1,375	2,678.8	0	0	0	0.0
521400	Workers' Comp Assessment Fee	43.29	3.1	3.2	0	0	0	0.0
521410	GSD Work Comp Insur Premium	0	49.8	33.3	0	0	0	0.0
521500	Unemployment Comp Premium	13.64	20.1	25.5	0	0	0	0.0
521600	Employee Liability Ins Premium	230.03	411.2	499.2	0	0	0	0.0
521700	RHC Act Contributions	374.27	362	65.7	0	0	0	0.0
535200	Professional Services	608.31	2,256.2	1,962.4	3,100	0	0	0.0
535300	Other Services	595.64	1,422.3	1,750	0	0	0	0.0
535400	Audit Services	277.94	543.8	401.1	0	0	0	0.0
535600	IT Services	48,588.21	53,817.7	61,846.7	0	0	0	0.0
542100	Employee I/S Mileage & Fares	2.34	30	30.5	0	0	0	0.0
542200	Employee I/S Meals & Lodging	27.86	39.5	40	0	0	0	0.0
542500	Transp - Fuel & Oil	5.78	6	2.5	0	0	0	0.0
542600	Transp - Parts & Supplies	0.18	1.1	0.1	0	0	0	0.0
542700	Transp - Transp Insurance	0.31	0.4	0.2	0	0	0	0.0
542800	State Transp Pool Charges	57.42	51.5	50.1	0	0	0	0.0
543200	Maint - Furn, Fixt, Equipment	69.77	78.5	70.3	0	0	0	0.0
543300	Maint - Buildings & Structures	72.37	153.6	56.5	0	0	0	0.0
543400	Maint - Property Insurance	0.19	0.1	0.4	0	0	0	0.0
543500	Maint - Supplies	0	5	0	0	0	0	0.0
543820	Maintenance IT	243.47	1,300	2,008.5	0	0	0	0.0
543830	IT HW/SW Agreements	12,760.6	12,786.4	12,148.6	7,338.9	0	0	0.0
544000	Supply Inventory IT	425.97	601.3	1,000.1	218.5	0	0	0.0
544100	Supplies-Office Supplies	9.29	81.4	9	0	0	0	0.0
544400	Supplies-Field Supplies	1.17	1.5	0.5	0	0	0	0.0
544800	Supplies-Education&Recreation	0	0	92.3	0	0	0	0.0
544900	Supplies-Inventory Exempt	397.04	109.5	0	0	0	0	0.0
545600	Reporting & Recording	2.22	17.5	23.6	0	0	0	0.0
545700	ISD Services	1,767.86	1,675.7	2,863.6	0	0	0	0.0
545710	DOIT HCM Assessment Fees	791.3	788	1,018.5	0	0	0	0.0
545900	Printing & Photo Services	180.7	56.7	1.1	0	0	0	0.0
546100	Postage & Mail Services	23.74	38.2	8.7	0	0	0	0.0

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546109	Postage&Mail Svcs - Int Agency	0	290	0	0	0	0	0	0.0
546400	Rent Of Land & Buildings	1,943.14	2,292.3	2,529	0	0	0	0	0.0
546500	Rent Of Equipment	36.65	110.1	40	0	0	0	0	0.0
546600	Communications	0	5	5	0	0	0	0	0.0
546610	DOIT Telecommunications	1,155.24	387.9	336.6	0	0	0	0	0.0
546700	Subscriptions/Dues/License Fee	747.09	323.9	325	0	0	0	0	0.0
546800	Employee Training & Education	28.74	101.1	65	0	0	0	0	0.0
546900	Advertising	46.13	54.5	5.7	0	0	0	0	0.0
547900	Miscellaneous Expense	4.27	8.2	1	0	0	0	0	0.0
547999	Request to Pay Prior Year	3.3	1.5	0	0	0	0	0	0.0
548200	Furniture & Fixtures	0	223.7	621.2	0	0	0	0	0.0
548300	Information Tech Equipment	656.9	110.8	286.8	0	0	0	0	0.0
548400	Other Equipment	0	25	55.7	0	0	0	0	0.0
549600	Employee O/S Mileage & Fares	13.96	33	15	0	0	0	0	0.0
549700	Employee O/S Meals & Lodging	15.15	19.2	38.5	0	0	0	0	0.0
549900	Brd & Comm O/S Meals & Lodgin	0	0	999.8	0	0	0	0	0.0
Subtotal for:	63000 P522-R Program Support	97,549.68	116,135.6	128,300.2	10,657.4	0	0	0	0.0

BusUnit	Line Item	2024-25	2025-26	Request		Recommendation		Opbud
		Actuals	Opbud	Base	Expansion	Base	Expansion	
63000	P523-R Child Support Enforcement							
	520100 Exempt Perm Positions P/T&F/T	145.19	152.9	170	0	0	0	0.0
	520300 Classified Perm Positions F/T	19,427.26	22,490.9	22,230.8	0	0	0	0.0
	520600 Paid Unused Sick Leave	38.81	39.9	44.4	0	0	0	0.0
	520700 Overtime & Other Premium Pay	1.89	8	8.9	0	0	0	0.0
	520800 Annl & Comp Paid At Separation	62.9	492.6	548.6	0	0	0	0.0
	521100 Group Insurance Premium	2,276.69	2,608.3	3,877.7	0	0	0	0.0
	521200 Retirement Contributions	3,768.44	4,148.3	4,546.5	0	0	0	0.0
	521300 F I C A	1,418.89	1,562.8	1,678.7	0	0	0	0.0
	521400 Workers' Comp Assessment Fee	48.79	2.8	3.1	0	0	0	0.0
	521410 GSD Work Comp Insur Premium	0	44.7	33	0	0	0	0.0
	521500 Unemployment Comp Premium	14.99	17.9	25.1	0	0	0	0.0
	521600 Employee Liability Ins Premium	254.24	368.3	492	0	0	0	0.0
	521700 RHC Act Contributions	399.04	431.2	434.7	0	0	0	0.0
	523200 COVID Related Time Worked	0.7	0	0	0	0	0	0.0
	535100 Medical Services	34.93	60	45	0	0	0	0.0

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535200	Professional Services	80	160	119	0	0	0	0.0
535300	Other Services	2,044.12	2,542.6	1,703.2	0	0	0	0.0
535309	Other Services - Interagency	3,669.87	3,669.9	3,910.6	0	0	0	0.0
535400	Audit Services	11.57	12	12.1	0	0	0	0.0
535600	IT Services	2,631.49	4,178.7	4,833.3	0	0	0	0.0
542100	Employee I/S Mileage & Fares	0.82	1	1	0	0	0	0.0
542200	Employee I/S Meals & Lodging	16.04	15	15	0	0	0	0.0
542500	Transp - Fuel & Oil	4.64	5.5	5.5	0	0	0	0.0
542600	Transp - Parts & Supplies	2.04	1.2	1.2	0	0	0	0.0
542700	Transp - Transp Insurance	0.31	0.3	0.2	0	0	0	0.0
542800	State Transp Pool Charges	87.65	95.8	85	0	0	0	0.0
543200	Maint - Furn, Fixt, Equipment	7.41	7.4	7.4	0	0	0	0.0
543300	Maint - Buildings & Structures	24.38	1	1	0	0	0	0.0
543400	Maint - Property Insurance	0.19	0.2	0.5	0	0	0	0.0
543830	IT HW/SW Agreements	154.7	336.8	336.8	0	0	0	0.0
544000	Supply Inventory IT	3.46	6	6	0	0	0	0.0
544100	Supplies-Office Supplies	15.19	16	20	0	0	0	0.0
544900	Supplies-Inventory Exempt	10.12	6	10	0	0	0	0.0
545600	Reporting & Recording	5.84	6.5	6.5	0	0	0	0.0
545900	Printing & Photo Services	29.62	47.5	47.5	0	0	0	0.0
546100	Postage & Mail Services	613.87	595	595	0	0	0	0.0
546320	Utilities - Electricity	0.02	0	0	0	0	0	0.0
546400	Rent Of Land & Buildings	2,921.24	3,049.3	3,061.5	0	0	0	0.0
546500	Rent Of Equipment	141.52	144.8	144.8	0	0	0	0.0
546600	Communications	11.79	7.4	7.4	0	0	0	0.0
546610	DOIT Telecommunications	440.7	347.4	331.8	0	0	0	0.0
546700	Subscriptions/Dues/License Fee	89.92	82.4	82.4	0	0	0	0.0
546800	Employee Training & Education	37.1	14	14	0	0	0	0.0
546900	Advertising	50.77	53.6	53.6	0	0	0	0.0
547000	Legal Settlements	38	0	0	0	0	0	0.0
547300	Care & Support	12.63	10	10	0	0	0	0.0
547900	Miscellaneous Expense	205.5	316.1	316.1	0	0	0	0.0
547999	Request to Pay Prior Year	83.98	1	1	0	0	0	0.0
549600	Employee O/S Mileage & Fares	12.37	13	16	0	0	0	0.0
549700	Employee O/S Meals & Lodging	8.45	10	13	0	0	0	0.0

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Subtotal for:			63000	P523-R	Child Support Enforcement	41,360.05	48,182	49,906.9	0	0	0	0.0
BusUnit	Line Item		2024-25	2025-26	Request		Recommendation		Opbud			
			Actuals	Opbud	Base	Expansion	Base	Expansion				
63000	P524-R	Medical Assistance										
	520100	Exempt Perm Positions P/T&F/T	217.01	119	119	0	0	0	0.0			
	520200	Term Positions	6.55	0	0	0	0	0	0.0			
	520300	Classified Perm Positions F/T	12,530.1	17,043.9	18,446.4	3,697.8	0	0	0.0			
	520400	Classified Perm Positions P/T	0	17.2	17.2	0	0	0	0.0			
	520600	Paid Unused Sick Leave	16.02	0	0	0	0	0	0.0			
	520700	Overtime & Other Premium Pay	2.84	0	0	0	0	0	0.0			
	520800	Annl & Comp Paid At Separation	22.82	0	0	0	0	0	0.0			
	521100	Group Insurance Premium	1,217.33	1,457.8	1,493.5	88.1	0	0	0.0			
	521200	Retirement Contributions	2,453.88	2,155.5	2,442.2	706.6	0	0	0.0			
	521300	F I C A	916.78	914.7	1,029.4	282.9	0	0	0.0			
	521400	Workers' Comp Assessment Fee	27.83	2	2.5	0	0	0	0.0			
	521410	GSD Work Comp Insur Premium	0	33.1	24.9	0	0	0	0.0			
	521500	Unemployment Comp Premium	8.68	13.3	19	0	0	0	0.0			
	521600	Employee Liability Ins Premium	146.43	273.1	372.6	0	0	0	0.0			
	521700	RHC Act Contributions	255.07	249.5	279.5	74	0	0	0.0			
	535100	Medical Services	26.37	11,936	11,936	0	0	0	0.0			
	535200	Professional Services	54,454.32	29,479	37,229.1	0	0	0	0.0			
	535300	Other Services	40,120.3	76,894.1	100,101.1	3,145.5	0	0	0.0			
	535309	Other Services - Interagency	670.5	670	670	0	0	0	0.0			
	535310	Other Services - Higher Ed	-146.48	0	0	0	0	0	0.0			
	535400	Audit Services	0	1,430.9	1,431	0	0	0	0.0			
	535500	Attorney Services	17.93	149.6	149.6	0	0	0	0.0			
	535600	IT Services	100,439.68	72,356	62,601.8	0	0	0	0.0			
	542100	Employee I/S Mileage & Fares	0.81	0	0	0	0	0	0.0			
	542200	Employee I/S Meals & Lodging	3.61	3	3.1	0	0	0	0.0			
	542500	Transp - Fuel & Oil	0.58	2	2	0	0	0	0.0			
	542600	Transp - Parts & Supplies	0.03	0.2	0.2	0	0	0	0.0			
	542700	Transp - Transp Insurance	0.2	0.2	0.1	0	0	0	0.0			
	542800	State Transp Pool Charges	8.71	8.5	9.1	0	0	0	0.0			
	543300	Maint - Buildings & Structures	61.19	0	0	0	0	0	0.0			
	543400	Maint - Property Insurance	0.1	0.1	0.4	0	0	0	0.0			

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(Dollars in Thousands)

543830	IT HW/SW Agreements	22,082.19	1,000	1,000	0	0	0	0.0
544000	Supply Inventory IT	63.49	4	4	0	0	0	0.0
544100	Supplies-Office Supplies	5.11	2	2	0	0	0	0.0
544900	Supplies-Inventory Exempt	293.27	158	140	0	0	0	0.0
545600	Reporting & Recording	85.28	80	80	0	0	0	0.0
545900	Printing & Photo Services	1.9	2	2	0	0	0	0.0
546100	Postage & Mail Services	29.67	1,000	1,077.9	0	0	0	0.0
546400	Rent Of Land & Buildings	428.57	1,104	1,104	445.2	0	0	0.0
546500	Rent Of Equipment	58.78	60	60	0	0	0	0.0
546600	Communications	0.01	0	0	0	0	0	0.0
546610	DOIT Telecommunications	197	257.7	251.3	0	0	0	0.0
546700	Subscriptions/Dues/License Fee	23.56	30	30	0	0	0	0.0
546800	Employee Training & Education	39.92	12	12	0	0	0	0.0
546900	Advertising	20.34	30	30	0	0	0	0.0
547000	Legal Settlements	1,009.49	0	0	0	0	0	0.0
547300	Care & Support	8,399,352.16	11,049,040.9	10,311,597.1	0	0	0	0.0
547450	Grants to Other Agencies	22,360.84	21,295.4	20,269.1	0	0	0	0.0
547900	Miscellaneous Expense	3,213.72	0	0	0	0	0	0.0
547909	Misc Expense Interagency	1,731	0	0	0	0	0	0.0
547999	Request to Pay Prior Year	2.4	0	0	0	0	0	0.0
548200	Furniture & Fixtures	528.52	0	0	0	0	0	0.0
548300	Information Tech Equipment	826.27	0	0	0	0	0	0.0
549600	Employee O/S Mileage & Fares	17.52	18	18	0	0	0	0.0
549700	Employee O/S Meals & Lodging	22.8	24	24	0	0	0	0.0
Subtotal for:	63000 P524-R Medical Assistance	8,665,872.98	11,289,326.7	10,574,081.1	8,440.1	0	0	0.0

BusUnit	Line Item	2024-25	2025-26	Request		Recommendation		Opbud
		Actuals	Opbud	Base	Expansion	Base	Expansion	
63000	P525-R Income Support							
	520100 Exempt Perm Positions P/T&F/T	155.01	120.2	163.8	0	0	0	0.0
	520200 Term Positions	418.61	403.6	540.5	0	0	0	0.0
	520300 Classified Perm Positions F/T	48,839.98	53,378.7	61,548.7	14,332.8	0	0	0.0
	520400 Classified Perm Positions P/T	0	51.1	0	0	0	0	0.0
	520500 Temporary Positions F/T & P/T	76.58	6,176.3	0	0	0	0	0.0
	520600 Paid Unused Sick Leave	26.04	36	28.6	6.6	0	0	0.0
	520700 Overtime & Other Premium Pay	388.46	2,540.9	422.2	97.5	0	0	0.0

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S-13 Line Items by Business Unit Expenditures

(Dollars in Thousands)

520800	Annl & Comp Paid At Separation	213.76	140.1	202.9	46.8	0	0	0.0
520900	Differential Pay	0.72	0.9	0.8	0.2	0	0	0.0
521100	Group Insurance Premium	6,669.49	8,132.3	10,962.1	2,452.1	0	0	0.0
521200	Retirement Contributions	10,114.44	12,123.4	11,713.9	2,654.9	0	0	0.0
521300	F I C A	3,840.47	5,186.8	4,543.8	1,030.5	0	0	0.0
521400	Workers' Comp Assessment Fee	133.22	8.8	12.3	0	0	0	0.0
521410	GSD Work Comp Insur Premium	0	142.6	130.1	0	0	0	0.0
521500	Unemployment Comp Premium	40.91	57.2	99.5	0	0	0	0.0
521600	Employee Liability Ins Premium	692.52	1,176	1,945.8	0	0	0	0.0
521700	RHC Act Contributions	1,051.43	1,263.1	1,170.1	265	0	0	0.0
521900	Other Employee Benefits	4.17	0	0	0	0	0	0.0
523200	COVID Related Time Worked	1.13	0	0	0	0	0	0.0
535100	Medical Services	0.75	1	1.2	0	0	0	0.0
535200	Professional Services	16,060.34	26,890.2	30,283.1	0	0	0	0.0
535300	Other Services	39,607.64	43,471.2	62,241.1	0	0	0	0.0
535500	Attorney Services	379.77	70	0	0	0	0	0.0
535600	IT Services	22,443.18	36,053.6	45,774.4	10,397	0	0	0.0
542100	Employee I/S Mileage & Fares	1.08	25	152.8	0	0	0	0.0
542200	Employee I/S Meals & Lodging	22.62	25	585.6	0	0	0	0.0
542500	Transp - Fuel & Oil	80.07	200	200	0	0	0	0.0
542600	Transp - Parts & Supplies	71.96	250	250.1	0	0	0	0.0
542700	Transp - Transp Insurance	0.92	0.9	0.8	0	0	0	0.0
542800	State Transp Pool Charges	131.98	250	125.7	0	0	0	0.0
543200	Maint - Furn, Fixt, Equipment	12.7	150	151.1	0	0	0	0.0
543300	Maint - Buildings & Structures	188.19	500	550.1	0	0	0	0.0
543400	Maint - Property Insurance	0.57	0.5	1.8	0	0	0	0.0
543500	Maint - Supplies	2.6	10	10	0	0	0	0.0
543700	Maintenance Services	0.61	2	2	0	0	0	0.0
543820	Maintenance IT	13.04	1	27.6	0	0	0	0.0
543830	IT HW/SW Agreements	3,505.77	6,501.3	6,515	5,000	0	0	0.0
544000	Supply Inventory IT	28.85	20	420	0	0	0	0.0
544100	Supplies-Office Supplies	63.03	60	60	0	0	0	0.0
544400	Supplies-Field Supplies	0.95	0	355	0	0	0	0.0
544800	Supplies-Education&Recreation	0	10	50.1	0	0	0	0.0
544900	Supplies-Inventory Exempt	1,184.11	150	224.3	0	0	0	0.0

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S-13 Line Items by Business Unit Expenditures

(Dollars in Thousands)

545600	Reporting & Recording	3.16	5	15	0	0	0	0.0	
545900	Printing & Photo Services	34.36	36	36	0	0	0	0.0	
546100	Postage & Mail Services	2,481.52	10,100.1	9,542.2	0	0	0	0.0	
546310	Utilities - Sewer/Garbage	18.42	25	25	0	0	0	0.0	
546320	Utilities - Electricity	146.23	180	200	0	0	0	0.0	
546330	Utilities - Water	13.71	19	30	0	0	0	0.0	
546340	Utilities - Natural Gas	12.12	25.3	25.3	0	0	0	0.0	
546400	Rent Of Land & Buildings	9,712.32	11,171.9	11,171.5	5,000	0	0	0.0	
546409	Rent Expense - Interagency	0	447.2	14	0	0	0	0.0	
546500	Rent Of Equipment	252.46	270	270	0	0	0	0.0	
546600	Communications	101.75	105	105	0	0	0	0.0	
546610	DOIT Telecommunications	377.92	1,109.5	1,312.3	0	0	0	0.0	
546700	Subscriptions/Dues/License Fee	23.27	30	30	0	0	0	0.0	
546800	Employee Training & Education	12.65	15	15	0	0	0	0.0	
546900	Advertising	4.77	239.5	200	0	0	0	0.0	
547300	Care & Support	1,118,520.58	1,227,668	1,236,415.9	0	0	0	0.0	
547350	Claims and Benefits Expenses	4.29	0	0	0	0	0	0.0	
547410	Grants To Public Schools&Univ	0	440.4	0	0	0	0	0.0	
547440	Grants To Other Entities	1,030.04	325.4	296.5	0	0	0	0.0	
547450	Grants to Other Agencies	65,259.34	70,441.2	70,441.2	0	0	0	0.0	
547900	Miscellaneous Expense	59.28	108.5	100	0	0	0	0.0	
547999	Request to Pay Prior Year	497.92	0	0	0	0	0	0.0	
548200	Furniture & Fixtures	421.45	0	320.4	975.1	0	0	0.0	
549600	Employee O/S Mileage & Fares	11.64	15	15	0	0	0	0.0	
549700	Employee O/S Meals & Lodging	12.71	17.4	20	0	0	0	0.0	
Subtotal for:	63000 P525-R Income Support		1,355,479.56	1,528,374.1	1,572,067.2	42,258.5	0	0	0.0

BusUnit	Line Item	2024-25	2025-26	Request		Recommendation		Opbud		
		Actuals	Opbud	Base	Expansion	Base	Expansion			
63000	P762-R Health Care Affordability Fund	520300	Classified Perm Positions F/T	587.95	660	722.4	0	0	0	0.0
		520800	Annl & Comp Paid At Separation	0.12	0	0	0	0	0	0.0
		521100	Group Insurance Premium	47.14	70.5	107.4	0	0	0	0.0
		521200	Retirement Contributions	113.12	187	167.2	0	0	0	0.0
		521300	F I C A	41.98	76.5	53.3	0	0	0	0.0
		521400	Workers' Comp Assessment Fee	1.7	0.1	0.1	0	0	0	0.0

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S-13 Line Items by Business Unit Expenditures

(Dollars in Thousands)

521410	GSD Work Comp Insur Premium	0	1.5	1	0	0	0	0.0		
521500	Unemployment Comp Premium	0.45	0.6	0.7	0	0	0	0.0		
521600	Employee Liability Ins Premium	8.61	12.3	14.5	0	0	0	0.0		
521700	RHC Act Contributions	11.76	20	13.9	0	0	0	0.0		
535200	Professional Services	0	1,000	1,700	0	0	0	0.0		
535300	Other Services	0	0	500	0	0	0	0.0		
542100	Employee I/S Mileage & Fares	1.77	24.5	1.2	0	0	0	0.0		
542200	Employee I/S Meals & Lodging	2.46	24.3	1.2	0	0	0	0.0		
542500	Transp - Fuel & Oil	0	0	1	0	0	0	0.0		
543820	Maintenance IT	1.1	0	1.5	0	0	0	0.0		
544000	Supply Inventory IT	1.85	11.4	9	0	0	0	0.0		
544100	Supplies-Office Supplies	5.22	7.5	4.5	0	0	0	0.0		
544900	Supplies-Inventory Exempt	6.59	0	5	0	0	0	0.0		
545900	Printing & Photo Services	2.33	0	7	0	0	0	0.0		
546100	Postage & Mail Services	1.61	0	1	0	0	0	0.0		
546400	Rent Of Land & Buildings	0	29.2	66.8	0	0	0	0.0		
546409	Rent Expense - Interagency	38.61	0	0	0	0	0	0.0		
546500	Rent Of Equipment	1.57	7.3	1	0	0	0	0.0		
546610	DOIT Telecommunications	0	11.6	9.8	0	0	0	0.0		
546700	Subscriptions/Dues/License Fee	1.41	0	0.7	0	0	0	0.0		
546800	Employee Training & Education	5.28	0	2.6	0	0	0	0.0		
546900	Advertising	0	2.4	0	0	0	0	0.0		
547360	Insurance Premiums-non_payroll	137,358.54	145,768.9	201,853.1	0	0	0	0.0		
547900	Miscellaneous Expense	0.28	0	0.2	0	0	0	0.0		
548200	Furniture & Fixtures	0	12.2	8	0	0	0	0.0		
548300	Information Tech Equipment	0	12.2	0	0	0	0	0.0		
549600	Employee O/S Mileage & Fares	6.11	46.4	5	0	0	0	0.0		
549700	Employee O/S Meals & Lodging	8.14	42.1	5	0	0	0	0.0		
555106	OFU - INTRA-Agency	60,000	30,000	0	0	0	0	0.0		
Subtotal for:	63000	P762-R	Health Care Affordability Fund	198,255.72	178,028.5	205,264.1	0	0	0	0.0

BusUnit	Line Item	2024-25	2025-26	Request		Recommendation		Opbud			
		Actuals	Opbud	Base	Expansion	Base	Expansion				
63000	P766-R	Medicaid Behavioral Health	520300	Classified Perm Positions F/T	0	0	610	0	0	0	0.0
			521100	Group Insurance Premium	0	0	14.6	0	0	0	0.0

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(Dollars in Thousands)

521200	Retirement Contributions	0	0	116.6	0	0	0	0.0
521300	F I C A	0	0	46.6	0	0	0	0.0
521700	RHC Act Contributions	0	0	12.2	0	0	0	0.0
535300	Other Services	0	0	5,161	0	0	0	0.0
535309	Other Services - Interagency	0	0	3,191.8	0	0	0	0.0
544100	Supplies-Office Supplies	0	0	74.2	0	0	0	0.0
545609	Report/Record Inter St Agency	616.06	100	100	0	0	0	0.0
547300	Care & Support	798,394.9	936,442	1,180,072	0	0	0	0.0
547450	Grants to Other Agencies	0	0	5,150	0	0	0	0.0
Subtotal for:	63000 P766-R Medicaid Behavioral Health			799,010.96 936,542 1,194,549	0	0	0	0.0

BusUnit	Line Item	2024-25	2025-26	Request		Recommendation		Opbud
		Actuals	Opbud	Base	Expansion	Base	Expansion	
63000	P767-R Behavioral Health Services							
	520100 Exempt Perm Positions P/T&F/T	138.6	160.2	315.4	0	0	0	0.0
	520200 Term Positions	725.96	738.6	1,519	0	0	0	0.0
	520300 Classified Perm Positions F/T	2,920.97	3,950.7	3,463.6	0	0	0	0.0
	520600 Paid Unused Sick Leave	2.76	0	0	0	0	0	0.0
	520700 Overtime & Other Premium Pay	0.75	0	0	0	0	0	0.0
	520800 Annl & Comp Paid At Separation	11.79	0	0	0	0	0	0.0
	521100 Group Insurance Premium	296.38	430.8	770	0	0	0	0.0
	521200 Retirement Contributions	728.34	887.1	883.3	0	0	0	0.0
	521300 F I C A	275.19	352.7	351.2	0	0	0	0.0
	521400 Workers' Comp Assessment Fee	6.83	0.6	0.6	0	0	0	0.0
	521410 GSD Work Comp Insur Premium	0	10.4	6.8	0	0	0	0.0
	521500 Unemployment Comp Premium	2.14	4.2	5.2	0	0	0	0.0
	521600 Employee Liability Ins Premium	35.29	85.9	101.3	0	0	0	0.0
	521700 RHC Act Contributions	75.71	92.2	91.8	0	0	0	0.0
	535100 Medical Services	95,526.5	87,181.2	96,406.5	0	0	0	0.0
	535200 Professional Services	2,810.85	0	170	0	0	0	0.0
	535300 Other Services	223.47	4,105.7	4,610.4	0	0	0	0.0
	535309 Other Services - Interagency	4.1	0	0	0	0	0	0.0
	535600 IT Services	274	0	0	0	0	0	0.0
	542100 Employee I/S Mileage & Fares	1.73	5	3.1	0	0	0	0.0
	542200 Employee I/S Meals & Lodging	19.89	18.8	20.8	0	0	0	0.0
	542500 Transp - Fuel & Oil	1.04	1	1	0	0	0	0.0

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(Dollars in Thousands)

542700	Transp - Transp Insurance	0	0.1	0	0	0	0	0	0.0
542800	State Transp Pool Charges	11.76	13	13	0	0	0	0	0.0
543200	Maint - Furn, Fixt, Equipment	1.38	10	5	0	0	0	0	0.0
543300	Maint - Buildings & Structures	0	0.5	0.5	0	0	0	0	0.0
543400	Maint - Property Insurance	0	0.1	0.1	0	0	0	0	0.0
543500	Maint - Supplies	0	1.3	1.3	0	0	0	0	0.0
543830	IT HW/SW Agreements	5.72	20	5	0	0	0	0	0.0
544000	Supply Inventory IT	23.78	5	1	0	0	0	0	0.0
544100	Supplies-Office Supplies	7.73	10	10	0	0	0	0	0.0
544900	Supplies-Inventory Exempt	55.92	55	60	0	0	0	0	0.0
545900	Printing & Photo Services	3.21	5	5	0	0	0	0	0.0
546100	Postage & Mail Services	71.36	50	72	0	0	0	0	0.0
546400	Rent Of Land & Buildings	510.47	800	800	0	0	0	0	0.0
546409	Rent Expense - Interagency	-10.28	0	0	0	0	0	0	0.0
546500	Rent Of Equipment	15.94	14.9	16.9	0	0	0	0	0.0
546610	DOIT Telecommunications	206.6	81.1	68.3	0	0	0	0	0.0
546700	Subscriptions/Dues/License Fee	52.34	55.1	55.1	0	0	0	0	0.0
546800	Employee Training & Education	18.79	15	27.3	0	0	0	0	0.0
546900	Advertising	0.95	2	1.5	0	0	0	0	0.0
547300	Care & Support	0	100	279.5	0	0	0	0	0.0
547450	Grants to Other Agencies	970.96	971.5	971.5	0	0	0	0	0.0
547900	Miscellaneous Expense	0.52	1.5	1.5	0	0	0	0	0.0
547999	Request to Pay Prior Year	66	0	0	0	0	0	0	0.0
549600	Employee O/S Mileage & Fares	3.1	15	13	0	0	0	0	0.0
549700	Employee O/S Meals & Lodging	15	30	28	0	0	0	0	0.0
Subtotal for:	63000 P767-R Behavioral Health Services		106,113.52	100,281.2	111,155.5	0	0	0	0.0
			2024-25	2025-26	Request		Recommendation		
BusUnit	Line Item		Actuals	Opbud	Base	Expansion	Base	Expansion	Opbud
63000	Z-CODES-63000 Human Services Department - Z 535600	IT Services	3,805.85	0	0	0	0	0	0.0
Subtotal for:	63000 Z-CODES-63000 Human Services Depart		3,805.85	0	0	0	0	0	0.0
63000			#####	#####	#####	110,557	0	0	0.0

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S-13 Line Items by Business Unit Expenditures

(Dollars in Thousands)

Totals by Line Item

BusUnit	Line Item	2024-25	2025-26	Request		Recommendation		Opbud	
		Actuals	Opbud	Base	Expansion	Base	Expansion		
63000	520100	Exempt Perm Positions P/T&F/T	2,617.12	4,067.2	4,641.6	0	0	0	0.0
	520200	Term Positions	15,234.97	3,362.2	2,498.3	0	0	0	0.0
	520300	Classified Perm Positions F/T	112,948.05	152,526.8	164,559.6	19,930.6	0	0	0.0
	520400	Classified Perm Positions P/T	465	68.3	250	0	0	0	0.0
	520500	Temporary Positions F/T & P/T	76.58	6,176.3	0	0	0	0	0.0
	520600	Paid Unused Sick Leave	140.83	124.3	105.6	6.6	0	0	0.0
	520700	Overtime & Other Premium Pay	1,666.31	3,846.6	949.6	97.5	0	0	0.0
	520800	Annl & Comp Paid At Separation	498.5	1,006.9	1,942.1	46.8	0	0	0.0
	520900	Differential Pay	1.52	0.9	1,501.7	0.2	0	0	0.0
	521100	Group Insurance Premium	17,173.07	17,155.6	22,710.9	2,540.2	0	0	0.0
	521200	Retirement Contributions	29,503.6	28,387.9	27,413.4	3,361.5	0	0	0.0
	521300	F I C A	11,227.18	11,494.9	12,587.8	1,313.4	0	0	0.0
	521400	Workers' Comp Assessment Fee	377.86	20.7	25.7	0	0	0	0.0
	521410	GSD Work Comp Insur Premium	0	335	270.1	0	0	0	0.0
	521500	Unemployment Comp Premium	117.01	134.5	206.3	0	0	0	0.0
	521600	Employee Liability Ins Premium	1,980.32	2,763.8	4,037.5	0	0	0	0.0
	521700	RHC Act Contributions	3,073.27	2,909.8	2,645.6	339	0	0	0.0
	521900	Other Employee Benefits	4.17	0	0	0	0	0	0.0
	523200	COVID Related Time Worked	1.83	0	0	0	0	0	0.0
	535100	Medical Services	97,429.04	101,491.8	108,552.7	0	0	0	0.0
	535200	Professional Services	80,785.41	97,018.2	81,826.9	3,101	0	0	0.0
	535300	Other Services	84,441.86	131,786.9	209,287.9	3,145.5	0	0	0.0
	535309	Other Services - Interagency	4,344.47	4,339.9	7,772.4	0	0	0	0.0
	535310	Other Services - Higher Ed	169.82	377.9	333.2	0	0	0	0.0
	535400	Audit Services	289.51	1,986.7	1,844.2	0	0	0	0.0
	535500	Attorney Services	397.7	397.1	149.6	0	0	0	0.0
	535600	IT Services	178,182.72	166,411.3	176,421.7	10,397	0	0	0.0
	535900	Insurance Contract Premiums	0	7,500	7,650.6	0	0	0	0.0

State of New Mexico

S-13 Line Items by Business Unit Expenditures

(Dollars in Thousands)

542100	Employee I/S Mileage & Fares	25.71	233.7	421.3	50	0	0	0.0
542200	Employee I/S Meals & Lodging	610.88	620.6	975.7	0	0	0	0.0
542500	Transp - Fuel & Oil	193.1	293.8	282	0	0	0	0.0
542600	Transp - Parts & Supplies	91.21	267.5	267.6	0	0	0	0.0
542700	Transp - Transp Insurance	2.53	2.3	1.5	0	0	0	0.0
542800	State Transp Pool Charges	1,163.52	853.4	1,132.9	0	0	0	0.0
543100	Maint - Grounds & Roadways	0.2	0	0	0	0	0	0.0
543200	Maint - Furn, Fixt, Equipment	148.66	325.9	316.3	0	0	0	0.0
543300	Maint - Buildings & Structures	353.92	737.3	635.6	0	0	0	0.0
543400	Maint - Property Insurance	1.45	1.2	3.8	0	0	0	0.0
543500	Maint - Supplies	2.6	16.3	11.3	0	0	0	0.0
543700	Maintenance Services	0.61	2	2	0	0	0	0.0
543820	Maintenance IT	257.62	1,301	2,037.6	0	0	0	0.0
543830	IT HW/SW Agreements	40,838.37	22,519.5	22,029.6	12,338.9	0	0	0.0
544000	Supply Inventory IT	631.8	932	1,477.1	218.5	0	0	0.0
544100	Supplies-Office Supplies	194.26	226.4	224.4	0	0	0	0.0
544200	Supplies-Medical,Lab,Personal	24.8	112	20	0	0	0	0.0
544400	Supplies-Field Supplies	10.51	21.5	363.3	0	0	0	0.0
544800	Supplies-Education&Recreation	0	10	142.4	0	0	0	0.0
544900	Supplies-Inventory Exempt	1,998.65	538.2	504.8	0	0	0	0.0
545600	Reporting & Recording	96.49	109.6	125.6	0	0	0	0.0
545609	Report/Record Inter St Agency	616.06	100	100	0	0	0	0.0
545700	ISD Services	1,767.86	1,675.7	2,863.6	0	0	0	0.0
545710	DOIT HCM Assessment Fees	791.3	788	1,018.5	0	0	0	0.0
545900	Printing & Photo Services	274.07	156.7	118.9	0	0	0	0.0
546100	Postage & Mail Services	3,299.26	11,813.6	11,351	0	0	0	0.0
546109	Postage&Mail Svcs - Int Agency	0	290	0	0	0	0	0.0
546310	Utilities - Sewer/Garbage	18.42	25	25	0	0	0	0.0
546320	Utilities - Electricity	146.25	180	200	0	0	0	0.0
546330	Utilities - Water	13.71	19	30	0	0	0	0.0
546340	Utilities - Natural Gas	12.12	25.3	25.3	0	0	0	0.0
546400	Rent Of Land & Buildings	18,411.98	20,858.1	23,799.6	5,695.2	0	0	0.0

State of New Mexico

S-13 Line Items by Business Unit Expenditures

(Dollars in Thousands)

546409	Rent Expense - Interagency	28.33	447.2	14	0	0	0	0.0
546500	Rent Of Equipment	572.07	641.5	590.2	0	0	0	0.0
546600	Communications	114.95	118	119.9	0	0	0	0.0
546610	DOIT Telecommunications	3,121.46	2,607.4	2,722.8	0	0	0	0.0
546700	Subscriptions/Dues/License Fee	1,065.79	618.5	623.2	0	0	0	0.0
546800	Employee Training & Education	158.27	168.8	185	0	0	0	0.0
546900	Advertising	135.56	384.2	311.4	0	0	0	0.0
547000	Legal Settlements	1,047.49	0	0	0	0	0	0.0
547300	Care & Support	10,321,467.26	13,217,494.4	12,732,374.5	0	0	0	0.0
547309	Care & Support InterSt Agency	3,887.74	186.8	1,955.9	0	0	0	0.0
547350	Claims and Benefits Expenses	880,310.42	480,998.5	619,678.4	0	0	0	0.0
547360	Insurance Premiums-non_payroll	137,358.54	145,768.9	201,853.1	0	0	0	0.0
547410	Grants To Public Schools&Univ	0	440.4	0	0	0	0	0.0
547440	Grants To Other Entities	1,030.04	325.4	296.5	0	0	0	0.0
547450	Grants to Other Agencies	88,591.14	92,708.1	96,831.8	0	0	0	0.0
547900	Miscellaneous Expense	3,841	446.8	646.8	0	0	0	0.0
547909	Misc Expense Interagency	1,731	0	0	0	0	0	0.0
547999	Request to Pay Prior Year	2,742.37	2.5	57.5	0	0	0	0.0
548200	Furniture & Fixtures	949.97	235.9	949.6	975.1	0	0	0.0
548300	Information Tech Equipment	1,483.17	305.5	286.8	0	0	0	0.0
548400	Other Equipment	35.4	25	75.7	0	0	0	0.0
549600	Employee O/S Mileage & Fares	93.18	208	138	0	0	0	0.0
549700	Employee O/S Meals & Lodging	113.38	171.2	188.5	0	0	0	0.0
549900	Brd & Comm O/S Meals & Lodging	0	0	999.8	0	0	0	0.0
550000	Other Financing Uses	0	284,324.8	0	0	0	0	0.0
555100	Other Financing Uses	455,438.4	0	323,424.8	47,000	0	0	0.0
555106	OFU - INTRA-Agency	60,000	30,000	0	0	0	0	0.0

Grand Total	#####	#####	#####	110,557	0	0	0.0
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State of New Mexico

S-13 Line Items by Business Unit Expenditures

(Dollars in Thousands)

Program Description: Program Description – The Developmental Disabilities Supports Division (DDSD) administers a statewide system of person-centered home and community-based services (HCBS) and supports for people with intellectual and developmental disabilities (IDD). Medicaid HCBS programs promote independence and community integration so that individuals can live the lives they prefer in their communities. DDSD operates three home and community-based Medicaid waiver programs. These include the Developmental Disabilities (DD) Waiver, the Medically Fragile Waiver, and the Mi Via self-directed Waiver.

Major Issues and Accomplishments:

- Since 2020, over 3,200 new people will be receiving waiver services. DDSD will need funding to support increased population growth and a continuous allocation process for a true 'no wait list'.
- DDSD is working to increase provider capacity to ensure greater access to services and more options for individuals and families.
- DDSD is in the process of developing renewal applications for the DD and Medically Fragile Waivers, with both waivers expiring June 30, 2026.
- DDSD is working with other NM state partners through a grant from Advancing States to strategize and incorporate best practices in recruiting, retaining, professionalizing and ensuring better compensation for our direct support professional (DSP) workforce, to improve sustainability and quality of DSPs.
- DDSD began health and wellness visits in 2023 and visit all waiver recipients in their homes twice per year. To date over 33,000 visits have been completed.

Overview of Request:

This budget request will support over 8,500 people with IDD. The FY27 budget request will be an increase from FY26 due to bringing over 1,000 new people into services throughout FY26. DDSD is requesting money to support the following main components of our budget:

- Programs and services- 87% of DDSD's expenditures are used to directly support the individuals receiving waiver services.
- Funding to support 200 FTEs to satisfy program oversight, administration and operation.
- Funding to support a true 'no wait list' through a continuous allocation process, bringing approximately 1,000 individuals in FY27 into comprehensive waiver services.

Programmatic Changes:

- 1) The Mi Via Waiver will be renewed for another 5 years on October 1, 2025, and will incorporate programmatic changes such as new waiver service of Employer of Record.
- 2) DDSD is sunsetting the Supports Waiver and working with stakeholders to ensure a smooth transition to the Developmental Disabilities or Mi Via Waivers.
- 3) DDSD is actively engaged in a comprehensive rate study to ensure rates are equitable, sustainable, and reflective of service needs.

Base Budget Justification:

DDSD is requesting a \$40,726.8 GF increase from the FY26 request to continue to provide support to individuals receiving waiver services. This increase is due to the additional number of waiver participants being served by the elimination of the 13-year waitlist and new continuous allocation process to ensure a new wait list does not grow. In addition, this request supports increased utilization from individuals receiving services. 87% of DDSD's expenditures are used to directly support individuals receiving waiver services. The \$323,424.8 GF request in the 500's will be used to match the federal funds that DDSD receives from Medicaid. The increase in projected expenditures can be summarized by the increase in utilization across the program.

Program Description:

The Division of Health Improvement (DHI) ensures that New Mexicans receive safe, high-quality, and person-centered health and community-based services. As the regulatory and quality oversight arm of the New Mexico Health Care Authority (HCA), DHI plays a central role in advancing HCA's mission to provide whole-person, cost-effective, and accessible health care and safety-net services. DHI works in coordination with HCA's other divisions to align regulatory oversight with broader system transformation efforts and collaborates closely with external state partners—including the Department of Health (DOH), Children, Youth and Families Department (CYFD), Human Services Department (HSD), and Aging and Long-Term Services Department (ALTSD)—to strengthen health outcomes, protect vulnerable populations, and promote service integration across New Mexico's health system. DHI is the regulatory and quality oversight arm of the New Mexico Health Care Authority (HCA). The Division safeguards vulnerable populations by licensing, certifying, and monitoring health facilities, community providers, and long-term care services. DHI conducts compliance surveys, investigates allegations of abuse, neglect, and exploitation, and provider reviews to ensure compliance with state and federal requirements. It also oversees provider training, background checks, incident management, and quality improvement initiatives.

Core Functions

- **Licensing & Certification**
 - o Issue and renew licenses for health facilities and community-based programs.
 - o Conduct health and safety surveys for compliance with state regulations and CMS Conditions of Participation.
- **Quality Assurance & Improvement**
 - o Monitor and analyze quality of care outcomes for providers statewide.
 - o Implement performance improvement projects to advance patient safety, resident rights, and service quality.
- **Compliance Oversight**
 - o Investigate complaints, critical incidents, and allegations of abuse, neglect, or exploitation.
 - o Enforce corrective actions when providers are out of compliance.
- **Background Check Program**
 - o Operate the Employee Abuse Registry (EAR) and Certified Nurse Aide (CNA) Registry.
 - o Conduct fingerprint-based background checks to prevent individuals with disqualifying histories from working with vulnerable populations.
- **Training & Technical Assistance**
 - o Provide education to providers on regulatory requirements, survey processes, and quality initiatives.
 - o Develop tools, policies, and training resources to strengthen compliance and service delivery.

Health Facilities Licensing and Certification Program the Licensing & Certification Bureau is responsible for licensing and certifying a wide range of health facilities and providers across New Mexico. This includes hospitals, nursing homes, assisted living facilities, boarding homes, clinics, and home health agencies. The bureau conducts inspections, surveys, and complaint investigations to ensure compliance with both state regulations and federal Centers for Medicare & Medicaid Services (CMS) Conditions of Participation. By issuing licenses and monitoring quality of care, HFLC protects public safety and ensures that patients and residents receive services that meet established standards.

Community Programs

DHI Community Programs consists of the Incident Management and Quality Management Bureaus. The DHI Community Programs Bureaus provide regulatory oversight for the community-based service providers who are subcontracted by the Developmental Disabilities Supports Division (DDSD). Community Providers may offer the following types of services: Supported Living Services, Community Support Services, Supported Employment Services, Case Management, Consultant Services and Community Supports Coordinator Services; as well as self-directed program.

Quality Management Bureau (QMB) The Quality Management Bureau oversees the performance and accountability of providers delivering Medicaid-funded home and community-based services under the waiver programs. QMB conducts reviews, and audits, compliance surveys assessing compliance with the various waiver service standards, contractual requirements, state regulations, federal regulations and DDSD standards. The bureau emphasizes systems improvement by helping providers identify gaps, implement plan of corrections, and adopt best practices.

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QIMB plays a crucial role in safeguarding vulnerable populations while promoting high-quality, person-centered services in community settings.

Incident Management Bureau (IMB) The Incident Management Bureau (IMB) oversees the safety of individuals who receive services through state programs like the Developmental Disabilities Waiver and other community-based waivers. IMB investigates reports of abuse, neglect, exploitation, environmental hazards, suspicious injury, and deaths which are reported through a 24-hour hotline or online. Reports are reviewed and triaged quickly based on urgency within hours, others within a few days. Investigators work to make sure Individuals are safe immediately following an incident, which may involve law enforcement and medical attention if needed, and decide whether the report should be screened in for investigation or can be screened out using the enhanced screening process. When allegations are substantiated, IMB requires providers to submit a corrective and preventative action plan to IMB to ensure actions have been taken to remedy the identified issues or concerns which may have resulted in the incident. IMB also tracks trends and patterns in incidents, shares data reports, and works with agencies and providers to prevent harm and improve care in the future. IMB also plays a crucial role in the health and wellness of the individuals.

Policy Planning & Performance:

The Office of Policy, Planning and Performance provides essential legal, regulatory, and policy support to the Division of Health Improvement. This office ensures that DHI's activities are carried out in compliance with state and federal law, advises leadership and staff on the interpretation of statutes and regulations, and assists in drafting and revising administrative rules and policies that govern health facilities and community-based providers in New Mexico. The office works closely with the New Mexico Attorney General's Office, the Health Care Authority's Office of General Counsel, and other state partners to address legal issues related to enforcement actions, administrative hearings, and provider appeals.

In addition to legal functions, the office supports DHI with data to provide the basis for data driven decisions regarding initiatives. Through its combined legal, policy and data analytic functions, this office ensures that DHI operates with real time data and relevant legal and regulatory knowledge.

The Office of Policy, Planning and Performance consists of the Caregivers Criminal History Screening Program, the Certified Nurse Aide Training and Abuse Registry Program, the Employee Abuse Registry, the Policy & Records Office, and the DHI Performance Management system.

Caregivers Criminal History Screening Program (CCHSP)

DHI ensures compliance with "Caregiver Criminal History Screening Requirements" NMAC 7.1.9 this rule has general applicability to all applicants, caregivers, hospital caregivers, and care providers in New Mexico as defined by the rule.

The Caregiver Criminal History Screening Program CCHSP has seen a significant increase in processing background checks, increasing from 40,000 checks to over 46,000+ background checks annually, with an average processing time of one business day. During the pandemic the digital scanning facilities were closed to the public, DHI however was able to adjust and return to using ink and fingerprint cards, with the facilities and community programs submitting the cards directly to DHI via USPS. Once received DHI scans the cards and processes them within the one-day timeframe.

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Major Issues and Accomplishments:

Program Overall Goals

- Protect health and safety of residents in licensed and certified facilities, community-based programs, and those receiving care from hired caregivers.
- Ensure accountability for providers serving Medicaid and other state-funded populations.
- Improve quality of care and consumer satisfaction through performance monitoring and corrective actions.
- Increase public confidence in healthcare systems by ensuring transparency and compliance.

Key Priorities for FY2027

1. Strengthen Workforce Capacity
 - o Expand surveyor recruitment and retention to meet federal and state regulatory requirements.
 - o Cross train staff on life safety aspects of facility surveys to have a more integrated approach to the survey process
2. Implement SB 131 – Enhanced Background Checks

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- o Roll out the requirements of Senate Bill 131 by upgrading the background check system for healthcare and community providers.
 - o Implement the stricter disqualification criteria fairly to safeguard vulnerable populations.
 - 3. Implement Health Care Market Oversight Process
 - o Establish and operationalize HCA's healthcare market oversight responsibilities.
 - o Monitor healthcare consolidations, acquisitions, and mergers to assess impacts on patient access, cost, provider networks, and community health outcomes.
 - 4. Monitor and Enforce CARA Requirements
 - o Conduct site visits and audits to ensure compliance with the state Comprehensive Addiction and Recovery Act (CARA) requirements.
 - o Collaborate within HCA and with other state agencies to strengthen the knowledge and participation in CARA activities
 - 5. Enhance Technology & Data Systems
 - o Continue to work with optimization of technology support platforms
 - o Work with the new Data Analytics Office to streamline data collection and visualization to promote more data driven decisions
 - 6. Improve Long-Term Care Oversight
 - o Increase monitoring and collaborative relationships for nursing homes, assisted living facilities, and boarding homes to optimize their understanding of regulations and optimize quality outcomes
 - o Recruit and retain vacant positions within licensing and oversight departments by reviewing hiring practices, onboarding and training of new staff as well as conducting periodic stay interviews with current staff.
 - 7. Advance Home and Community-Based Services (HCBS) Quality
 - o Strengthen accountability and monitoring for providers serving individuals with developmental disabilities, behavioral health conditions, and frail elders.
 - o Recruit and retain vacant positions within all Bureaus at DHI by reviewing hiring practices, onboarding and training of new staff as well as conducting periodic stay interviews with current staff.
 - 8. Promote Patient & Resident Safety
 - o Build relationships with different providers of services covered under the DHI umbrella of services
 - o Establish regular information sharing sessions with outside professional organizations such as the hospital association and primary care providers association.
- Key accomplishments for FY26:
- Incident Management Bureau:
- Moved their Intake unit to Albuquerque to the Homestead office and created two new positions to provide additional intake reporting personnel.
 - Hired a new Bureau Chief who started his position in September of 2025 after not having filled this position since April 2024.
 - Started using a new phone platform in conjunction with Adult Protective Services to better respond to incoming incident reports and to transfer out to other departments when needed.
 - Provided several new opportunities across the state for advanced investigator positions (two in metro, one in the NE, one in the SW and in the SE) – this has been a long-time request from the staff for advancement opportunities.
 - Established re-occurring monthly meetings with the Department of Justice to continue our collaborative work in moving IMB substantiated cases of ANE that meet DOJ criteria be brought forward for potential criminal referrals.
- Quality Management Bureau:
- Updated their survey tools to encompass more person-center questions when interviewing the individual of services during the survey process.
 - Created two advanced survey positions to promote advancement opportunities for the QMB staff.
 - SFY25 was the third year in a row QMB has maintained their 90% completion rate of surveys within the 20-day time frame.
 - In SFY25 QMB completed 6,965 reviews of the individuals who are serviced on the HCBS waivers.

Health Facility Licensing and Certification:

- Creation of the Advanced Surveyor position to be certified to conduct both health and Life Safety Code surveys. This expands HFCLC ability to effectively utilize surveyor resources.
- Improved training and competency of the Life Safety Code surveyor to ensure thorough fire safety building inspections and emergency preparedness for healthcare facility staff and residents.
- Implemented method for healthcare facilities to submit electronic payments for state licenses by reducing the time it takes a healthcare facility to renew their license and staff resources.
- Creation and implementation of the IROnline Reporting System for HFCLC Complaints Department. This new system is user-friendly for both health care facility self-reports and submission of 5-day follow-up investigations in addition to the filing and tracking of consumer complaints.
- Filled the HFCLC Deputy Director position. This position had been vacant for over 7 years. The addition of the position provides dedicated resources to focus on improving quality measures, expanding engagement and collaboration with healthcare providers and implementing state directives.
- The addition of (5) new surveyor positions for the Licensed Oversight Bureau which will allow for the necessary resources for regulatory oversight of Assisted Living Facilities to be surveyed/ inspected at minimum of every 36 months and to identify healthcare facilities providing services that required boarding home and assisted living licensure.

Caregivers Criminal History Screening Program:

- Passage of HB131 strengthens the criminal history screening requirements for caregivers, adding human trafficking, assault of a police officer, identity theft and cruelty to animals, it also adds criteria for unreasonable risk factors, that may disqualify a caregiver.

Overview of Request:

The Division of Health Improvement (DHI) is the Health Care Authority's regulatory entity providing compliance oversight for licensed healthcare facilities and community-based waiver programs. To ensure health equity, we work with our partners to promote health and well-being and improve health outcomes for all people in New Mexico. The Division of Health Improvement plays a critical role in the Health Care Authority mission of improving health outcomes and ensuring the safety of New Mexicans.

DHI accomplishes this, through its mission to ensure healthcare facilities, providers and community support services deliver safe and effective health care and community services to promote and protect the health, safety, and quality of life for New Mexicans. New Mexicans benefit when healthcare facilities, providers and community support services provide appropriate and safe healthcare and support services in accordance with laws, regulations, and standards of practice.

Through monitoring and oversight, DHI ensures that healthcare facilities, providers and community support services meet minimum standards and regulatory requirements. Monitoring compliance with standards and regulations through surveys, investigations, complaints, and caregiver background checks enables DHI to identify any areas that could be dangerous or harmful to New Mexicans accessing healthcare or community services, and work with collaborative within those systems to remediate deficient practices and achieve compliance with standards and regulations.

Programmatic Changes:

- In the upcoming year, we anticipate the following program changes
Increase in oversight/surveys of hospitals for compliance with CARA substance exposed newborns in relationship to Plans of Safe Care and reporting to CYFD
- Increase in oversight/surveys of hospital and birth centers for compliance with the doula credentialing compliance
- Increase in oversight/surveys for the whistleblower aspects of Healthcare Mergers, Transitions and Acquisitions
- Greater focus on the criminal background check process with a broader consideration of individuals history before approval
- Integration of CYFD BH licensing and oversight of children's programs for behavioral health support
- Anticipation of an additional 60 CYFD BH programs including inpatient BH treatment, adolescent emergency shelters, partial hospital programs or intensive outpatient services, community behavioral health services, residential treatment centers, wrap around support services, and family peer support
- DHI is currently reviewing and revamping the program training and approval requirements for Home Health and Hospice Aides. This project will update current policies and procedures and training required for individuals to become a certified Home Health aide.

Base Budget Justification:

- The benefit of supporting the DHI budget request will provide the opportunity to continue to serve the current caseload and dependents but also expand services to more facilities and New Mexican's who need services. This ensures the safety of New Mexican's. This includes establishing continued care, establishing financial and medical support orders, enforcing those orders, and aiding job development and job opportunities. Our FTE increase request will help support the oversight of agencies to include new initiatives such as the enhanced criminal background check process, increased regulatory oversight for state initiatives to include monitoring for requirements in the doula credentialing act, the healthcare proposed transaction act, and CARA oversight.
- DHI's primary mission is to enhance the well-being of New Mexican's by ensuring health equity and providing excellent customer service to our health facilities, community providers, partners, and stakeholders. DHI is continuously working to improve the quality, care, and professionalism of our service to our various customers. This includes providing economic, financial and medical support.

Total Base Budget Request

For the FY27 Budget Request, the Division of Health Improvement (DHI) is seeking a total budget of \$32,667.9. (\$14,995.1 GF, \$17,682.8 FF/OSF), reflecting a 8.3% increase compared to the FY26 Operating Budget. (The Expansion portion of this request will be reflected in the Pitches for the People section below.)

General Fund

For FY27, DHI is seeking a General Fund budget of \$15,191.4 representing an 10.5% or \$1,443.1 increase in General Fund resources.

Federal Funds

For FY27, DHI is seeking a federal budget of \$17,486.5 representing a 6.4% or \$1,050.5 increase. DHI benefits from several federal grants (Title 18 \$2,424.3 100% FF, Title 19 \$1,391.5, 25% GF/75% FF, Clinical Laboratory Improvement Act \$232.8 100%FF, and Medicaid Waiver Program \$4,106.9 50%GF/50%FF.

Other State Funds

DHI receives Other State Fund revenue for a number of services, including their caregiver criminal history screening program, licensing fees, and other penalties.

Expenditures:

Personal Services and Employee Benefits

The FY27 personnel section requests an increase of \$1,200.0 or 4.6%. DHI plans to increase to 223 full-time equivalent (FTE) (This does not include the Pitches to the People FTE expansion request.)

Contractual Services

The budget request for contractual services in FY27 increased from FY26, for a total of \$650.0 or 49.1%. This change is attributed to funds to cover increases to the DHI contracts.

Other Costs

The budget request for Other Costs in FY27 increased from FY26, for a total of \$643.6 or 22.4%. This change is attributed to funds to cover increases to the DHI travel costs, fleet costs, and increase in rent.

Program Description: The Health Care Authority (HCA) State Health Benefits (SHB) administers for individuals enrolled in a State of New Mexico (SoNM) plan:

- ? Health Benefits Fund (health care coverage including medical, dental, vision, pharmaceuticals);
- ? Life Insurance Fund;
- ? Stay Well Health Center;
- ? Employee Assistance Program;
- ? Voluntary Supplemental Benefits (accident insurance, cancer insurance, critical illness insurance, and life insurance with accelerated benefits for long-term care) (member pays 100% of the cost); and,
- ? Vaccination Purchasing Act Fund (ensures all NM children have access to vaccines).

SHB provides services and benefits to all State agencies and Local Public Bodies (LPBs) with an average FY24 monthly enrollment of 55,586 New Mexicans. (As defined in statute, LPBs are political subdivisions including two-year post-secondary educational institutions, school districts and local school boards and municipalities, except as exempted pursuant to the Procurement Code).

Major Issues and Accomplishments: Since SHB transitioned from the New Mexico General Services Department to the HCA on July 1, 2024, HCA has partnered with the state legislature to address major issues, including eliminating the structural deficit, modernizing the state contribution schedule, implementing the State Employee Premium Assistance (SEPA) program for lower and moderate income state employees, establishing a Medicare reference-based pricing program for urban hospital payment limits, and developing innovative strategies to get the highest value for state employees and the state budget. The HCA reflects the Administration's commitment to prioritizing health and well-being for New Mexicans enrolled in a SoNM plan by creating a single agency for health care purchasing, policy, and regulation. The HCA is transforming how NM purchases and designs health care for individuals enrolled in a SoNM health plan, in large part, by leveraging the purchasing and partnership power of Medicaid to improve cost, quality, and outcomes. The HCA is leveraging its expertise, optimizing data analytics, and driving accountability to achieve improvements in health care system.

Overview of Request: The SHB FY27 request is \$660,208.1 in Other State Funds, a 27.4% (\$141,854.5) increase compared to FY26. (No State General Funds are built into the SHB FY26 budget request). The requested increase reflects the incorporation of rate increases that were adopted in the Compensation Package in FY26, a 10% rate adjustment, and an 11.2% increase in enrollment resulting from the modernized contribution schedule. The request also includes \$38,475.7 in the 300-Contracts category for increases to successfully administer and oversee the plans (e.g. audits, actuarial, and compliance services). This represents a 3% (\$1,120.7) increase in the 300-Contracts cost category compared to FY26. Finally, the request includes \$621,732.4 in the 400-Other Cost category to increase the SHB fund budget to the level of projected claims costs. This is a 29.3% increase in the 400-Other Cost category compared to the FY26 base budget.

Programmatic Changes: The HCA is considering several actions to improve SHB programmatic performance, including but not limited to:

- Going out to bid on major contracts, such medical benefits, Rx benefits, dental benefits, vision benefits, and others to maximize state purchasing power and improve offerings
- Standardizing medical benefits design and offering a wider variety of health plans
- Offering dental and vision plan buy-ups
- Leveraging purchasing power and improving the pharmaceutical purchasing and benefits model through a new Rx procurement
- Continue implementing and monitoring Medicare reference-based pricing to manage costs

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Base Budget Justification: Adequate funding for SHB is needed to invest in resources and tools that will allow the HCA to. This additional funding also will help the HCA reduce error rates related to medical claims, create more efficient operations, and maintain federal and state regulatory compliance. These investments will promote financial stability and accurate reimbursement for health care services provided to individuals enrolled in a SoNM health plan.

Program Description:

The Program Support Division provides the enterprise “back-end” services that power HCA’s program divisions (e.g. Medicaid, Child Support, Behavioral Health). Program Support deliver fiscal stewardship, human resources, legal counsel, due-process adjudication, secure technology, and executive leadership so that front-line programs can focus on serving New Mexicans.

The Authority is led and directed by the Office of the Secretary (OOS) with four program divisions: Child Support Services Division (CSSED); Income Support Division (ISD); Medical Assistance Division (MAD); Behavioral Health Services Division (BHSD), Developmental Disabilities Supports Ddivision (DDSD); Division of Health Improvement (DHI); State Health Benefits (SHB); and Health Care Affordability Fund (HCAF). Support services are provided by offices and divisions found in the Program Support section of the HCA’s Appropriation Request and include the Office of the General Counsel (OGC), Office of Inspector General (OIG), the Office of Fair Hearings (OFH), Office of Human Resources (OHR), the Administrative Services Division, (ASD), and Information Technology Division (ITD).
Primary Services Provided/Beneficiaries, Current Service Levels

Office of the Secretary (OOS):

OOS provides leadership and direction for the agency and its services in coordination with other state agencies in accomplishing Governor Lujan Grisham’s priorities. OOS leads the Health Care Authority’s strategy, policy, and operations; coordinates with the Governor’s Office, Legislature, and partner agencies; oversees public information and constituent services; and maintains government-to-government relations with Pueblos, Tribes, and Nations. OOS sets agency priorities, ensures alignment to HCA’s mission and strategic plan, and provides executive oversight of budget, performance, and enterprise risk management

Office of General Counsel (OGC) Primary Services

Provides legal services across HCA, including contract development, support for hearings, state and federal litigation, legislation and rulemaking, negotiation and settlement, compliance with laws and regulations, policy development, and employment-related legal guidance. OGC trains staff on legal requirements and safeguards the Authority’s mission.

Office of Inspector General (OIG) Primary Services

The Office of Inspector General’s (OIG’s) mission is to prevent, detect and investigate fraud, waste and abuse in the public assistance programs administered by the Authority. The OIG conducts investigations, audits, special reviews, and identifies potential recovery, cost avoidance, and improvements for these programs. The OIG consists of the Audit (AB) and Investigations Bureaus (IB). See attached detailed descriptions.

Office of Fair Hearings (OFH) Primary Services

Administers impartial administrative hearings that allow HCA customers to appeal agency actions, ensuring due-process protection for customers and the Authority. OFH manages scheduling, adjudication, and issuance of decisions consistent with federal and state requirements.

Office of Human Resources (OHR) Primary Services

Manages HCA’s human capital—workforce planning, recruitment, classification and compensation, employee relations, criminal history records checks, training and development, and related HR policies. OHR partners with every division to build a high-performing, well-supported workforce aligned to HCA’s mission.

Administrative Services Division (ASD) Primary Services

ASD provides fiscal leadership and administrative support across HCA, including budget development and management, accounting, grants management, procurement and contracts, accounts payable and payroll, accounts receivable and debt management, information technology, and financial systems support.

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receivable and restitutions, general services and property management, and financial systems oversight. ASD ensures compliance with state and federal requirements and equips program divisions to meet their goals.

Office of Information Technology (ITD)

With the creation of the Health Care Authority, the ITD's six primary services were expanded. ITD provides cost-effective services to the other HCA programs and support offices: systems services, software services, customer innovations, information technology security, data analytics and business operations. ITD does this in a manner to ensure HCA gains full benefit from existing and future technology investments. In the present organizational structure, IT System Services is comprised of the Systems Administration Bureau (SAB), the Production Support Bureau (PSB) and Middleware Bureau (MWB). The SAB provide systems related services such as security support, administration, and maintenance for the HCA network, operating systems, workstations, servers, routers, firewalls, switches, video equipment, and hubs. IT Systems Services also coordinates all voice and data infrastructure for all leased building projects. The PSB is responsible for providing help desk and desktop support for all of HSD's staff located throughout the state. The MWB manages all infrastructure that supports the operations of HCA including database administration.

The IT Software Services of ITD provides the Software Engineering and IT Product Owner services for many of the Department's systems. The Applications Support team supports internally developed and maintained applications, the Microsoft-based SharePoint-based online collaboration tools, the public facing YES New Mexico web portal used by the public to apply for HSD benefits, as well as the eCSE Child Support web portal and the Batch Interface Team which provides support file and data transfer operations between internal and external information trading partners. The Child Support Product Team supports the Child Support Enforcement System (CSES) and provides system support including analysis, design, maintenance, quality assurance, and incident resolution for CSES. The Release Management Team includes managing the multiple application releases within the HCA ecosystems and their dependencies on each other as well as the Quality Assurance (QA) Team which provides input on solution quality to different areas of ITD, this includes for the YES New Mexico web portal as well as to the HHS2020 state staff and contractors. ITD Software Services includes IT Product Ownership of the Automated System Program and Eligibility Network (ASPEN) contract and related IT activities.

The ITD Customer Innovations Team is focused on the Health and Human Services (HHS) 2020 initiative and is comprised of both state staff and contractors who provide technical, project management, analysis, quality assurance, and other services. HHS2020 is an Enterprise vision for transforming the way HHS services and programs are delivered to New Mexico citizens. HHS 2020 is not limited to technology; it encompasses a re-evaluation of processes and organization structures used to manage and deliver program services, efforts to work across organizational boundaries to manage and deliver all HHS services in the state and transition from current operating models to an outcomes-based focus for our work more effectively. HHS2020's first major project is the Medicaid Management Information System Replacement (MMISR) followed by the Child Support Enforcement System Replacement (CSESR) project with additional HHS programs and services to follow in the coming years. HCA will implement the technology foundation for HHS 2020 through the MMISR Project which receives a federal match in funding dollars.

The Data Analytics team is comprised of a Chief Data Officer, Chief Data Scientist, data scientists, data engineers and a data steward. The Data Analytics team supports business outcomes and mission critical priorities with prescriptive analytics identifying comprehensive services and risk level of New Mexicans.

The Security team is comprised of a Chief Security Officer, Compliance Officer and a security administrati

Major Issues and Accomplishments:

- A full description of the technology plans for the Department is included in the IT Plan appended to this request. Issues associated with Information Technology and the level of funding requested include:
- Retaining skilled IT professionals is a difficult item to manage, as staff can go outside the state system at any time and be compensated at a higher salary rate.
- Successfully worked with the State Personnel Office and created six new IT Data Analytics job classifications.
- Migrate Department Intune to the Department of Information Technology MSO365 tenant.
- Continue work on the improvement of customer service, operational excellence, and employee experience and performance.
- MMISR System Integration Platform went live with data integration between the Integrated Eligibility System (ASPEN) and the Consolidated Customer Service Center (CCSC) in FY24.
- MMISR project worked within a multi-vendor environment and is positioned for three module go-lives during FY25.
- Completed the annual security and penetration testing. Completed a cybersecurity risk assessment. Improved the department's cybersecurity risk by decommissioning end of life assets.
- Network infrastructure upgrades and modifications were implemented as part of a multiyear rearchitected project of HCA's infrastructure.
- Began transition to an IT Product Owner model for the ITD Software Services team to better align and provide support to HCA divisions.

Overview of Request:

Program Support

Revenue:

Program Support is requesting an increase of \$600.0 in funding for FY27 which is an increase to support additional contract needs and increases in other costs such as rent.

General Fund - \$11,601.8 million

Federal Funds - \$ 13,213.6 million

Other State Funds - \$5,260.6 million

Expenses:

PSEB - \$24,182.7 million

Contracts - \$4,300 million

Other Costs - \$3,400million

Information Technology Division

Revenue:

IT is requesting an increase of \$10,949.5 in funding for FY27 which is an increased need within the program to merge into Maintenance and Operation for the MMSIR project.

General Fund - \$44,137.9 million

Federal Funds - \$49,979.5 million

Other Transfers - \$2,300.0 million

Expenses:

PSEB - \$13,407.9 million

Contracts - \$61,660.2 million

Other Costs - \$21,349.4 million

Programmatic Changes: ITD is requesting an increase of \$19,678 million, this is a 3% general fund increase, to support budgetary needs to support contractual obligations for ASPEN (integrated eligibility), Unified Portal, System Integration, Data Services, Enterprise Contact Management, and Child Support needs. These services will allow HCA to operate and continue to serve the customers of New Mexico with the eligible benefits that are offered by our agency as our agency expands its mission.

The increase will support the rising rates of the Consumer Price Index (CPI) and the Producer Price Index (PPI) which has cause inflation of prices for IT hardware and software goods and services. Other price indexes that impact the IT budget are the Consumer Price Index (CPI). As of July 2024, the CPI for IT related goods is 7.045%. Gartner forecasts that worldwide IT spending will grow by 8% in 2024 which includes cloud services, digital transformation, cybersecurity, 5G networks, and software and applications.

ITD's request represents the goals of the Department's strategic plan, reflecting the very high priority that HCA places on IT investments to reduce overall costs, improve operational efficiencies and better serve our 978,963 New Mexican customers. This administration is committed to investing in technology to achieve better interaction and outcomes for our clients and staff by implementing innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.

Programmatic Changes Program Support:

NA

Base Budget Justification: The FY27 Program Support base request supports the Health Care Authority mission and goals by:

- Funds the inter and intra Departmental project management, legal, procurement, financing, and IT work needed to implement federal changes (e.g., One Big Beautiful Bill Act) on schedule and in full compliance—updating systems, contracts, notices, and hearing processes to prevent avoidable coverage or care disruptions.
- Invests in cybersecurity; data analytics; and plain-language, bilingual communications—standing up a single “source of truth” and decision-support for leadership and program staff. This enables timely, data-informed policy guidance and operational strategies that reduce audit risks, improve member and provider experience, and target resources to rural and frontier communities appropriately.
- Supports recruitment, retention, and training, fair hearings throughput, and disciplined vendor governance—stabilizing day-to-day operations across the Department and ensuring a smooth, predictable transition into FY27 and the next Administration.

Program Description:

The purpose and the mission of the Child Support Services Division (CSSD) is derived from Title IV-D of the Social Security Act: to enhance the well-being of children by assuring that assistance in obtaining support, including financial and medical, is available to children through locating parents, establishing parentage, establishing support obligations, and monitoring and enforcing those obligations.

The CSSD mission contributes to the HCA mission to ensure New Mexicans attain their highest level of health by providing important safety-net services in working with our partners to encourage both parents to assume responsibility for improving the economic and social well-being, health, and stability of their children through child financial and medical support.

Health Care Authority

Goal 3: Achieve health equity by addressing poverty, discrimination, and lack of resources, building a New Mexico where everyone thrives.

Objective 1.6: Modernize child support program to improve the financial and medical support of New Mexico's children.

The NM IV-D program is a state and federal program implemented to obtain financial and medical support from non-custodial parties (NCPs). Its primary mission is to maximize the collection of child support for all NM children. State IV-D agencies are required by federal and state laws to help families receiving Temporary Assistance for Needy Families (TANF) funds and Medicaid customers by establishing and collecting child and medical support. Families who are not receiving TANF or Medicaid may also apply for CSSD services. Services for TANF and Medicaid families are required to be provided without charge; families not receiving TANF or Medicaid are no longer charged program fees for service, effective July 1, 2024, to encourage more parents who need our services reach out for assistance with what is often a complicated legal process.

CSSD staff assist families with child support services. This includes locating non-custodial parents, establishing parentage, establishing and modifying financial and medical support orders, enforcing those orders, and collecting and distributing child support payments.

The SFY25 CSSD Operating Budget is \$42,953.9 million at a 34% state to 66% federal match and also includes other state funds.

Primary Services Provided/Beneficiaries, current Service Levels:

In SFY25, there were 46,409 active child support cases, 2,087 of which are Navajo Nation cases as part of its IV-D/Child Support program worked through the New Mexico system. Total collections amounted to \$119 million, almost the same from the previous year, despite a decrease in caseload of 3,523 cases. This shows progress with consistent payments. In addition, collection from employer wage withholdings remained steady at 65%, which is the most consistent payment source for families and children, rather than one-time payments through intercepts. More importantly, with the move to families first distribution implemented in January of 2024 99% of the collections during Federal Fiscal Year 2024 were distributed to families first, rather than retained by the State and Federal Governments for TANF recoveries.

Other SFY25 performance measures saw consistency and improvements; cases with support orders at 83.3% and current support owed that is collected increased to 60%. The most impressive measure is the average distribution per dependent. This supports the families first distribution that results in more money collected going directly to the child in the custodial parents' household.

CSSD initiated Child Support Modernization initiatives in SFY19, that has led to many positive program changes,

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which has begun to change the culture of Child Support in New Mexico, from a culture of punitive legal enforcement to a new culture where our staff are freed up from manual tasks with competing priorities so that they can make customers the priority.

Additionally, in support of the IV-D program, and the effort to improve customer service, enhance business operations, and to specifically address changing federal requirements, CSSD has progressed in system modernization and is expecting to pilot a new User Interface in January 2026. To this end, CSSD is part of a department-wide effort that focuses on systems that offer a modular, cost-effective approach that leverages the HHS 2020 enterprise integration strategy to incrementally modernize the CSES system.

CSSD and the HCA Information Technology Division (ITD) completed its CSES replatform/refactor project during SFY22. This project took CSES off the mainframe and moved from COBAL to Java, which benefited the program with system changes needed to meet many of the accomplishments detailed below.

Major Issues and Accomplishments:

In SFY25, CSSD continued its modernization initiatives, which include customer-centered business model focusing on assisting both parties in meeting their child support responsibilities with the goal of increasing new applicants and consistent payments for families to support their children to grow up happy and healthy.

In July 2024, the Health Care Authority eliminated program fees for all child support customers, removing a barrier that parents who needed our services had. While the CSSD caseload continues to decrease as staff review cases for appropriate case closure, CSSD has seen an increase in new applications by as much as 600% compared to the same time last year. Outreach and education efforts were conducted heavily in 2025 as CSSD celebrated its 50th Anniversary of the program.

In September 2024, the Health Care Authority eliminated a barrier for parents making payments online and began covering the convenience fees charged when making payments by credit or debit cards. This has resulted in an increase in payments being made online.

CSSD focused on recruiting and retaining staff with improved employment development training to ensure staff are up to date on child support policies and procedures, including continuing legal education for attorney staff. Part of this effort also includes a review of staff's appropriate placement on the salary schedule and alignment to meet the qualifications of the position. This has resulted in dozens of in-pay band salary adjustments. Specifically, the attorney classifications were a challenge, when the State Personnel Office (SPO) in January 2024 adjusted the attorney classification series which resulted in a salary increase for the majority of CSSD attorney staff. CSSD was able to cover these increases with the use of incentive funds which do not receive the Federal Financial Participation (FFP) match but is requesting general funds in SFY27 to cover personnel costs into the future to receive the FFP.

CSSD's efforts in recruiting and retaining staff show results as the total budgeted FTE of 300 is met and has reached a negative vacancy rate. CSSD is now focused on strategically recruiting positions where the most need is to maintain its budgeted FTE

Overview of Request:

For SFY2027, CSSD is requesting a base request of \$49,906.9 an overall increase of \$851.4 or 1.74% above SFY26 Operating Budget.

Programmatic Changes:

The modern child support family program is beginning to see the benefits made through the recent changes to the Child Support Program and hopes to build on the progress resulting in more consistent payments for New Mexico's children to be happy and healthy. The funding requests for SFY27 will allow CSSD to continue to focus on these efforts.

The CSSD is actively engaged in re-educating the public about what CSSD offers through its Modern Child Support Family Program through all the program changes completed over the past 6 years. This effort will result in increased cases and casework.

- Review cases for possible modifications based on parties' actual income and the ability to pay.
- Establish right-sized court orders that result in consistent payments that families can rely on.
- Increase referrals to the Supporting, Training, and Employing Parents Up! (STEPUp!) program to help parties with job development and job opportunities resulting in meeting their monthly child support obligation.
- Participation in the HCA Jail Reentry program to get inmates on the right track for success
- Participation in targeted outreach events such as legal fairs and conferences and health fairs to share what recent changes have occurred in the Child Support Program to encourage participation.
- Child Support Enforcement System Replacement (CSES) incremental modernization will require child support subject matter experts to participate in the planning, design, and development of this multi-year project, with an anticipated new User Interface (UI) piloted in early 2026 and launched statewide beginning in December 2026.
- Expand the Native American Initiative (NAI) program to more Tribal governments from the current five Pueblos CSSD has memorandum of understandings with. This will help increase parentage, financial and medical support for tribal children.
- Develop a memorandum of understanding with the Mexican Consulate to help serve children with one parent living in New Mexico and the other parent in Mexico.
- Reduce the amount of undistributed collections by researching and resolving the myriads of reasons a collection may be on hold, i.e bad addresses, legal actions pending, or parties in dispute.

Base Budget Justification: General Fund reflects an increase of \$1,142.6 (7.41%) for State Fiscal Year 2027 (SFY2027). The increased costs are necessary to sustain the correct salary placement of CSSD staff, specifically, the attorney classifications that were adjusted by the State Personnel Office (SPO) in January 2024, resulting in a salary increase for the majority of CSSD attorney staff. In addition, the increase will cover the insurance premium increase, replacing HCAF funding.

The payroll budget request will fund 300 filled FTE, with a vacancy rate of 8.8%

Federal Funds:

Federal Funds reflects a decrease of \$291.2 or -.84%. CSSD receives a sixty-six percent (66%) Federal Financial Participation (FFP) (66%) available against State of New Mexico matching resources however the CSSD budget is also funded with federal incentive funding, which cannot be matched with the FFP.

Other State Funds:

TANF Recoveries from active TANF cases, Navajo Nation fees and rent from other State Agencies who share CSSD Buildings statewide, make up most of the total categorized as Other State Funds. Since implementing the families first distribution rules and passing through more collections to Active TANF customers, and all collections to former TANF customers, the TANF recoveries is no longer a funding source that is relied upon for the CSSD budget however, a small amount does materialize every year. In addition, program fees for CSSD customers were eliminated in July 2024, and are no longer a revenue source for the CSSD budget.

Incentives:

This funding source is exactly as named. It reflects funding by the Federal Government to states over and above normal federal share received that is not allowed for FFP match. This is a 100% grant that states receive for meeting or exceeding the federal performance measures.

Expenditures:

Personal Services and Employee Benefits:

These are the costs directly related to hiring and maintaining staff for this critical function. CSSD has improved its recruitment and retention during SFY26 with its effort on improving training to retain new staff and adjusting salaries based on appropriate placement. As noted above, the salary projection reflects a total number of FTE at 300. This reflects a vacancy rate of 8.8% when compared to total authorized positions of 340.

Contractual Services:

Programs needed to fulfill the child support program for locate, process service, and to fund the Child Support Hearing Officer Program (CSHO) that all work to the mission of the child support program by establishing paternity and child support orders and enforcing those orders. The base budget of \$10,623.2 million for contractual services reflects a flat budget request from the FY26 contractual budget.

Other Costs:

This category is for costs related to employee travel for trainings, continuing legal education, and quality assurance reviews of field offices, building maintenance, office supplies, postage, rent of buildings, telephone costs, etc. The SFY27 Other Costs Base request of \$5,190.2 million reflects a flat budget request from the SF26 budget.

Program Description:

The Health Care Authority (HCA), through the Medical Assistance Division (MAD), administers the New Mexico Medicaid program, which includes Title XIX – Medicaid, Title XXI – the Children’s Health Insurance Program (CHIP), and other health care related programs. The over-arching goals of these programs is to better serve the healthcare needs of New Mexicans. As of July 2025, approximately 807,840 New Mexicans are estimated to be enrolled in one of the medical assistance programs. The Medicaid-CHIP enrollment is projected to grow below 1% over SFY 2026 and decline over SFY 2027 reaching 720,769 by June 2027. This enrollment projection recognizes the anticipated impacts of federal eligibility policies between October 2026 and June 2027. These policies impact non-citizens, adult populations subject to work requirements, and member populations disenrolled due to more frequent/stringent eligibility redetermination processes. @Rivera, Jaclyn,HCA

HCA-MAD operates the New Mexico Medicaid program under an 1115 demonstration waiver under the name ‘Turquoise Care.’ Turquoise Care mandates managed care enrollment, with the exception of 159,000 enrollees in fee-for-service programs. As of July 2025, 649,099 New Mexicans are estimated to be enrolled in managed care plans. Turquoise Care is focused on integrated care with comprehensive care coordination as its centerpiece. The managed care program is a comprehensive service delivery system, whereby managed care organizations (MCOs) are responsible for the delivery of all covered services to Medicaid clients enrolled in managed care plans.

HCA-MAD works in collaboration with the Behavioral Health Services Division (BHSD), the Early Childhood and Education Department (ECECD), the Children Youth and Family Department (CYFD), the Department of Health (DOH), Aging and Long Term Services Department (ALTS), and a number of other state agencies, school districts, local governments, MCOs, and health care providers to ensure access to quality health care for New Mexico Medicaid enrollees. Furthermore, in FY 2026-2027 Justice-Involved initiatives will bring new collaborations with numerous correctional facilities throughout New Mexico.

Primary Services Provided/Beneficiaries, Current Service Levels:

Selected medical assistance programs are:

Medicaid

The Medicaid program is a means-tested public assistance program, jointly funded by the state and federal governments. New Mexico’s Medicaid program provides comprehensive health insurance benefits for primary care, behavioral health, and long-term services and supports. The federal share of Medicaid-CHIP program expenditures varies by federal expenditure categories of service and eligible populations receiving services, with the federal financial percentage (FFP) ranging from 0% to 100%. The largest portion of Medicaid-CHIP program expenditures is matched at the federal medical assistance percentage (FMAP). The FMAP for federal fiscal year (FFY) 2026 is 71.66%. The preliminary FMAP for FFY 2027 is 71.36%. The FMAP for FFY 2026 is based on a 3-year average of New Mexico per capita income (PCI) relative to the average per capita income of the United States.

New Mexico per-capita income (\$55,296) relative to a 5-year average per-capita income of the United States (\$69,313). The per capita personal income data was most recently released by the U.S. Bureau of Economic Analysis on March 28, 2025. The final FMAP for FFY 2027 will be released after the budget request is submitted and may be lower than the preliminary FMAP resulting in a higher general fund need.

Reductions in the FMAP factor are projected to decrease from 71.66% in FFY 2026 to 71.36% in FFY 2027. The decrease in the FMAP factor reduces the State's blended FMAP from 71.67% to 71.44%. Consequently, the lower FMAP factor increases the State's share of Medicaid funding by \$17.1 million in FY 2027. The FMAP factor is also used in the FY 2027 budget request to calculate benefit-to-cost ratios for special appropriation items: Traditional Healing, Certified Community Behavioral Health Clinics (CCBHC), and Justice Involved initiatives. The State's blended FMAP of 71.44% provides a multiplier equal to 2.53 (71.67 / 28.33), implying one dollar of general fund spending results in \$2.53 of federal revenue in support of the expansion programs.

Children's Health Insurance Program (CHIP)

Like Medicaid, CHIP is also a means-tested program and jointly funded by both the state and federal governments. However, the federal share of CHIP is funded through an allotment that occasionally requires reauthorization by Congress. CHIP provides comprehensive health insurance benefits for primary and behavioral health care. The federal share of CHIP is the enhanced federal medical assistance percentage (EFMAP). The EFMAP for FFY 2026 is 80.16%, while the preliminary EFMAP for FFY 2027 is 79.95%. The final EFMAP for FFY 2027 will be released after the budget request is submitted and may be lower than the preliminary EFMAP resulting in a higher general fund need.

Working Disabled Individuals (WDI) Program

The WDI program serves disabled working individuals who, because of their earnings, do not qualify for Medicaid under any other programs for disabled individuals. Individuals must meet the Social Security Administration's (SSA) criteria for disability without regard to "substantial gainful activity". The program covers individuals with a recent attachment to the workforce. An individual is considered to have recent attachment to the workforce if he or she: 1) has enough earnings in a quarter to meet the SSA's definition of a qualifying quarter, or 2) has lost SSI and Medicaid due to the initial receipt of Social Security Disability Insurance (SSDI) benefits, until Medicare entitlement. As of June 2025 there are 3,233 individuals identified in the WDI program.

Breast & Cervical Cancer Program

The Breast and Cervical Cancer (BCC) program covers women who are under 65 years of age, uninsured, and have met screening criteria as set forth in the Centers for Disease Control and Prevention's (CDC) National Breast and Cervical Cancer Early Detection Program (NBCCEDP). The New Mexico Department of Health is responsible for

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Cervical Cancer Early Detection Program (NCCCEDP). The New Mexico Department of Health is responsible for verifying that women referred for treatment have met screening requirements that include an income test of 250% of the Federal Poverty Level Guidelines and diagnostic testing by a contracted CDC provider that results in a diagnosis of breast or cervical cancer including pre-cancerous conditions. The federal financial participation rate for this program is the enhanced FMAP (EFMAP). As of June 2025 there are 79 individuals identified in the BCC program.

Home- and Community-Based Services (HCBS) Programs

The Medicaid program provides coverage to individuals who require certain long-term services and supports so that the individuals may remain in their family residence, in their own home, or in community residences. New Mexico consistently ranks at the top of states in terms of the percentage of individuals who receive long term services and supports in their home in lieu of nursing home care. As of June 2025 there are 15,399 individuals identified in HCBS Waiver programs (Categories of Eligibility 090-096) and there are 23,543 HCBS recipients in the long-term support and services program (LTSS). On behalf of these populations, HCBS are administered under various programs both inside and outside of Turquoise Care, which collectively serve as alternatives to institutional care.

The Developmental Disabilities (DD) Waiver serves individuals with intellectual or developmental disabilities (IDD). Services provided through the DD Waiver are case management, personal care, residential and day habilitation, supported employment, community access, environmental modification, behavior support consultation, non-medical transportation, nutritional counseling, personal plan fa

Major Issues and Accomplishments:

CMS approved the State's Turquoise Care waiver effective July 25, 2024 through December 31, 2029. Turquoise Care is organized under four MCO contactors: Presbyterian Health Plan, Blue Cross Blue Shield of New Mexico, UnitedHealthcare, and Molina Healthcare. Turquoise Care MCO contractual arrangements target improvements to critical areas, including care coordination, quality and performance initiatives, extending behavioral health networks and services, improving network adequacy for children with specialized needs, and provider enrollment.

In FY 2026 Turquoise Care advanced new initiatives supported by HB2 covering medical and behavioral health programs. These include provider reimbursement increases for home visiting, assisted living facilities, phase I of the nursing facility rate-rebase and MBI increase. HB2 funding also supported implementing 1115 waiver initiatives such as programs for all-inclusive care for the elderly (PACE), doulas/lactation counseling, meals for pregnant women and community benefit members, and silver diamine fluoride. Furthermore, HB2 funding supported key behavioral health initiatives, including: expanded mobile crises initiatives and fee schedule updates for evidence-based practices, Community Behavioral Health Clinics (CCBHC), and Adult Accredited Residential Treatment Centers (AARTC).

Beginning October 2026, new federal policies are anticipated to result in the disenrollment of 9,733 non-citizens across numerous categories of eligibility. Furthermore, beginning January 2027 more stringent retroactive coverage and semi-annual eligibility redetermination rules are likely to impact most Turquoise Care populations. For example, a major subset of the expansion population (non-native American, non-disabled) are projected to gradually lose eligibility by failing to meet community engagement requirements. Also, new eligibility policy is likely to result in higher disenrollment and reenrollment across Turquoise Care populations as Medicaid members leave and (partially) return to the Medicaid program.

While it is impossible to quantify exact impacts from the new federal policies on Medicaid enrollments, the current estimate of disenrollment specific to FY2027 involves 96,308 members (comparing September 2026 to June 2027). Managed care members are projected to decline by 98,293 while fee-for-service members increase across various eligibility categories, including: family planning, qualified Medicare beneficiaries, qualifying individuals and special low-income Medicare beneficiaries. This preliminary estimate of federal policies assumes the long-term support and services population will remain relatively unaffected by new federal policy.

Turquoise Care initiatives represent a population health approach to improving care and outcomes and are designed to address the needs of the State's historically underserved communities, creating an accessible and high-quality health care system that serves all New Mexicans, targets Health Related Social Needs, and supports continued development of healthcare provider networks. Specific planning activities reflecting on current year operations include:

Providing access to medically tailored meals to Agency Based Community Benefit members and pregnant members with diabetes, and

Providing access to reimbursable Traditional Health Care Practices to Native Americans

FY2026 Funding/Budget Levels

The FY 2026 Medicaid-CHIP operating budget covers a wide array of expenditures impacting the FY 2026 operating budget. FY 2026 programmatic activities include:

Implementing approved 1115 Waiver initiatives as noted above and sustaining initiatives already implemented under the waiver,?

Implementing Primary Care Payment Reform,?

Implementing performance-based Hospital reimbursement through the HDAA,

Initiating Turquoise Care Waiver contracts with rate increases for FQHCs based on available funds,

Adding Community Health Workers as Medicaid-funded providers,?

Introducing Doulas and lactation care providers as Medicaid-compensable services, and?

Enhancing reimbursement rates for providers with additional behavioral health training and expertise.?

These examples of FY 2026 programmatic activities carry challenges in maintaining administrative and budgetary controls and managing the complex timelines and CMS regulatory requirements that accompany their implementation and operations. Administrative staffing is a critical resource needed to ensure compliance with regulatory parameters, and efficient operation of Medicaid-CHIP programs

FY2027 Funding/Budget Levels

The FY 2027 Medicaid-CHIP operating budget covers a broad range of expenditures maintaining the FY 2026 base operations and additional special appropriation requests delineated in the FY 2027 budget request. FY 2026 expenditures are projected to be \$11,449 million and FY 2027 expenditures are projected to be \$11,647 million representing 1.73% year over year growth. The FY 2027 programmatic budget closely follows FY26, with minor adjustments to ensure the successful implementation of the following items. Of this total budget request \$155.7 million is requested appropriation from GRO and FY2026 specials.

Food is Medicine: The support for capacity building remains unfunded in FY 2027. Consequently, HCA is seeking a change in HB2 language to support the capacity building for local vendors to better align with the legislators' vision for the program. Program funding without capacity building in FY26 has pushed the program towards more established national providers instead of local food vendors.

Comprehensive Addiction and Recovery Program (CARA): The design and operations of the program changed since HB 2, with all responsibilities now falling on Medicaid including budget, data reporting, rule promulgation, and vendor oversight. Vendor contract services include the development of a plan for a Safe Care portal.

Certified Community Behavioral Health Clinics (CCBHC): Following the implementation of the program, additional providers are anticipated to begin operations in FY 2027. Consequently, the Medicaid FY 2027 budget request includes funding for this purpose, moving towards a vision of accessible CCBHC services statewide.

Traditional Healing: The implementation of Native American traditional healing practices in the Medicaid program is targeted towards the Native American population residing in New Mexico across various age groups. Nearly all the cost will be matched 100% by federal funds. Following tribal consultation, the Navajo Nation is the only interested beneficiary tribe, nation or pueblo.

Federal Budget Reconciliation Bill HR1: New federal policies taking effect in FY 2027 pose uncertainties to the operating budget and medical programs on behalf of New Mexicans. Consequently, the Medicaid FY2027 budget request is mainly directed towards sustaining FY 2026 program operations. However, sustaining operations of medical programs across provider networks poses both uncertainties and funding challenges, particularly those facing rural community providers and give access to reproductive health and preventative services.

Overview of Request:

The FY 2027 Medicaid-CHIP budget request covers a broad range of expenditures maintaining the FY 2026 base operations and additional special appropriation requests. FY 2026 expenditures are projected to be \$11,449 million and grow to \$11,647 million in FY 2027, representing 1.73% year over year growth. The growth in the budget request is modest, with \$155.7 million corresponding to appropriations from GRO and FY2026 specials.

The MAD Program general fund needs decreased by \$83.4 million while the MAD Behavioral Health Program general fund needs increased by \$74.9 million resulting in a net decrease of \$8.5 million. The decrease in Program need is driven by the anticipated impacts of new federal policies on Medicaid- CHIP enrollment levels. The increase in MAD Behavioral Health needs reflects continued implementation of existing programs and the expansion of others, such as CCBHC.

The general fund needs to sustain the MAD Program and MAD Behavioral Health Program also reflects reductions in the FMAP and EFMAP factors, which will increase the State's share of Medicaid funding by \$17.1 million in FY 2027. As noted above, the FMAP decreases from 71.66% to 71.36% in FFY 2027. Meantime, the EFMAP decreases from 80.16% to 79.95%.

In FY2027 operating transfers are projected to decrease by \$65.9 million while other revenues are projected to increase by \$57.8 million, resulting in a net decrease of \$8.1 million. Much of the reduction in operating transfers relates to appropriations in FY 2026 that were not tied to a revenue source in HB2. Meanwhile, the increase in other revenues is a result of increased drug rebates of \$20 million and using \$44 million of fund balance.

The FY2027 request for MAD Admin is reflecting no increase in general fund compared to FY2026. The flat FY2027 funding level is supported by funds drawn from the Health Care Quality Surcharge (HCQS).

Programmatic Changes:

Maintenance of Base Program Expenditures

In FY 2027 HCA-MAD program expenditures are expected to sustain the FY 2026 Medicaid program and complete the implementation of FY 2026 program expansion items. The FY 2026 Base Program expenditure included funding from the government results and opportunity program fund (GRO). This funding recognized expenditures for social determinants of health and wellbeing. These items include medical respite, housing/food capacity-building, maternal health, infrastructure and extended healthcare coverage to Justice-involved populations prior to release in the community and housing support.?

Medical respite. The initiative allows individuals who are experiencing homelessness (and have with physical health issues) who have been discharged from a hospital to enter medical respite for up to 6 months. The provided service sits between a shelter and a rehab facility. Individuals receive a bed, meals, and medical attention in the facility.

Food support. The FY2026 implementation provides home delivered meals for pregnant members with diabetes and community benefit members who are homebound, such as older adults and individuals who are disabled and lack mobility.

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JUST Health Plus Justice Re-entry Services. This initiative targets incarcerated eligible Medicaid members with covered Medicaid services for up to 90 days prior to release from a jail or prison. Minimum services include case management, Medication Assisted Treatment services, and 30 days of medications in hand.?

Housing support. The initiative is developing through the expansion of the Linkages program and adding other provider who can perform these services. The Linkages program provides pre-tenancy and tenancy support. These services include applying for housing, communicating with landlords, and paying for first, last, and security deposits. The intent is to offer wraparound housing support except for rent payments.

Nonrecurring Special Appropriations

In FY 2027 HCA-MAD requests adjustment to HB2 language for the continued implementation of several FY 2026 budget expansion items funded by the government results and opportunity program fund (GRO) and special appropriations. Consequently, the FY 2027 budget request identifies special appropriations for the following items:

Traditional Healing: The implementation of Native American traditional healing practices in the Medicaid program targets Native American population in New Mexico, with nearly all the financial cost borne by the federal government. This program benefits some 80,000 New Mexicans of varying ages depending on potential service usage.

Certified Community Behavioral Health Clinics (CCBHC): The following implementation of the program additional providers are anticipated to begin operations in FY 2027. Consequently, the Medicaid FY 2027 budget request includes funding for this purpose.

Complex Discharge Services. These services aim to reimburse providers in the transfer of individuals from inpatient hospital settings to nursing facilities given their high costs and level of need. There is no funding requested for this expansion.

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Base Budget Justification: Adjustments to the base budget include a net reduction of \$493.8 million (total computable) compared to FY2026, with MAD Program decreasing by \$737.5 million (total computable) and MAD BH increasing by \$243.7 million (total computable). The decrease in MAD Program is primarily due to lower capitation cost, while the increase in MAD BH is primarily due to medical costs and services.

The Base Budget request for FY 2027 applies very low enrollment trend growth (less than 1%) and anticipated growth in per capita cost due to adjustments in acuity and enrollment variation. These factors relate directly to anticipated impacts from new federal policies, in particular the loss of member eligibility and resulting increase in acuity risk. Both of these factors have actuarial implications on managed care capitation.

Summary Remarks

The FY 2027 base budget general fund need is \$1,478 million, a decrease of \$8.5 million relative to the FY2026 appropriation of \$1,486.5 million.

Program Description:

SNAP Primary Services—In New Mexico, effective October 1, 2024, SNAP income eligibility will be increased to 200% Federal Poverty Limit. SNAP provides a supplemental food assistance benefit to alleviate food insecurity for individuals who qualify. SNAP provides a voluntary Employment and Training program as a support service to customers who are looking for opportunities to expand their job skills to gain sustainable employment by utilizing federal and state funds. In FY25, SNAP helped an average of 472,553 people each month, with the average household receiving approximately \$332 per month.

SUN Bucks- The SUN Bucks program is a new program that was implemented in SFY25. The SUN Bucks program provides \$120 in grocery benefits per eligible school-age child when school is out for the summer. During SFY25, SUN Bucks was issued to 273,000 students for school year 2023-2024 and 290,000 students for school year 2024-2025.

State SNAP Supplement— Elderly and/or disabled members that receive less than \$100 in federal SNAP benefits are supplemented with State General Funds to bring up their benefits to \$100. In SFY 25, an average of 24,504 households per month received this supplement.

TANF Primary Services—Temporary Assistance for Needy Families (TANF) offers cash assistance and support services to help families achieve self-sufficiency. NMW service providers handle case management, job development, and support services. In SFY25, TANF served an average of 7,567 families monthly, with an average benefit of \$418 per household. TANF has a 60-month lifetime cap. Recipients must meet work participation standards. For Transitional Employment Programs, TANF funded \$2,750.0 for Career Link (51 placements, 27 transitioned to unsubsidized jobs) and \$2,000.0 for Wage Subsidy (59 placements, 25 transitioned to unsubsidized jobs) in FY25. ECECD received \$31,500.0 in TANF funding. PED received \$500.0 for the GRADS Program, and CYFD received nearly \$17,798.0 for various programs, including Keeping Families Together and Family Outreach programs. The Transition Bonus Program was reintroduced in SFY24 to encourage TANF recipients to move to employment. Eligible households working 30 or more hours per week, with a gross income below 150% of FPL, less than 60 months of TANF, and received at least one month of TANF in the last three months, will receive a \$200 monthly bonus for 18 months. In FY25 GA served 1,433 people, an average of 119 per month.

General Assistance (GA) Primary Services—GA provides cash assistance to disabled adults for personal needs such as shelter, items, and medications, based on a disability review by the Incapacity Review Unit. The program assisted an average of 1,462 individuals monthly in FY25, including 142 children in June. Unrelated children living with adult caretakers beyond the 5th degree of relationship may be eligible. Payments are made to caretakers for the child's needs, including shelter, clothing and other personal needs.

Community Service Block Grant (CSBG) Primary Services— Through HCA contracts, six non-profit Community Action Agencies use CSBG funds to assist low-income individuals and families. Services include emergency housing and utility assistance, employment programs, financial literacy, and support for migrant/seasonal farm workers. CSBG funds complement other federal, state, and local programs, supporting initiatives like pre-school, day care, USDA Rural Development, home repair, and senior companions. In FFY24, CAAs used \$4,074.4 in CSBG funds and \$61,261.00 in other funding to serve 109,318 individuals and 20,740 households.

Low Income Home Energy Program (LIHEAP) — LIHEAP provides annual benefits to help with heating or cooling costs. Households with income at or below 150% of federal poverty guidelines may qualify. Payments are usually made directly to utility and fuel vendors. The state received \$21,936,189 in FFY24 and \$20,701,852 in FFY2025. In FFY24, 46,890 households received an average benefit of \$261. In FFY25 (as of June 2025), 43,810 households received an average benefit of \$265.00.

Food Distribution/USDA Foods (Commodities)—The USDA Foods Program provides about 16-20% of a school food authority's food budget to help provide an average of 185,478 lunches daily. In School Year, 2025, New Mexico schools received \$16,371,649.00 worth of USDA Foods

The Emergency Food Assistance Program (TEFAP)— Five Food Banks received \$16,360.0 in USDA Foods for SFY25 and helped an average of 55,000 low-income households monthly with food boxes.

The Commodity Supplemental Food Program (CSFP)— CSFP provides nutritionally balanced monthly boxes of USDA food to persons 60 years of age and older. Recipients are qualified at or below 150% federal poverty income guidelines. CSFP food is ordered by the state. USDA purchases food. New Mexico's approved caseload for FFY25 is 2,000. Administrative Funds available for FFY25: \$1,024,000.00

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is 9,999. Administrative Funds available for FY25 \$1,034,696.00.

Homeless Meals Programs– In FY25, eight homeless shelters and Meal Sites provided 651,977 hot meals to New Mexico's homeless population.

Fresh Produce Initiative– In FY25, \$1,116.5 was used by the five Regional Food Banks to distribute 16.6 million pounds of purchased and donated produce to low-income households and shelters across New Mexico.

Electronic Benefit Transfer (EBT)– The EBT system provides debit card services for cash assistance and food stamp programs in New Mexico.

Education Works Program (EWP)– EWP offers financial assistance to groups with at least one member enrolled in a post-secondary or higher education institution. Eligible recipients choose EWP over NMW cash assistance. Benefit amounts are calculated using the same method as NMW. Participation is limited to 36 months, based on degree progress and good standing with the Human Services Department. In FY25, EWP supported an average of 63 cases monthly, totaling \$520 in benefits .

Refugee Resettlement Programs–The Refugee Cash Assistance program provides financial aid to eligible refugees and other populations resettling in New Mexico. In FY25, 966 individuals received \$2,074.6 in benefits. Lutheran Family Services (LFS) provided employment and integration services to 255 individuals through a Services Agreement. HCA also collaborates with DOH for Refugee Health Screening and Health Promotion programs
State Supplement for Residential Care (SSRC)– Individuals are eligible for an SSRC payment if they are recipients of Supplemental Security Income and reside in an adult residential shelter care facility. The residential shelter care home for adults must be licensed pursuant to the regulations established by the Department of Health. The cash payment made to the SSI recipient under SSRC is to help the recipient with personal care, such as bathing, dressing, eating or taking prescribed medication. FY25 average monthly expenditure per case was \$107.25 and served 53 cases or about 4 cases per month .

Burial Assistance– Burial Assistance provides up to \$200 toward funeral costs for individuals who were recipients of TANF, General Assistance, Refugee Assistance, SSRC, SSI, or Medicaid in New Mexico. Assistance is available if resources for funeral costs are below \$600. Payments are made via a voucher to the service provider.

High School Equivalency (HSE)– HSE directs and supports participants to earn HSE certification and transition to post-secondary education career pathway so they can earn additional credentials while working. The state received TANF funding of \$500.0 in FY25. In FY25, 491 students participated in coursework, 75 testing vouchers were issued and 11 TANF participants obtained their HSE certification.

Vocational Training (VT)– VT aims to enhance self-sufficiency by helping participants obtain certificates or associate degrees for full-time employment. In FY25, \$1,000, in TANF funding supported the program. Of the 77 participants, 32 graduated with

Major Issues and Accomplishments:

- In FY25, HCA administered and implemented Disaster Supplemental Nutritional Assistance Program (DSNAP). DSNAP was administered to the counties of San Juan, Rio Arriba, Lincoln and Otero Counties to include the Mescalero Apache Reservation. These counties were impacted by flooding in their area, however, Lincoln and Otero Counties along with the Mescalero Apache Reservation was impacted by the Salt and South Fork Fires which resulted in flooding in the burn areas.
- In FY25, the HCA received funding in HB 2 to fund Higher Education for Adult Basic Education in the amount of \$3 million, to support an expanded portfolio of Integrated Education and Training in the amount of \$1 million-throughout the state, which helps adult learners obtain their high school equivalency and career certifications simultaneously.
- ISD worked with Tribal TANF Service Delivery Areas to streamline a process to verify for dual participation for the TANF programs. The process would ensure that all customers receive the benefits to which they are rightfully eligible for and to have the appropriate referrals to the correct Tribal TANF services delivery area. HCA collaborated with Public Education Department (PED) to administer the SUN Bucks program (known as Summer EBT) to approximately 275,000 school aged children. Each child was eligible to receive \$120, for a total issuance of the program was \$32,976.1.
- HCA collaborated with Aging and Long-Term Services Department to issue a one-time State SNAP supplement to eligible elderly and disabled households in the amount of \$68 to a total of 29,433 households.
- HCA created a Tribal Charter to strengthen our partnerships with tribal leaders and communities. To further this goal, our team has implemented a requirement to hold quarterly Tribal Charter meetings, bringing together Tribal Partners, HCA staff, Tribal Liaisons, and other key stakeholders. These meetings serve as an important platform for collaboration, goal setting, and relationship-building. During each meeting, we provide updates on ongoing projects, discuss upcoming changes, and address any questions or concerns from attendees. Our primary objective is to enhance the value and range of services available to ISD and Tribal community beneficiaries. To date, we have successfully held two quarterly meetings, each fostering meaningful dialogue and progress.
- HCA implemented ABAWD (Able-Bodied Adults Without Dependents) time limits in four mandatory counties: Bernalillo, Santa Fe, Eddy, and Los Alamos. These time limits, which were implemented beginning on January 1, 2025, are designed to ensure that individuals who can work and do not have dependents are meeting the work requirements for continued SNAP eligibility. The implementation of ABAWD time limits in these counties is an important step in aligning the program with federal guidelines while encouraging self-sufficiency and engagement in employment or work-related activities. HCA began the implementation of ABAWD time limits with 11,825 mandatory SNAP participants who resided within one of the four mandatory counties, which has decreased to 3,890 as of July 2025. Ensuring that participants maintain compliance with ABAWD time limits has proven to be a challenge. As a result, we have engaged in discussions with the Department of Workforce Solutions to explore potential ways they can support our ABAWD population. When ABAWD time limits were first enforced, we issued notices to all Able-Bodied Adults Without Dependents residing in mandatory time-limit counties to ensure they were informed of the work requirements and available exemptions. Additionally, press releases and social media posts were published with similar guidance on how individuals could maintain compliance or report a qualifying exemption. We have consistently sent monthly text messages to participants identified as noncompliant, providing them with information on how they may regain compliance. In parallel, the SNAP Education and Training (E&T) Program is actively working to secure funding to expand its services, with the goal of supporting the mandatory ABAWD population in the future.
- In response to Presidential declaration of natural disasters impacting New Mexico communities in 2024, the HCA LIHEAP Unit implemented disaster benefits to assist affected households with essential needs. In October 2024, \$1,002,000 in disaster LIHEAP benefits were provided to 334 households in Lincoln County. In early December 2024, an additional 775 households in Chaves County received assistance in the total amount of \$387,500. These benefits were intended to help households replace necessities lost as a direct result of the disasters and to provide timely support during the recovery period.

Overview of Request:1. Administrative
Revenue

- The Income Support Division requests \$242,517.5 for FY27. This is an increase of \$32,867.1 from the FY26 operating budget.

General Fund

- o The FY27 general fund request is \$108,204.7, which is an increase of \$39,560.6 compared to the FY26 operating budget.

Federal Funds

- o The FY27 federal request is \$134,012.8, which is a decrease of (\$6,693.5) compared to the FY26 operating budget.

Expansion

- Income Support Division requests an expansion of \$42,258.5 for FY27, this is included in the total request amount listed in the revenue section above. This is comprised of \$17,748.5 of General Fund and \$24,510.0 of Federal Funds.

2. Program

Revenue

- The Income Support Division Program requests \$1,329,849.7 for FY27, with an increase of \$7,715.4 from the FY26 operating budget.

General Fund

- o The FY27 general fund request is \$31,875.3, which is an increase of \$7,465.4 compared to the FY26 operating budget.

Federal Revenue

- o The FY26 federal request is \$1,297,974.4, which is an increase of \$250.0 from the FY26 operating budget

Expenses

- ISD programs FY27 expenses will increase by \$7,715.4 from the FY26 operating budget to a total of \$1,329,849.7.

Programmatic Changes:

- Summer EBT was successfully implemented for School Year 2023-2024 on August 5, 2024. This was the first issuance and NM was able to issue benefits to 275,000 students.
- As part of the SNAP State Supplement increase for Elderly and Disabled, ISD has been approved for the Elder/Disabled Simplified Application Demonstration Project (ESAP). The ESAP demonstration project will allow for the elder/disabled households with no earned income to receive SNAP benefits for 36 months without any interruptions.
- On March 21, 2025, a Federal Register was issued by Health and Human Services (HHS) notice of change of Eligibility Period for Refugee Cash. The eligibility period is being changed from twelve (12) months to four (4) months for participants who become eligible for Office of Refugee Resettlement (ORR) benefits 45 days after publication. ORR determined that it must shorten the RCA period to four months to avoid a significant budget shortfall.

Base Budget Justification:

1. Administrative

Personal Services and Employee Benefits (200 Category)

- The FY27 base request sets the personnel category budget at \$91,325.0 (\$40,457.0 GF, \$50,868.0 FF/OSF). The authorized amount of FTE for FY26 is 1,060 with a current vacancy rate of 15.8%. However, the funded amount of FTE is 950 and current filled positions total 893, which could be considered a 5.4% vacancy rate.

- SB376 Insurance Premiums: \$2,547.1 (\$1,069.8 GF; \$1,477.3 FF/OSF). In FY26 HCA was given non-recurring funding for Senate Bill 376 changes to insurance premiums; this request builds that funding into the base to become recurring revenue moving forward.

- Term to Perm Positions: No Budget Impact. There will be no budget impact for this change. There are 25 new term positions in FY26 that will be converted to perm positions in FY27 with no budget impact.

- Increase to FTE: \$20,886.4 (\$8,772.3 GF; \$12,114.1 FF/OSF). 260 additional FTE's are needed to meet the demands of the proposed federal rule changes which will increase work requirements, eligibility checks, and

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administrative burdens across SNAP and Medicaid—raising caseloads, processing times, and demand on frontline services. Impacts include higher churn from ABAWD and Medicaid work rules, increased workload from 6-month renewals, and heavier lobby traffic. These positions include: Family Assistant Analysts for processing; Supervisors/ County Directors to maintain oversight; Lobby clerks for in-person traffic; Accuracy Improvement Team for quality control; Trainers/Helpdesk for onboarding and support; E&T staff for expanded SNAP work rules; and Reports team for performance monitoring. Without adequate staffing, New Mexicans—especially the most vulnerable—face service delays, disruptions, and increased hardship. Staff investment is critical to maintain compliance, integrity, and timely service.

Contractual Services (300 Category)

- The budget request for contractual services in FY27 is set at \$117,766.4 (\$50,859.9 GF, \$66,906.5 FF/OSF). This represents an increase of 37% compared to the FY26 contractual budget.
- The contract that is the largest driver in the 300s category is the staff augmentation contract. TEKSystems. The TEKSystems contract was not funded in ISD's budget in FY26 but the actual need is \$18,491.6 (\$7,766.5 GF, \$10,725.1 FF). ISD is working to be proactive in preventing a backlog, so this request is being submitted as part of the overall request to cover staff augmentation costs.
- The contract that is the second largest driver of growth is with Deloitte. ISD's work with Deloitte is used to create improvements, efficiency, and update our systems as new program requirements are added. Federal requirements are driving the growth, requiring two additional dedicated ISD Deloitte Teams, which is an additional \$11,554.9 (\$4,853.0 GF, \$6,701.8 FF). ISD has one dedicated, funded IT development team to effectively prioritize and address our division's ongoing initiatives. This team handles the ISD roadmap and allows ISD to complete required change requests that don't have dedicated funding. This team helps ISD ensure timely completion of our enhancements and meet our division's specific needs more efficiently.
- Finally, our contract for the consolidated customer service center, Accenture. The Accenture contract was only funded up to \$14,095.5 in FY26 but the actual need is \$24,492.5 (\$4,366.7 GF, \$6,030.3 FF). ISD's participation in this contract is mandatory. Without this increase to the base budget for Accenture, ISD will go into FY27 with a shortfall.

Other Costs (400 Category)

- The budget request for miscellaneous costs in FY27 is set at \$33,126.1 (\$16,887.8 GF, \$16,238.2 FF) . This represents an increase of 3.3% compared to the FY26 miscellaneous budget. Much of this increase is due to the costs of increasing our FTE, training related to maintaining adequate caseworker to caseload ratios, and the recurring federal impacts of HR1.

2. Program

Personal Services and Employee Benefits

- The FY27 PS&EB base request is \$2,160.1, which is flat compared to our FY26 operating budget. The total number of employees authorized to work through the TANF NMW Workforce is 25 and these positions are fully funded at the current budgeted amount.

Contractual Services

- The FY27 contractual service base request is \$20,533.4, which is flat compared to our FY26 operating budget.

Other Cost Category

- The FY27 other costs base request is \$1,307,156.2 and reflects an increase of \$7,715.4 overall which is made up of an increase of \$7,465.4 in GF and an increase of \$250.0 in Federal Fund expenditures which due to the increase of Employment and Training participants, disaster SNAP benefits, and increase to the SNAP Elderly and Disabled benefit issuance of \$100 per case.

Program Description:

The Health Care Affordability Fund (HCAF) was established in 2021 to improve the affordability of health coverage on New Mexico's Health Insurance Marketplace, in the small group market, and for uninsured New Mexicans without access to other forms of coverage or programs. To achieve this goal, the Health Care Affordability Division created several programs. The Health Insurance Marketplace Affordability Program (MAP) launched in 2023 and provides several different premium and out-of-pocket assistance programs. The New Mexico Premium Assistance Program (NMPA) provides enhanced premium affordability for Marketplace-eligible enrollees up to 400% FPL, with an income-based sliding scale that builds upon the federal subsidies under the Affordable Care Act (ACA). The Native American Premium Assistance Program (NAPA) provides \$0 premium/\$0 out-of-pocket options for Marketplace-eligible Native Americans up to 300% FPL. The Medicaid Transition Premium Relief (MTPR) program pays down the first month's premium for households up to 400% FPL transitioning from Medicaid to the Marketplace. The State Out-of-Pocket Assistance Program (SOPA) reduces costs for Marketplace-eligible enrollees up to 400% FPL when they visit the doctor, fill a prescription, or use other care covered by a Turquoise Plan. The Small Business Health Insurance Premium Relief Initiative reduces premiums for small businesses and their employees who purchase coverage in the small group market. The initiative provides an automatic 10% discount on plans sold in this market. The program started in July of 2022. The Coverage Protection Program (CPP) is a program that that will provide affordable health coverage for individuals and families who were previously eligible for coverage through federal programs but lost eligibility due to recent federal actions.

Major Issues and Accomplishments:

During the 2025 Plan Year, enrollment on New Mexico's Health Insurance Marketplace reached its highest level, with nearly 75,000 enrollees signed up by the end of the enrollment period. Typically, there is attrition over the course of the year, but with more affordable coverage available, retention has improved and more individuals have enrolled through Special Enrollment Periods. Since the program launched, enrollment has more than doubled reaching the highest level in the Marketplace's history, and New Mexico's programs have saved consumers millions of dollars. With enhanced federal subsidies scheduled to expire at end of 2025, HCAF will play a major role in protecting the significant improvements achieved in recent years and cause premiums to spike across the board. Today, New Mexico's premium assistance and out-of-pocket assistance cover those who are eligible and make up to 400% FPL. The Small Business Initiative has saved \$112 million for New Mexico's businesses and workers since it was launched. Over 4,000 businesses covering 38,000 workers and their families currently benefit from the initiative. While the program has had positive benefits for small business, data show that these businesses are extremely price sensitive and face difficult choices when it comes to providing coverage for employees. Less than a quarter of small businesses offer health coverage to workers and those that do face growing costs and limited options to deal with current trends. In a 2024 survey by Small Business Majority, in response to rising health costs, 51% of small employers increased employee contributions, 47% limited coverage, 29% cut other benefits, 24% stopped offering coverage, 21% raised prices on goods and services, and 4% reduced wages or eliminated wage increases. According to KFF, small businesses tend to offer plans with much higher deductibles than larger businesses. Compared to larger employers, deductibles for small businesses are approximately \$1,000 higher on average. According to the Commonwealth Fund, the average New Mexican with employer sponsored coverage face a deductible equal to 7% of household income, which combined with employee premiums, constitute 18% of household income. Recognizing these accomplishments and the ongoing need to address affordability issues, the legislature passed HB 7 (2024) to significantly increase the annual funds distributed to the HCAF. Revenue in FY 25 will be approximately \$97 million and in FY 26 will increase to \$214 million. This additional revenue will enable significant program enhancements described in the following section.

P-1 Program Overview

- Overview of Request:** The numbers in the HCAF budget request were derived through an actuarial analysis by Wakely Consulting Group, an actuarial firm that specializes in modeling state policy innovations as well as data from BeWell. The primary programmatic and policy focus of the request is to enhance the affordability of coverage and care through strategically designed programs to maximize coverage and savings for individuals, families, and small businesses. Each of these program enhancements is directly tied to agency goals and performance measures.
- Programmatic Changes:** HCA proposes maintaining the existing parameters for the Marketplace Affordability Program and Small Business Initiative. HCA also proposes converting the Coverage Expansion Program into a Coverage Protection Program – a series of initiatives that help those losing coverage due to recent federal actions maintain their coverage. This includes DACA recipients losing Marketplace coverage 10/1/2025, Marketplace enrollees under 100% FPL who will lose PTC eligibility by 1/1/2026 due to their immigration status despite lawful presence, Marketplace enrollees between 100-400% FPL who will lose PTC eligibility by 1/1/2027. HCA is also proposing two special appropriations for FY27. The first replaces the \$30,000.0 in the 500s category in FY26. The second would appropriate \$92,900.0 to cover current Medicaid enrollees who will lose eligibility on 10/1/2026.
- Base Budget Justification:** HCAF's base budget increase is supported by the significant ongoing need to prevent coverage losses that result from federal actions that eliminate federal funds. The proposed FY 27 budget of \$205.3 million is less than the projected \$212.4 million in HCAF revenue. Each program enhancement is linked with a critical performance measure.

Program Description:

The role of the Behavioral Health Services Division (BHSD), as the Mental Health and Substance Abuse Single State Authority for New Mexico, is to address needs, services, planning, monitoring and continuous quality systemically across the state. The Behavioral Health Services Division (BHSD) of the Health Care Authority (HCA) is the single state authority for mental health and substance use treatment behavioral health services in New Mexico. BHSD collaborates with many other state agencies and community stakeholders to ensure comprehensive service delivery by provider organizations in prevention, treatment, and recovery for those with substance use disorders (SUD), mental health conditions, or co-occurring disorders.

BHSD's role is the management of the public behavioral health service system. BHSD purchases adult behavioral health services utilizing State General Funds (SGF) and federal funding for those who are ineligible for Medicaid and covers services that are not reimbursable by Medicaid. In addition, BHSD manages the behavioral health requirements of Turquoise Care.

BHSD's mission along with our partners, is committed to improving New Mexico's Behavioral Health System, driven by health equity, quality and access to service for all New Mexicans. BHSD works to:

- Enhance the Behavioral Health System of Care that includes prevention, crisis, treatment and recovery;
- Strengthen and expand the Behavioral Health workforce;
- Reduce administrative obstacles to improve access to care;
- Improve Divisional administrative process to improve staff workflows.

Major Issues and Accomplishments:**Federal Block Grant Funds**

The Substance Use Prevention, Treatment, Recovery Block Grant Block Grant (SUPTRS) is the largest source of non-Medicaid federal funds received by the BHSD. Utilization of block grant funds is intended for planning, implementing, and evaluating activities to prevent and treat substance use disorders. It is also the largest federal program dedicated to these state-level issues. BHSD collaborates with the Behavioral Health Planning Council to plan and monitor service delivery for priority populations. The BHSD Office of Substance Use Prevention is largely funded by the SUPTRS grant.

Targeted populations include women with SUDs, intravenous drug users (IVDU), services to individuals with tuberculosis (TB), and primary prevention services. BHSD funds an array of service providers. These include interventions for women with a SUD who are pregnant and women who have dependent children. Funded services also address the social determinants of health for women and their families. Services for those experiencing IVDU are prioritized under the SUPTRS per regulation and contracted scope of work. These regulations primarily refer to the development of capacity management and reducing wait lists for this high-risk population. Contracted providers are also required to maintain a quality assurance process that tracks and reports routine screening, referral for testing, and treatment of consumers who are infected or at risk of infection with TB, as well as HIV, Hepatitis C, or sexually transmitted diseases. BHSD partners with the Department of Health's TB Control Officer to implement infection control procedures and linkages with healthcare providers to ensure that TB services are routinely made available, primarily through the statewide network of public health offices.

The Synar Program, enacted in 1996, is a federal requirement within SUPTRS, intended to prohibit the sale and distribution of tobacco products to people under 18 years of age. As of December 2019, Federal Public Law 116-94 changed the minimum purchase age requirement to 21. States were provided a three-year transition period to make this change. The New Mexico Legislature passed SB 131 in February 2020, which was enacted in January 2021. Synar regulations require states to pass and enforce laws mandating sales restrictions, conduct inspections to test vendor compliance, establish targets resulting in noncompliance reduction, and submission of an annual report detailing activities with enforce the law. While the Synar Program did not establish a dedicated federal funding source for implementation, it does allow for the use of primary prevention monies set aside of SUPTRS for carrying out the administrative aspects of the program. SUPTRS funds do not support enforcement of youth tobacco access laws.

The Community Mental Health Services Block Grant (CMHS) is awarded to states to develop and maintain comprehensive community mental health services to individuals who are either adults with a serious mental illness (SMI) or children with a severe emotional disturbance (SED). These services also include individuals who have dual

diagnoses. As with the SUPTRS grant, BHSD works with the Planning Council to plan and monitor service delivery. A portion of the grant (10%) is earmarked to support evidence-based programs that provide treatment for first episode psychosis (FEP). BHSD contracts with the UNM Early Psychosis Clinic, a specialty care service for youth ages 15-30 years and their families. The team at the clinic provides a combination of direct clinical care, access to consultants, and educational and outreach activities. Clinical services are based on the NAVIGATE model for early psychosis which includes individual and family psychoeducation, resilience-focused CBT, evidence-based psychopharmacology, and education and vocational support. Individuals are enrolled for up to two years, with discharge either upon recovery or embedded in long-term services, as appropriate. The clinic serves 50-60 youth directly, with others supported through consultation provided to community providers throughout the state. The clinic is currently adding additional outreach staff to expand its consultative capacity. In 2021 federal guidance mandated that a portion of the grant (5%) be earmarked for crisis response services. Funding will be utilized for mobile crisis services in rural parts of the state targeting individuals with an SMI/SED diagnosis.

Federal Discretionary Grants

The Projects for Assistance in Transition from Homelessness (PATH) grant is an annual formula grant from SAMHSA to identify and serve people with a Serious Mental Illness (SMI) and those with co-occurring substance use disorders, who are experiencing or are at risk of homelessness. These funds are used to conduct outreach to individuals who are disconnected from mainstream resources. PATH-funded providers in Albuquerque and Santa Fe offer mental health, substance use, case management, and additional support services alongside a limited set of housing services.

The State Opioid Response (SOR) grant programs, also known as the New Mexico Opioid HUB, utilize additional federal funding intended to increase the number of Opioid Treatment Providers (OTPs) and Office-Based Opioid Treatments (OBOTs), increase the availability of qualified staff and programs to address the needs of persons with Opioid Use Disorder (OUD), and improve access to services for individuals with OUD. This initiative created a centralized hub and regional spoke model that utilizes the expertise of regional institutions and community agencies already providing services, integrating them with newly trained providers, under the guidance of a centralized training hub at the University of New Mexico (Consortium for Behavioral Health Training and Research – CBHTR) able to coordinate and disseminate best practice efforts statewide. The SOR grant focuses on expanding efforts that are geared toward programs that get individuals into care and treatment while also expanding prevention efforts and education around medications, treatment models, and eliminating stigmas toward OUD. When other funding sources end, the SOR grant will make efforts to cover some of these unexpected costs. However, the intention of the SOR grant is to offset unexpected costs or help start programs that expand services for OUD treatment and prevention while finding sustainable funding means to keep these programs going.

The PAX Good Behavior Game (PAX GBG) funded through SAMHSA grants SOR and PFS is an evidence-based trauma informed care program that utilizes positive reinforcement and contingency management to build self-regulation skills among youth, targeting students in Pre-Kindergarten through 8th grade classrooms through teacher training. PAX GBG is implemented in 18 School Districts in Albuquerque, Aztec, Carlsbad, Chama, Deming, Espanola, Farmington, Hatch, Las Cruces, Pojoaque, Santa Fe, Socorro, Taos, and Tucumcari. Site-specific PAX partners collect pre-test and post-test data. These measures include pro-social skills, spleem counts (off-task and inattentive behaviors), and qualitative interviews. Since Covid-19, the trainings continue to be a mixture of virtual and in-person, although most trainings have moved back to in-person. Future trainings and visits are planned for the remainder of the 2025 calendar year and throughout the 2026 calendar year. Each year, the program trains approximately 19 Admin, 167 SPED/Specials/Support, 179 Teachers, totaling 365 trained that reach approximately 3,869 students.

The Indigenous PAX Good Behavior Game (IPAX GBG) funded through SAMHSA grants SOR and PFS is also an evidence-based trauma informed care program that utilizes positive reinforcement and contingency management to build self-regulation skills among youth with a focus on the Native American population within and including head sta

Overview of Request:

The Behavioral Health Services Division (BHSD) FY27 Operating Budget Request reflects a 10.7% increase over FY26, focused on sustaining core services, supporting critical infrastructure, and investing in the 988 Suicide & Crisis Lifeline. Key components include continued funding for five previously grant-supported positions, increased

insurance premiums, a \$3,288.0 General Fund request to replace expiring Opioid Settlement funds that currently support our supportive housing program, and a \$9,000.0 General Fund request to sustain 988 operations.

Combined with \$3,600.0 in anticipated surcharge revenue coming in as Other Transfers, this funding meets the \$12.6 million needed to operate a comprehensive 988 system through the recurring budget.

Behavioral Health Services Division (BHSD) Administration

BHSD is requesting a General Fund increase of \$696.4 to support five positions previously funded by a one-time federal grant, as well as to cover increased insurance premiums.

In addition to the increase, the request includes a \$2,000.0 General Fund realignment, shifting funds from contractual services to personnel, to ensure adequate budget authority for payroll and benefits. This realignment does not represent new funding, but rather reflects updated funding trends and the need to stabilize support for personnel costs considering evolving federal funding limitations for personnel costs.

Behavioral Health Services Division (BHSD) Program

The contractual services category reflects an overall increase of \$9,900.0, or 10.8%, primarily due to the proposed shift to fully fund 988 Suicide & Crisis Lifeline operations within the recurring operating budget beginning in FY27. This includes a General Fund increase of \$9,000.0 to supplement lower-than-expected revenue from the 988 Lifeline Fund created by Senate Bill 535. Along with \$3,600.0 in new budget authority established in the Other Transfers category to reflect surcharge revenue anticipated to begin in FY26, these amounts together total \$12,600.0—representing BHSD's estimated cost to build a comprehensive and effective statewide 988 program. This funding strategy is essential to sustain 988 operations and eliminate reliance on ongoing special appropriations.

Senate Bill 535, passed during the 2025 legislative session, increased the telecommunications relay surcharge from 0.33% to 1.66%, directing 80% of net revenues to the 988 Lifeline Fund. Initial projections anticipated sufficient revenue to fully fund the program; however, updated estimates from the Taxation and Revenue Department place FY26 revenue at approximately \$3,600.0, with monthly transfers expected to begin in or around September 2025. These adjustments reflect BHSD's commitment to building a stable and sustainable funding model for the 988 Suicide & Crisis Lifeline through recurring appropriations and consistent revenue tracking.

Lastly, the contractual services category reflects a shift of \$3,288.0 from opioid settlement funds to General Fund to ensure continued access to critical behavioral health housing and support services without disruption. These adjustments reflect BHSD's ongoing effort to stabilize the 988 program through recurring appropriations and proactive financial planning.

Non-Recurring Appropriations:

Linkages Program

BHSD is requesting a non-recurring General Fund appropriation of \$5,000.0 in FY27 to sustain current operations of the Linkages Supportive Housing Program. This program provides rental assistance and supportive services to individuals experiencing homelessness or precarious housing, including those with serious mental illness (SMI) or co-occurring conditions.

FY26 non-recurring funding of \$5,000.0 allowed BHSD to maintain statewide housing stability and recovery supports for this high-need population. Continued funding is essential to prevent service disruptions, housing displacement, and negative impacts on client recovery. This request is not for program expansion but to preserve existing capacity and ensure continuity of care. Linkages remain a critical tool in reducing reliance on emergency systems and promoting long-term housing stability for some of New Mexico's most vulnerable residents.

P-1 Program Overview

BU PCode
63000 P767

Competency Evaluation & Assisted Outpatient Treatment Mandate

BHSD is requesting a non-recurring General Fund appropriation of \$2,000.0 in FY27 to support costs associated with Competency to Stand Trial (CST) examinations, testing, and court-ordered testimony conducted by contracted forensic examiners. BHSD relies entirely on external forensic professionals to fulfill these legal mandates.

Time and costs associated with CST evaluations are expected to increase due to requirements outlined in House Bill 8 (HB8), as well as the need to navigate evolving court interpretations related to CST reports, involuntary commitment, and Assisted Outpatient Treatment (AOT). This funding is critical to ensure timely and accurate forensic evaluations in com

Programmatic Changes:

Administrative Services Organization

BHSD's funding is administered by Falling Colors Inc., the designated Administrative Services Organization. Falling Colors administers designated behavioral health provider contracts that are approved by BHSD. Currently there are over 500 contracts for delivery of prevention, treatment, and recovery services.

Base Budget Justification:

Behavioral Health Services Division (BHSD Administration)

BHSD is requesting a General Fund increase of \$696.4 to support five positions previously funded by a one-time federal grant, as well as to cover increased insurance premiums.

-Salaries and Benefits

In addition to the increase, the request includes a \$2,000.0 General Fund realignment, shifting funds from contractual services to personnel, to ensure adequate budget authority for payroll and benefits. This realignment does not represent new funding, but rather reflects updated funding trends and the need to stabilize support for personnel costs considering evolving federal funding limitations for personnel costs.

-Contractual Services reflect an overall increase of \$300.0 all federal funds which is due a slight increase to federal grants.

-Other Services will remain flat to FY26 at \$1,209.4

Behavioral Health Services Division (BHSD) Program

BHSD is requesting \$12,288.0 General Fund increase for the Program Budget. This includes:

-The contractual services category reflects an overall increase of \$9,900.0, or 10.8%, primarily due to the proposed shift to fully fund 988 Suicide & Crisis Lifeline operations within the recurring operating budget beginning in FY27.

This includes a General Fund increase of \$9,000.0 to supplement lower-than-expected revenue from the 988 Lifeline Fund created by Senate Bill 535. Along with \$3,600.0 in new budget authority established in the Other Transfers category to reflect surcharge revenue anticipated to begin in FY26, these amounts together total \$12,600.0—

representing BHSD's estimated cost to build a comprehensive and effective statewide 988 program. This funding strategy is essential to sustain 988 operations and eliminate reliance on ongoing special appropriations.

-Other services reflect an overall increase of \$179.5 all federal funds which is related to an increase in various GSAs.

R-2 Transfers
(Dollars in Thousands)

Prov PCode	Prov Fund	Prov Account	Prov Account Name	Rec PCode	Rec Fund	Rec Account	Rec Account Name	2024-25 Actual Transfers	2025-26 Adopted Transfers	2026-27 Agency GF	2026-27 Agency OSF	2026-27 Agency ISF/IAT	2026-27 Agency FF	2026-27 Total Request	Justification
P519	06100	555106	OFU - INTRA	P524	97600	499906	OFS - INTRA	0	0	0	0	0	0	0	
P519	97600	555106	OFU - INTRA	P524	97600	499906	OFS - INTRA	0	0	0	0	0	0	0	
Sum:									0	0	0	0	0	0	

R-2 Transfers
(Dollars in Thousands)

Prov PCode	Prov Fund	Prov Account	Prov Account Name	Rec PCode	Rec Fund	Rec Account	Rec Account Name	2024-25 Actual Transfers	2025-26 Adopted Transfers	2026-27 Agency GF	2026-27 Agency OSF	2026-27 Agency ISF/IAT	2026-27 Agency FF	2026-27 Total Request	Justification
P523	05200	535309	Other Service	P002	06100	425909	Other Service	0	0	80	0	0	0	80	
P523	05200	535309	Other Service	P231	91800	425909	Other Service	0	0	151.4	0	0	0	151.4	
P523	05200	535309	Other Service	P231	91800	451909	Federal Contr	0	0	0	0	0	293.8	293.8	
P523	05200	535309	Other Service	P232	67900	425909	Other Service	0	0	241.1	0	0	0	241.1	
P523	05200	535309	Other Service	P232	67900	451909	Federal Contr	0	0	0	0	0	468.1	468.1	
P523	05200	535309	Other Service	P233	92400	425909	Other Service	0	0	198	0	0	0	198	
P523	05200	535309	Other Service	P233	92400	451909	Federal Contr	0	0	0	0	0	384.3	384.3	
P523	05200	535309	Other Service	P234	14400	425909	Other Service	0	0	152.1	0	0	0	152.1	
P523	05200	535309	Other Service	P234	14400	451909	Federal Contr	0	0	0	0	0	295.3	295.3	
P523	05200	535309	Other Service	P237	52200	425909	Other Service	0	0	107.3	0	0	0	107.3	
P523	05200	535309	Other Service	P237	52200	451909	Federal Contr	0	0	0	0	0	208.2	208.2	
P523	05200	535309	Other Service	P239	92700	425909	Other Service	0	0	48.9	0	0	0	48.9	
P523	05200	535309	Other Service	P239	92700	451909	Federal Contr	0	0	0	0	0	95	95	
P523	05200	535309	Other Service	P241	15100	425909	Other Service	0	0	127.9	0	0	0	127.9	
P523	05200	535309	Other Service	P241	15100	451909	Federal Contr	0	0	0	0	0	248.4	248.4	
P523	05200	535309	Other Service	P243	15300	425909	Other Service	0	0	121.7	0	0	0	121.7	
P523	05200	535309	Other Service	P243	15300	451909	Federal Contr	0	0	0	0	0	236.1	236.1	
P523	05200	535309	Other Service	P778	32900	425909	Other Service	0	0	453	0	0	0	453	
Sum:									0	1,681.4	0	0	2,229.2	3,910.6	

R-2 Transfers
(Dollars in Thousands)

Prov PCode	Prov Fund	Prov Account	Prov Account Name	Rec PCode	Rec Fund	Rec Account	Rec Account Name	2024-25 Actual Transfers	2025-26 Adopted Transfers	2026-27 Agency GF	2026-27 Agency OSF	2026-27 Agency ISF/IAT	2026-27 Agency FF	2026-27 Total Request	Justification
P524	05200	535309	Other Service	P527	05700	451909	Federal Contr	0	0	0	0	0	45	45	
P524	05200	535309	Other Service	P727	64700	451909	Federal Contr	0	0	0	0	0	75	75	
P524	05200	535309	Other Service	P737	64700	451909	Federal Contr	0	0	0	0	0	550	550	
P524	05200	547450	Grants to Oth	P002	06100	451909	Federal Contr	0	3,000	0	0	0	10,157.3	10,157.3	
P524	05200	547450	Grants to Oth	P576	06700	451909	Federal Contr	0	0	0	0	0	1,000	1,000	
P524	05200	547450	Grants to Oth	P577	06700	451909	Federal Contr	0	0	0	0	0	1,388.7	1,388.7	
P524	05200	547450	Grants to Oth	P578	06700	451909	Federal Contr	0	0	0	0	0	1,389.4	1,389.4	
P524	05200	547450	Grants to Oth	P592	04900	451909	Federal Contr	0	0	0	0	0	900	900	
P524	05200	547450	Grants to Oth	P593	04900	451909	Federal Contr	0	-400	0	0	0	2,200	2,200	
P524	05200	547450	Grants to Oth	P595	04900	451909	Federal Contr	0	400	0	0	0	400	400	
P524	05200	547450	Grants to Oth	P622	20790	451909	Federal Contr	0	0	0	0	0	700	700	
P524	05200	547450	Grants to Oth	P800	06700	451909	Federal Contr	0	593.6	0	0	0	2,133.7	2,133.7	
P524	97500	547450	Grants to Oth	P002	06100	451909	Federal Contr	0	0	0	0	0	0	0	
								Sum:	3,593.6	0	0	0	20,939.1	20,939.1	

R-2 Transfers
(Dollars in Thousands)

Prov PCode	Prov Fund	Prov Account	Prov Account Name	Rec PCode	Rec Fund	Rec Account	Rec Account Name	2024-25 Actual Transfers	2025-26 Adopted Transfers	2026-27 Agency GF	2026-27 Agency OSF	2026-27 Agency ISF/IAT	2026-27 Agency FF	2026-27 Total Request	Justification
P525	05200	547450	Grants to Oth	P002	06100	451909	Federal Contr	0	-524	0	0	0	0	0	
P525	97500	547450	Grants to Oth	9251	79000	451909	Federal Contr	0	0	0	0	0	500	500	
P525	97500	547450	Grants to Oth	P002	06100	425909	Other Service	0	247.2	0	0	0	539.9	539.9	
P525	97500	547450	Grants to Oth	P002	06100	451909	Federal Contr	0	0	0	0	0	774.7	774.7	
P525	97500	547450	Grants to Oth	P505	10990	425909	Other Service	0	0	0	0	0	5,000	5,000	
P525	97500	547450	Grants to Oth	P578	06700	451909	Federal Contr	0	0	0	0	0	17,798.6	17,798.6	
P525	97500	547450	Grants to Oth	P623	20790	451909	Federal Contr	0	0	0	0	0	31,527.5	31,527.5	
P525	97500	547450	Grants to Oth	P778	32900	425909	Other Service	0	-111.3	0	0	0	13,288.3	13,288.3	
P525	97600	547450	Grants to Oth	P002	06100	425909	Other Service	0	-915.4	0	0	0	1,012.2	1,012.2	

Health Care Authority Department

BU
63000

State of New Mexico

R-2 Transfers
(Dollars in Thousands)

Prov PCode	Prov Fund	Prov Account	Prov Account Name	Rec PCode	Rec Fund	Rec Account	Rec Account Name	2024-25 Actual Transfers	2025-26 Adopted Transfers	2026-27 Agency GF	2026-27 Agency OSF	2026-27 Agency ISF/IAT	2026-27 Agency FF	2026-27 Total Request	Justification
P525	97600	547450	Grants to Oth	P002	06100	451909	Federal Conti	0	1,439.4	0	0	0	0	0	
Sum:									135.9	0	0	0	70,441.2	70,441.2	

Health Care Authority Department

BU
63000

State of New Mexico

R-2 Transfers
(Dollars in Thousands)

Prov PCode	Prov Fund	Prov Account	Prov Account Name	Rec PCode	Rec Fund	Rec Account	Rec Account Name	2024-25 Actual Transfers	2025-26 Adopted Transfers	2026-27 Agency GF	2026-27 Agency OSF	2026-27 Agency ISF/IAT	2026-27 Agency FF	2026-27 Total Request	Justification
P762	72420	555106	OFU - INTRA	P524	05200	499906	OFS - INTRA	0	-30,000	0	0	0	0	0	
P762	72420	555106	OFU - INTRA	P524	97600	499906	OFS - INTRA	0	30,000	0	0	0	0	0	
Sum:									0	0	0	0	0	0	

Health Care Authority Department

BU
63000

State of New Mexico

R-2 Transfers
(Dollars in Thousands)

Prov PCode	Prov Fund	Prov Account	Prov Account Name	Rec PCode	Rec Fund	Rec Account	Rec Account Name	2024-25 Actual Transfers	2025-26 Adopted Transfers	2026-27 Agency GF	2026-27 Agency OSF	2026-27 Agency ISF/IAT	2026-27 Agency FF	2026-27 Total Request	Justification
P767	05200	547450	Grants to Oth	P003	06100	451909	Federal Contr	0	-94.8	0	0	0	0	0	
P767	05200	547450	Grants to Oth	P006	06100	451909	Federal Conti	0	-720	0	0	0	0	0	
P767	05200	547450	Grants to Oth	P800	06700	451909	Federal Contr	0	-31.7	0	0	0	0	0	
P767	24810	547450	Grants to Oth	P001	06100	451909	Federal Conti	0	125	0	0	0	125	125	
P767	24810	547450	Grants to Oth	P003	06100	451909	Federal Contr	0	94.8	0	0	0	94.8	94.8	
P767	24810	547450	Grants to Oth	P006	06100	451909	Federal Conti	0	720	0	4	0	716	720	
P767	24810	547450	Grants to Oth	P800	06700	451909	Federal Contr	0	31.7	0	0	0	31.7	31.7	
Sum:									125	0	4	0	967.5	971.5	

REV EXP COMPARISON

(Dollars in Thousands)

63000 - Health Care Authority Department

	General Fund	Other Funds	Other Transfers	Federal Funds	Total
SOURCES	2,255,186.1	1,098,943.2	904,950.5	10,746,493.1	15,005,572.9
Personal services and employee benefits	117,065.2	8,579.9	400.0	147,936.5	273,981.6
Contractual services	211,963.5	52,598.0	6,895.3	339,025.9	610,482.7
Other	1,555,732.6	1,037,765.3	897,655.2	10,259,530.7	13,750,683.8
Other financing uses	370,424.8	0.0	0.0	0.0	370,424.8
USES Total:	2,255,186.1	1,098,943.2	904,950.5	10,746,493.1	15,005,572.9
Net:	0.0	0.0	0.0	0.0	0.0

REV EXP COMPARISON

(Dollars in Thousands)

63000 - Health Care Authority Department

P519 - Developmental Disabilities Support

	General Fund	Other Funds	Other Transfers	Federal Funds	Total
SOURCES Totals	394,310.0	332.0	0.0	19,163.9	413,805.9
Personal services and employee benefits	10,176.2	0.0	0.0	10,176.2	20,352.4
Contractual services	6,325.0	0.0	0.0	6,324.0	12,649
Other	7,384.0	332.0	0.0	2,663.7	10,379.7
Other financing uses	370,424.8	0.0	0.0	0.0	370,424.8
USES Total:	394,310.0	332.0	0.0	19,163.9	413,805.9
Net:	0.0	0.0	0.0	0.0	0.0

REV EXP COMPARISON

(Dollars in Thousands)

63000 - Health Care Authority Department

P520 - Health Improvement

	General Fund	Other Funds	Other Transfers	Federal Funds	Total
SOURCES Totals	16,291.9	2,703.7	0.0	15,883.3	34,878.9
Personal services and employee benefits	13,361.5	2,528.6	0.0	13,199.2	29,089.3
Contractual services	882.0	0.0	0.0	1,092.0	1,974
Other	2,048.4	175.1	0.0	1,592.1	3,815.6
USES Total:	16,291.9	2,703.7	0.0	15,883.3	34,878.9
Net:	0.0	0.0	0.0	0.0	0.0

REV EXP COMPARISON

(Dollars in Thousands)

63000 - Health Care Authority Department

P521 - State Health Benefits

	General Fund	Other Funds	Other Transfers	Federal Funds	Total
SOURCES Totals	0.0	660,208.1	0.0	0.0	660,208.1
Contractual services	0.0	38,475.7	0.0	0.0	38,475.7
Other	0.0	621,732.4	0.0	0.0	621,732.4
USES Total:	0.0	660,208.1	0.0	0.0	660,208.1
Net:	0.0	0.0	0.0	0.0	0.0

REV EXP COMPARISON

(Dollars in Thousands)

63000 - Health Care Authority Department

P522 - Program Support

	General Fund	Other Funds	Other Transfers	Federal Funds	Total
SOURCES Totals	58,119.8	4,000.0	2,300.0	74,537.8	138,957.6
Personal services and employee benefits	14,937.7	3,275.5	0.0	19,377.4	37,590.6
Contractual services	30,238.6	404.6	2,300.0	36,117.0	69,060.2
Other	12,943.5	319.9	0.0	19,043.4	32,306.8
USES Total:	58,119.8	4,000.0	2,300.0	74,537.8	138,957.6
Net:	0.0	0.0	0.0	0.0	0.0

REV EXP COMPARISON

(Dollars in Thousands)

63000 - Health Care Authority Department

P523 - Child Support Enforcement

	General Fund	Other Funds	Other Transfers	Federal Funds	Total
SOURCES Totals	15,470.7	597.4	0.0	33,838.8	49,906.9
Personal services and employee benefits	10,736.3	0.0	0.0	23,357.2	34,093.5
Contractual services	2,969.9	597.4	0.0	7,055.9	10,623.2
Other	1,764.5	0.0	0.0	3,425.7	5,190.2
USES Total:	15,470.7	597.4	0.0	33,838.8	49,906.9
Net:	0.0	0.0	0.0	0.0	0.0

REV EXP COMPARISON

(Dollars in Thousands)

63000 - Health Care Authority Department

P524 - Medical Assistance

	General Fund	Other Funds	Other Transfers	Federal Funds	Total
SOURCES Totals	1,283,577.3	225,603.6	895,803.0	8,177,537.3	10,582,521.2
Personal services and employee benefits	11,882.6	1,695.3	0.0	15,517.7	29,095.6
Contractual services	44,004.0	10,750.8	759.9	161,749.4	217,264.1
Other	1,227,690.7	213,157.5	895,043.1	8,000,270.2	10,336,161.5
USES Total:	1,283,577.3	225,603.6	895,803.0	8,177,537.3	10,582,521.2
Net:	0.0	0.0	0.0	0.0	0.0

REV EXP COMPARISON

(Dollars in Thousands)

63000 - Health Care Authority Department**P525 - Income Support**

	General Fund	Other Funds	Other Transfers	Federal Funds	Total
SOURCES Totals	157,828.5	60.8	0.0	1,456,436.4	1,614,325.7
Personal services and employee benefits	49,229.3	0.0	0.0	65,142.2	114,371.5
Contractual services	58,535.6	0.0	0.0	90,161.2	148,696.8
Other	50,063.6	60.8	0.0	1,301,133.0	1,351,257.4
USES Total:	157,828.5	60.8	0.0	1,456,436.4	1,614,325.7
Net:	0.0	0.0	0.0	0.0	0.0

REV EXP COMPARISON

(Dollars in Thousands)

63000 - Health Care Authority Department**P762 - Health Care Affordability Fund**

	General Fund	Other Funds	Other Transfers	Federal Funds	Total
SOURCES Totals	0.0	205,264.1	0.0	0.0	205,264.1
Personal services and employee benefits	0.0	1,080.5	0.0	0.0	1,080.5
Contractual services	0.0	2,200.0	0.0	0.0	2,200
Other	0.0	201,983.6	0.0	0.0	201,983.6
Other financing uses	0.0	0.0	0.0	0.0	0
USES Total:	0.0	205,264.1	0.0	0.0	205,264.1
Net:	0.0	0.0	0.0	0.0	0.0

REV EXP COMPARISON

(Dollars in Thousands)

63000 - Health Care Authority Department**P766 - Medicaid Behavioral Health**

	General Fund	Other Funds	Other Transfers	Federal Funds	Total
SOURCES Totals	256,390.0	0.0	3,247.5	934,911.5	1,194,549.0
Personal services and employee benefits	0.0	0.0	400.0	400.0	800
Contractual services	3,941.0	0.0	235.4	4,176.4	8,352.8
Other	252,449.0	0.0	2,612.1	930,335.1	1,185,396.2
USES Total:	256,390.0	0.0	3,247.5	934,911.5	1,194,549.0
Net:	0.0	0.0	0.0	0.0	0.0

REV EXP COMPARISON

(Dollars in Thousands)

63000 - Health Care Authority Department**P767 - Behavioral Health Services**

	General Fund	Other Funds	Other Transfers	Federal Funds	Total
SOURCES Totals	73,197.9	173.5	3,600.0	34,184.1	111,155.5
Personal services and employee benefits	6,741.6	0.0	0.0	766.6	7,508.2
Contractual services	65,067.4	169.5	3,600.0	32,350.0	101,186.9
Other	1,388.9	4.0	0.0	1,067.5	2,460.4
USES Total:	73,197.9	173.5	3,600.0	34,184.1	111,155.5
Net:	0.0	0.0	0.0	0.0	0.0

Detail of Federal Funds Revenue (numbers in thousands)

Agency: Health Care Authority
 BU: 63000
 Program: Developmental Disabilities Services Division
 Program Code: P519

FUND	REVENUE ACCOUNT	GRANT NAME	MATCH RATIO	EXP. DATE	TOTAL GRANT AMOUNT	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST		
								BASE	EXPANSION	TOTAL
05200	451903	Medicaid	50/50	N/A*	0.0	14,762.8	18,037.2	19,163.9		19,163.9
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
TOTALS						14,762.8	18,037.2	19,163.9	0.00	19,163.9

* Medicaid Grant is Based on Eligibility, Therefore there is No Expiration Date.

Detail of Federal Funds Revenue (numbers in thousands)

Agency: Health Care Authority
 BU: 63000
 Program: Child Support Services Division
 Program Code: P523

FUND	REVENUE ACCOUNT	GRANT NAME	GF/FED MATCH RATIO	EXP. DATE	TOTAL GRANT AMOUNT	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST		TOTAL
								BASE	EXPANSION	
05200	451903	CSSD Fed Grant 2401NMSCSS	34/66			26,152.8	28,509.7	31,107.0	0.0	31,107.0
05200	453001	Child Support Incentives	0/100			1,970.9	5,143.2	2,731.8		2,731.8
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
TOTALS						28,123.7	33,652.9	33,838.8	0.00	33,838.8

Detail of Federal Funds Revenue (numbers in thousands)

Agency: Health Care Authority
 BU: 63000
 Program: MAD Admin and Program
 Program Code: P524

25.01

FUND	REVENUE ACCOUNT	GRANT NAME	EXP. DATE	TOTAL GRANT AMOUNT	FY25 ACTUALS		FY26 OPBUD		FY27 REQUEST		TOTAL				
					MATCH RATIO	FY25 ACTUALS	MATCH RATIO	FY26 OPBUD	MATCH RATIO	BASE		FY27 REQUEST EXPANSION			
05200	451903	Medicaid Admin	n/a	Not applicable*	50/50	16,470.4	50/50	22,256.5	50/50	30,123.7	4,352.5	34,476.2			
05200	451903	Medicaid Admin	n/a	Not applicable*	75/25	42,613.1	75/25	57,583.0	75/25	77,937.7		77,937.7			
05200	451904	Medicaid Admin	n/a	Not applicable*	90/10	0.0	90/10	0.0	90/10	0.0		0.0			
05200	451903	Medicaid Admin	n/a	Not applicable*	100%**	47,715.6	100%**	64,478.0	100%**	87,269.9		87,269.9			
05200	451903	Medicaid Admin	n/a	Not applicable*	83/17***	0.0	82/18***	0.0	81/17***	0.0		0.0			
97600	451903	Medicaid Program	n/a	Not applicable*	82.37/17.63 ¹	638,312.9	81.42/18.58 ¹	862,550.7	81.42/18.58 ¹	794,200.0		794,200.0			
97600	451903	Medicaid Program	n/a	Not applicable*	71.77/28.23 ²	641,766.7	71.53/28.47 ²	867,217.8	71.53/28.47 ²	798,497.3		798,497.3			
97600	451903	Medicaid Program	n/a	Not applicable*	78.91/21.09 ³	4,351,681.2	78.80/21.20 ³	5,880,416.5	78.80/21.20 ³	5,414,437.5		5,414,437.5			
97600	451903	Medicaid Program	n/a	Not applicable*	50.50/49.50 ⁴	125,622.4	50.55/49.45 ⁴	169,753.3	50.55/49.45 ⁴	156,301.6		156,301.6			
97600	451903	Medicaid Program	n/a	Not applicable*	3	620,693.6	75/25	838,741.8	75/25	772,277.8		772,277.8			
97600	451903	Medicaid Program	n/a	Not applicable*		33,868.0	72.37/27.63	45,765.8	72.37/27.63	42,139.2		42,139.2			
*This federal funding is based on eligible therefore it is not appropriate to provide a grand total											0.0				
**In MAD Admin this 100% presents a passthru of federal funds where another entity will be providing the matching funds											0.0				
***Blended Rate for MAD Admin CHIP and Enhanced											0.0				
****Blended Rate for Medicaid Title XIX											0.0				
¹ Blended rate for Medicaid Fee for Service (FFS)											0.0				
² Blended rate for Medicaid Waivers											0.0				
³ Blended rate for Medicaid Turquoise Healthcare											0.0				
⁴ Blended rate for Medicare Part A, Part B, Part D											0.0				
TOTALS											6,518,744.00	8,808,763.40	8,173,184.80	4,352.50	8,177,537.30

Detail of Federal Funds Revenue (numbers in thousands)

Agency: Health Care Authority
 BU: 63000
 Program: Income Support Division (Administrative Budget)
 Program Code: P525

FUND	REVENUE ACCOUNT	GRANT NAME	Current MATCH			FY25 ACTUALS	FY26 OPBUD	FY27 MATCH RATIO	FY27 REQUEST		
			RATIO	EXP. DATE	TOTAL GRANT AMOUNT				BASE	EXPANSION	TOTAL
5200	451903	ASPEN M&O	67%	n/a	Not Applicable	8.7	17.8	58%	87.0		87.0
5200	451903	Commodity Distribution (Child Nutrition)	100%	Annual	1,337.6	356.1	560.7	100%	409.6		409.6
5200	451903	Commodity Supplemental Food Program	100%	Annual	1,034.7	89.9	113.5	100%	104.6		104.6
5200	451903	Community Services Block Grant	100%	Annual	6,387.3	216.0	268.6	100%	330.6		330.6
5200	451903	Electronic Benefits Transfer	52%	n/a	Not Applicable	704.6	937.7	52%	1,125.8		1,125.8
5200	451903	Federal Indirect RCNT50/P	51%	n/a	Not Applicable	7,396.5	5,887.5	51%	6,943.7		6,943.7
5200	451903	Federal Indirect RCOUNT	67.4%	n/a	Not Applicable	85,271.5	119,795.1	58.0%	98,906.0	24,510.0	123,416.0
5200	451903	Low Income Home Energy Assistance Program	100%	Annual	40,567.9	913.6	637.6	100%	6,405.6		6,405.6
5200	451903	Low Income Home Energy Assistance Program Emergency Supplemental	100%	9/30/2024	-	0.0	0.0	100%	2,054.4		2,054.4
5200	451903	Low Income Home Energy Assistance Program Infrastructure	100%	9/30/2025	517.7	4.4	9.3	100%	132.9		132.9
5200	451903	Medicaid 90/10	75%	n/a	Not Applicable	50.8	62.3	75%	59.5		59.5
5200	451903	Medicaid Case Support Unit	75%	n/a	Not Applicable	504.2	618.9	75%	590.9		590.9
5200	451903	Medicaid 50/50	50%	n/a	Not Applicable	27.4	33.6	50%	32.1		32.1
5200	451903	Refugee Admin	100%	Annual	4,709.8	795.7	541.6	100%	403.2		403.2
5200	451903	SNAP EBT	50%	9/30/2026	4,351.4	3,502.0	3,209.6	25%	5,637.0		5,637.0
5200	451903	SNAP Employment and Training	100%	Annual	222.5	937.8	324.9	50%	451.3		451.3
5200	451903	SNAP ET NSC	100%	9/30/2026	30.0	5.1	10.5	50%	6.8		6.8
5200	451903	SNAP Nutrition Ed	50%	Annual	5,210.7	780.1	1,213.9	25%	545.9		545.9
5200	451903	SNAP Outreach	100%	9/30/2025	100.0	60.8	0.0	50%	38.4		38.4
5200	451903	Temporary Assistance for Needy Families	100%	9/30/2025	124,399.9	1,908.9	4,880.1	100%	8,175.2		8,175.2
5200	451903	The Emergency Food Assistance Program Annual	100%	Annual	612.1	935.4	0.0	100%	0.0		0.0
5200	451903	The Emergency Food Assistance Program CCC	100%	9/30/2024	606.4	439.0	0.0	100%	0.0		0.0
5200	451903	The Emergency Food Assistance Program REACH	100%	6/30/2025	924.9	622.9	0.0	100%	0.0		0.0
5200	451903	Time and Effort	50%	n/a	Not Applicable	1,290.7	1,583.0	50%	1,511.4		1,511.4
TOTALS						106,762.0	140,706.3		133,952.0	24,510.0	158,462.0

Detail of Federal Funds Revenue (numbers in thousands)

Agency: HCA
 BU: 63000
 Program: ISD PROGRAM
 Program Code: P525

FUND	REVENUE ACCOUNT	GRANT NAME	MATCH RATIO	EXP. DATE	TOTAL GRANT AMOUNT	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST		
								BASE	EXPANSION	TOTAL
97500	451903	TANF	100%	continuous	124,399.9	104,606.0	127,266.6	127,266.6	-	127,266.6
97500	451903	SNAP	100%	continuous	N/A	1,080,483.8	1,106,706.2	1,106,956.2		1,106,956.2
97500	451903	TEFAP	100%	continuous	2,143.4	-	1,388.5	1,388.5		1,388.5
97500	451903	CSBG Block Grant	100%	continuous	6,387.3	4,047.3	4,117.1	4,117.1		4,117.1
97500	451903	CSFP	100%	continuous	2,304.1	1,188.4	1,300.0	1,300.0		1,300.0
97500	0	CSFP Commodities	100%	N/A	N/A	36,968.7	25,000.0	25,000.0		25,000.0
97400	451903	LIHEAP	100%	continuous	40,567.9	19,815.6	23,877.2	23,877.2		23,877.2
97500	451903	Refugee RSS	100%	continuous	5,496.7	4,549.2	7,056.6	7,056.6		7,056.6
97600	451903	Refugee CMA	100%	continuous	4,221.9	147.0	1,012.2	1,012.2		1,012.2
										-
										-
										-
										-
										-
										-
										-
										-
										-
										-
										-
										-
										-
										-
TOTALS					185,521.2	1,251,806.0	1,297,724.4	1,297,974.4	-	1,297,974.4

Detail of Federal Funds Revenue (numbers in thousands)

Agency: Health Care Authority
 BU: 63000
 Program: Medicaid Behavioral Health
 Program Code: P766

FUND	REVENUE ACCOUNT	GRANT NAME	FY25 ACTUALS			FY26 OPBUD			FY27 REQUEST	FY26 REQUEST		TOTAL
			MATCH RATIO	EXP. DATE	TOTAL GRANT AMOUNT	FY25 ACTUALS	MATCH RATIO	FY26 OPBUD	MATCH RATIO	BASE	EXPANSION	
97600	451903	Medicaid Behavioral Health	81.63/18.37**	n/a	Not applicable*	58,446.00	87.55/12.45**	67,590.5	85.94/14.06**	84,071.4	0.0	84,071.4
97600	451903	Medicaid Behavioral Health	73.76/26.24***	n/a	Not applicable*	397,349.00	72.76/27.24***	407,319.5	72.34/27.66***	506,638.5		506,638.5
97600	451903	Medicaid Behavioral Health	90/10****	n/a	Not applicable*	257,513.0	90.25/9.75****	276,725.9	90.20/9.8****	344,201.5		344,201.5
												0.0
												0.0
												0.0
												0.0
												0.0
												0.0
												0.0
												0.0
												0.0
												0.0
*This federal funding is based on eligible therefore it is not appropriate to provide a grand total												
**Blended Rate for FFS Medicaid Behavioral Health												
***Blended Rate for Medicaid Behavioral Health Turquoise Healthcare												
****Blended Rate for Turquoise Medicaid Behavioral Health Expansion Population												
												0.0
												0.0
												0.0
TOTALS						713,308.00		751,635.90		934,911.50	0.00	934,911.50

Detail of Federal Funds Revenue (numbers in thousands)

Agency: Health Care Authority

BU: 63000

Program: Behavioral Health Services Division Program

Program Code: P767

FUND	REVENUE ACCOUNT	GRANT NAME	MATCH RATIO	EXP. DATE	TOTAL GRANT AMOUNT	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST			
								BASE	EXPANSION	TOTAL	
24810	451903	CMHS	0%	9/30/2027	5,960.0	7,873.5	5,098.7	7,873.0	0.00	7,873.0	
24810	451903	SAPT	0%	9/30/2027	10,379.4	12,786.4	9,701.3	12,115.6	0.00	12,115.6	
24810	451903	PATH	0%	6/30/2027	300.0	300.0	300.0	300.0	0.00	300.0	
24810	451903	PDO2021	0%	8/30/2026	4,250.0	776.1	850.0	144.5	0.00	144.5	
24810	451903	SPFRX	0%	9/30/2026	1,920.0	351.8	384.0	96.0	0.00	96.0	
24810	451903	SOR 2020	0%	9/30/2027	35,370.9	5,384.5	7,422.0	10,895.0	0.00	10,895.0	
24810	451903	NMRECAST	0%	9/29/2026	4,000.0	705.2	500.0	250.0	0.00	250.0	
24810	451903	BSCA	0%	9/30/2026	327.0	188.7	161.8	81.8	0.00	81.8	
24810	451903	NM Success	0%	9/30/2026	800.0	284.8	681.0	800.0	0.0	800.0	
24810	451903	NASMHPD	0%	Continous	11.6	0.0	11.6	11.6	0.0	11.6	
										0.0	
										0.0	
										0.0	
										0.0	
										0.0	
										0.0	
										0.0	
										0.0	
										0.0	
										0.0	
										0.0	
TOTALS							28,651.0	25,110.4	32,567.5	0.0	32,567.5

Detail of Federal Funds Revenue (numbers in thousands)

Agency: Health Care Authority
 BU: 63000
 Program: Behavioral Health Services Division Program
 Program Code: P767

FUND	REVENUE ACCOUNT	GRANT NAME	MATCH RATIO	EXP. DATE	TOTAL GRANT AMOUNT	FY25 ACTUALS	FY26 OPBUD	FY27 REQUEST		
								BASE	EXPANSION	TOTAL
24810	451903	CMHS	0%	9/30/2027	5,960.0	7,873.5	5,098.7	7,873.0	0.00	7,873.0
24810	451903	SAPT	0%	9/30/2027	10,379.4	12,786.4	9,701.3	12,115.6	0.00	12,115.6
24810	451903	PATH	0%	6/30/2027	300.0	300.0	300.0	300.0	0.00	300.0
24810	451903	PDO2021	0%	8/30/2026	4,250.0	776.1	850.0	144.5	0.00	144.5
24810	451903	SPFRX	0%	9/30/2026	1,920.0	351.8	384.0	96.0	0.00	96.0
24810	451903	SOR 2020	0%	9/30/2027	35,370.9	5,384.5	7,422.0	10,895.0	0.00	10,895.0
24810	451903	NMRECAST	0%	9/29/2026	4,000.0	705.2	500.0	250.0	0.00	250.0
24810	451903	BSCA	0%	9/30/2026	327.0	188.7	161.8	81.8	0.00	81.8
24810	451903	NM Success	0%	9/30/2026	800.0	284.8	681.0	800.0	0.0	800.0
24810	451903	NASMHPD	0%	Continuous	11.6	0.0	11.6	11.6	0.0	11.6
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
										0.0
TOTALS						28,651.0	25,110.4	32,567.5	0.0	32,567.5

EB-1 Expansion Justifications
(Dollars in Thousands)

Rate Increase (2025 HMA Rate Study Estimate)

Rank: 2

New Initiative	2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/ IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
General Fund Transfers	47000.0	0.0	0.0	0.0	47000.0	0.0
REVENUE, TRANSFERS	47000.0	0.0	0.0	0.0	47000.0	0.0
Other financing uses	47000.0	0.0	0.0	0.0	47000.0	0.0
EXPENDITURES	47000.0	0.0	0.0	0.0	47000.0	0.0

Brief Description:

In 2023, through House Bill (HB) 395, the NM Developmental Disabilities Act was updated requiring DDSD to perform an independent cost study every 2 years to recommend reimbursement rates for all service providers. DDSD is currently engaged in a Rate Study that will yield suggested rate increases for providers for services provided to the Home and Community Based Waiver Participants.

Legislative Change: ___

Session Law Citation:

Legal Settlement: ___

Case Number or Citation:

Health Improvement

State of New Mexico

BU PCode Department
63000 P520 000000

EB-1 Expansion Justifications
(Dollars in Thousands)

Licensing Bureau

Rank: 2

New Initiative	2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/ IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
General Fund Transfers	1100.5	0.0	0.0	0.0	1100.5	0.0
Federal Revenues	0.0	0.0	0.0	1100.5	1100.5	0.0
REVENUE, TRANSFERS	1100.5	0.0	0.0	1100.5	2201.0	0.0
Personal services and employee t	950.0	0.0	0.0	950.0	1900.0	0.0
Contractual services	0.5	0.0	0.0	0.5	1.0	0.0
Other	150.0	0.0	0.0	150.0	300.0	0.0
EXPENDITURES	1100.5	0.0	0.0	1100.5	2201.0	0.0

Brief Description:

Today, children's behavioral health facility licensure/survey/certification sits at CYFD while adult BH oversight sits at HCA DHI—forcing mixed-population providers to navigate two agencies, duplicative surveys, and uneven timelines. Consolidating children's BH oversight into HCA DHI creates a single point of accountability and a lifespan approach, reducing provider burden, speeding corrective actions, standardizing quality and safety expectations, and giving families clearer, more transparent information about who regulates their child's care. (This budget request is made per the request of the Governor's Office and in consultation with CYFD).

Legislative Change: —

Session Law Citation:

Legal Settlement: —

Case Number or Citation:

Program Support

State of New Mexico

BU PCode Department
63000 P522 000000

EB-1 Expansion Justifications
(Dollars in Thousands)

Federal Change Implementation Department-wide Project Management

Rank: 1

New Initiative	2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/ IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
General Fund Transfers	1500.0	0.0	0.0	0.0	1500.0	0.0
Federal Revenues	0.0	0.0	0.0	1600.0	1600.0	0.0
REVENUE, TRANSFERS	1500.0	0.0	0.0	1600.0	3100.0	0.0
Contractual services	1500.0	0.0	0.0	1600.0	3100.0	0.0
EXPENDITURES	1500.0	0.0	0.0	1600.0	3100.0	0.0

Brief Description:

By sustaining the FY26-launched HR1 project management and governance activities, HCA will achieve federal milestones on time and in full compliance while minimizing unnecessary coverage and care disruption. While some New Mexicans will lose Medicaid or SNAP due to federal eligibility changes, HCA's data-informed, member-responsive communications, and disciplined project management will help ensure eligible New Mexicans remain enrolled and maintain access to needed programs, benefits and services.

Legislative Change: _____

Session Law Citation: _____

Legal Settlement: _____

Case Number or Citation: _____

Program Support HR1

Rank: 1

New Initiative	2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/ IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
General Fund Transfers	1932.9	0.0	0.0	0.0	1932.9	0.0
Federal Revenues	0.0	0.0	0.0	5624.5	5624.5	0.0
REVENUE, TRANSFERS	1932.9	0.0	0.0	5624.5	7557.4	0.0
Other	1932.9	0.0	0.0	5624.5	7557.4	0.0
EXPENDITURES	1932.9	0.0	0.0	5624.5	7557.4	0.0

Brief Description:

Build and Maintain the Digital Foundation for HR1 Compliance

The expansion increase encompasses various expenses such as increased software licenses, hardware purchases with corresponding maintenance agreements. Several systems enhancements will be required to comply with HR1 as well as maintenance and operations support updated business needs, including but not limited to ongoing community engagement work and eligibility changes applied to existing applications

Legislative Change: _____

Session Law Citation: _____

Program Support

BU	PCode	Department
63000	P522	000000

State of New Mexico

EB-1 Expansion Justifications
(Dollars in Thousands)

Legal Settlement: —

Case Number or Citation:

EB-1 Expansion Justifications
(Dollars in Thousands)

MAD HR1 Expansion

Rank: 0

New Initiative	2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/ IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
General Fund Transfers	2859.6	0.0	0.0	0.0	2859.6	0.0
Federal Revenues	0.0	0.0	0.0	4352.5	4352.5	0.0
Other Revenues	0.0	1228.0	0.0	0.0	1228.0	0.0
REVENUE, TRANSFERS	2859.6	1228.0	0.0	4352.5	8440.1	0.0
Personal services and employee t	1196.7	1228.0	0.0	2424.7	4849.4	0.0
Contractual services	1440.3	0.0	0.0	1705.2	3145.5	0.0
Other	222.6	0.0	0.0	222.6	445.2	0.0
EXPENDITURES	2859.6	1228.0	0.0	4352.5	8440.1	0.0
Permanent	0	0	0	0	42	
FTEs	0	0	0	0	42	0

Brief Description:

The proposed funding addresses urgent compliance and processing needs resulting from federal policy changes under HR1. These changes have created new requirements for eligibility redetermination, reporting, and financial oversight functions within the Medicaid enterprise. The existing ASPEN system lacks the necessary functionality to meet these mandates, creating operational and audit risk. The proposed Financial Management module is critical to ensure continued federal match and program integrity.

Legislative Change: _____

Session Law Citation: _____

Legal Settlement: _____

Case Number or Citation: _____

Income Support

BU PCode Department
63000 P525 000000

State of New Mexico

EB-1 Expansion Justifications
(Dollars in Thousands)

ISD HR1 Expansion - Call Center

Rank: 1

New Initiative	2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/ IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
General Fund Transfers	4366.7	0.0	0.0	0.0	4366.7	0.0
Federal Revenues	0.0	0.0	0.0	6030.3	6030.3	0.0
REVENUE, TRANSFERS	4366.7	0.0	0.0	6030.3	10397.0	0.0
Contractual services	4366.7	0.0	0.0	6030.3	10397.0	0.0
EXPENDITURES	4366.7	0.0	0.0	6030.3	10397.0	0.0

Brief Description:

The new federal regulations will impact New Mexicans in several ways. Those impacted will likely contact NM HCA to understand the new requirements as well as to maintain eligibility. Call volume increases are projected as customers inquire to how the federal changes impact their accounts. Increases are estimated due stricter enforcement and newly stated work requirements as well as 6 month Medicaid recertifications. The current ISD portion of the Accenture contract is \$15,040,742.45, the increase would put the entire contract at \$24,800,190 which is an increase of \$10,397,000 with a 6% increase to account for H.R. 1 unknown population, on top of that the impact of the SNAP 50/50 increasing to 75/25 in the BBB, would increase our general fund portion by 25 % from \$3,137,991 to \$5,500,936.

Legislative Change: _____

Session Law Citation:

Legal Settlement: _____

Case Number or Citation:

ISD HR1 Expansion - 260 FTE

Rank: 1

New Initiative	2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/ IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
General Fund Transfers	13381.8	0.0	0.0	0.0	13381.8	0.0
Federal Revenues	0.0	0.0	0.0	18479.7	18479.7	0.0
REVENUE, TRANSFERS	13381.8	0.0	0.0	18479.7	31861.5	0.0
Personal services and employee t	8772.3	0.0	0.0	12114.1	20886.4	0.0
Other	4609.5	0.0	0.0	6365.6	10975.1	0.0
EXPENDITURES	13381.8	0.0	0.0	18479.7	31861.5	0.0
Permanent	0	0	0	0	260	
FTEs	0	0	0	0	260	0

Brief Description:

This expansion request for 260 FTE is to needed to meet the demands of the HR1 federal rule changes which will increase work requirements, eligibility checks, and administrative burdens across SNAP and Medicaid—rising workload, processing times, and demand on frontline services. Impacts include higher churn from ABAWD and Medicaid work rules, increased workload from 6-month renewals, and heavier lobby traffic. This staffing expansion requires additional office space, workstations, and IT equipment to ensure staff can operate effectively.

Income Support

BU	PCode	Department
63000	P525	000000

State of New Mexico

EB-1 Expansion Justifications
(Dollars in Thousands)

Legislative Change: _____

Session Law Citation:

Legal Settlement: _____

Case Number or Citation:

EB-2 Expansion Fiscal Summary
(Dollars in Thousands)

Rate Increase (2025 HMA Rate Study Estimate)

Rank: 2

		2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/ IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
111	General Fund Transfers	47000.0	0.0	0.0	0.0	47000.0	0.0
REVENUE, TRANSFERS		47000.0	0.0	0.0	0.0	47000.0	0.0
500	Other financing uses	47000.0	0.0	0.0	0.0	47000.0	0.0
EXPENDITURES		47000.0	0.0	0.0	0.0	47000.0	0.0

0.0

Health Improvement

BU PCode Department
63000 P520 000000

State of New Mexico

EB-2 Expansion Fiscal Summary
(Dollars in Thousands)

Licensing Bureau

Rank: 2

		2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/ IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
111	General Fund Transfers	1100.5	0.0	0.0	0.0	1100.5	0.0
120	Federal Revenues	0.0	0.0	0.0	1100.5	1100.5	0.0
REVENUE, TRANSFERS		1100.5	0.0	0.0	1100.5	2201.0	0.0
200	Personal services and employee benefits	950.0	0.0	0.0	950.0	1900.0	0.0
300	Contractual services	0.5	0.0	0.0	0.5	1.0	0.0
400	Other	150.0	0.0	0.0	150.0	300.0	0.0
EXPENDITURES		1100.5	0.0	0.0	1100.5	2201.0	0.0

0.0

Program Support

BU PCode Department
63000 P522 000000

State of New Mexico

EB-2 Expansion Fiscal Summary
(Dollars in Thousands)

Federal Change Implementation Department-wide Project Management

Rank: 1

		2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/ IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
111	General Fund Transfers	1500.0	0.0	0.0	0.0	1500.0	0.0
120	Federal Revenues	0.0	0.0	0.0	1600.0	1600.0	0.0
REVENUE, TRANSFERS		1500.0	0.0	0.0	1600.0	3100.0	0.0
300	Contractual services	1500.0	0.0	0.0	1600.0	3100.0	0.0
EXPENDITURES		1500.0	0.0	0.0	1600.0	3100.0	0.0

0.0

Program Support HR1

Rank: 1

		2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/ IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
111	General Fund Transfers	1932.9	0.0	0.0	0.0	1932.9	0.0
120	Federal Revenues	0.0	0.0	0.0	5624.5	5624.5	0.0
REVENUE, TRANSFERS		1932.9	0.0	0.0	5624.5	7557.4	0.0
400	Other	1932.9	0.0	0.0	5624.5	7557.4	0.0
EXPENDITURES		1932.9	0.0	0.0	5624.5	7557.4	0.0

0.0

Medical Assistance

BU PCode Department
 63000 P524 000000

State of New Mexico

EB-2 Expansion Fiscal Summary
 (Dollars in Thousands)

MAD HR1 Expansion

Rank: 0

		2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/ IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
111	General Fund Transfers	2859.6	0.0	0.0	0.0	2859.6	0.0
120	Federal Revenues	0.0	0.0	0.0	4352.5	4352.5	0.0
130	Other Revenues	0.0	1228.0	0.0	0.0	1228.0	0.0
REVENUE, TRANSFERS		2859.6	1228.0	0.0	4352.5	8440.1	0.0
200	Personal services and employee benefits	1196.7	1228.0	0.0	2424.7	4849.4	0.0
300	Contractual services	1440.3	0.0	0.0	1705.2	3145.5	0.0
400	Other	222.6	0.0	0.0	222.6	445.2	0.0
EXPENDITURES		2859.6	1228.0	0.0	4352.5	8440.1	0.0
810	Permanent	0	0	0	0	42	0.0
FTEs		0	0	0	0	42	0

Income Support

BU PCode Department
63000 P525 000000

State of New Mexico

EB-2 Expansion Fiscal Summary
(Dollars in Thousands)

ISD HR1 Expansion - Call Center

Rank: 1

		2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/ IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
111	General Fund Transfers	4366.7	0.0	0.0	0.0	4366.7	0.0
120	Federal Revenues	0.0	0.0	0.0	6030.3	6030.3	0.0
REVENUE, TRANSFERS		4366.7	0.0	0.0	6030.3	10397.0	0.0
300	Contractual services	4366.7	0.0	0.0	6030.3	10397.0	0.0
EXPENDITURES		4366.7	0.0	0.0	6030.3	10397.0	0.0

0.0

ISD HR1 Expansion - 260 FTE

Rank: 1

		2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/ IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
111	General Fund Transfers	13381.8	0.0	0.0	0.0	13381.8	0.0
120	Federal Revenues	0.0	0.0	0.0	18479.7	18479.7	0.0
REVENUE, TRANSFERS		13381.8	0.0	0.0	18479.7	31861.5	0.0
200	Personal services and employee benefits	8772.3	0.0	0.0	12114.1	20886.4	0.0
400	Other	4609.5	0.0	0.0	6365.6	10975.1	0.0
EXPENDITURES		13381.8	0.0	0.0	18479.7	31861.5	0.0
810	Permanent	0	0	0	0	260	0.0
FTEs		0	0	0	0	260	0

EB-3 Expansion Line Item Detail
(Dollars in Thousands)

Rate Increase (2025 HMA Rate Study Estimate)

Rank: 2

		2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
555100	Other Financing Uses	47000.0	0.0	0.0	0.0	47000.0	0.0
500	Other financing uses	47000.0	0.0	0.0	0.0	47000.0	0.0
Total for Rate Increase (2025 HMA Rate Study Estimate)		47000.0	0.0	0.0	0.0	47000.0	0.0

Health Improvement

State of New Mexico

BU PCode Department
 63000 P520 000000

EB-3 Expansion Line Item Detail
 (Dollars in Thousands)

Licensing Bureau

Rank: 2

		2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
520300	Classified Perm Positions F/T	950.0	0.0	0.0	950.0	1900.0	0.0
200	Personal services and employee benefits	950.0	0.0	0.0	950.0	1900.0	0.0
535200	Professional Services	0.5	0.0	0.0	0.5	1.0	0.0
300	Contractual services	0.5	0.0	0.0	0.5	1.0	0.0
542100	Employee I/S Mileage & Fares	25.0	0.0	0.0	25.0	50.0	0.0
546400	Rent Of Land & Buildings	125.0	0.0	0.0	125.0	250.0	0.0
400	Other	150.0	0.0	0.0	150.0	300.0	0.0
Total for Licensing Bureau		1100.5	0.0	0.0	1100.5	2201.0	0.0

Program Support

State of New Mexico

BU PCode Department
63000 P522 000000

EB-3 Expansion Line Item Detail
(Dollars in Thousands)

Federal Change Implementation Department-wide Project Management

Rank: 1

		2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
535200	Professional Services	1500.0	0.0	0.0	1600.0	3100.0	0.0
300	Contractual services	1500.0	0.0	0.0	1600.0	3100.0	0.0
Total for Federal Change Implementation Department-wide Project Management		1500.0	0.0	0.0	1600.0	3100.0	0.0

Program Support HR1

Rank: 1

		2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
543830	IT HW/SW Agreements	1852.7	0.0	0.0	5486.2	7338.9	0.0
544000	Supply Inventory IT	80.2	0.0	0.0	138.3	218.5	0.0
400	Other	1932.9	0.0	0.0	5624.5	7557.4	0.0
Total for Program Support HR1		1932.9	0.0	0.0	5624.5	7557.4	0.0

Medical Assistance

BU PCode Department
 63000 P524 000000

State of New Mexico

EB-3 Expansion Line Item Detail
 (Dollars in Thousands)

MAD HR1 Expansion

Rank: 0

		2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
520300	Classified Perm Positions F/T	912.5	1228.0	0.0	1557.3	3697.8	0.0
521100	Group Insurance Premium	21.7	0.0	0.0	66.4	88.1	0.0
521200	Retirement Contributions	174.4	0.0	0.0	532.2	706.6	0.0
521300	F I C A	69.8	0.0	0.0	213.1	282.9	0.0
521700	RHC Act Contributions	18.3	0.0	0.0	55.7	74.0	0.0
200	Personal services and employee benefits	1196.7	1228.0	0.0	2424.7	4849.4	0.0
535200	Professional Services	0.0	0.0	0.0	0.0	0.0	0.0
535300	Other Services	1440.3	0.0	0.0	1705.2	3145.5	0.0
535600	IT Services	0.0	0.0	0.0	0.0	0.0	0.0
300	Contractual services	1440.3	0.0	0.0	1705.2	3145.5	0.0
546400	Rent Of Land & Buildings	222.6	0.0	0.0	222.6	445.2	0.0
400	Other	222.6	0.0	0.0	222.6	445.2	0.0
Total for MAD HR1 Expansion		2859.6	1228.0	0.0	4352.5	8440.1	0.0

Income Support

BU PCode Department
 63000 P525 000000

State of New Mexico

EB-3 Expansion Line Item Detail
 (Dollars in Thousands)

ISD HR1 Expansion - Call Center

Rank: 1

		2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
535600	IT Services	4366.7	0.0	0.0	6030.3	10397.0	0.0
300	Contractual services	4366.7	0.0	0.0	6030.3	10397.0	0.0
Total for ISD HR1 Expansion - Call Center		4366.7	0.0	0.0	6030.3	10397.0	0.0

ISD HR1 Expansion - 260 FTE

Rank: 1

		2026-27 GF Sources	2026-27 OSF Sources	2026-27 ISF/IAT Sources	2026-27 FF Sources	2026-27 Total Request	2026-27 Exec Recommendation
520300	Classified Perm Positions F/T	6019.6	0.0	0.0	8313.2	14332.8	0.0
520600	Paid Unused Sick Leave	2.8	0.0	0.0	3.8	6.6	0.0
520700	Overtime & Other Premium Pay	41.0	0.0	0.0	56.5	97.5	0.0
520800	Annl & Comp Paid At Separation	19.7	0.0	0.0	27.1	46.8	0.0
520900	Differential Pay	0.1	0.0	0.0	0.1	0.2	0.0
521100	Group Insurance Premium	1029.9	0.0	0.0	1422.2	2452.1	0.0
521200	Retirement Contributions	1115.1	0.0	0.0	1539.8	2654.9	0.0
521300	F I C A	432.8	0.0	0.0	597.7	1030.5	0.0
521700	RHC Act Contributions	111.3	0.0	0.0	153.7	265.0	0.0
200	Personal services and employee benefits	8772.3	0.0	0.0	12114.1	20886.4	0.0
543830	IT HW/SW Agreements	2100.0	0.0	0.0	2900.0	5000.0	0.0
546400	Rent Of Land & Buildings	2100.0	0.0	0.0	2900.0	5000.0	0.0
548200	Furniture & Fixtures	409.5	0.0	0.0	565.6	975.1	0.0
400	Other	4609.5	0.0	0.0	6365.6	10975.1	0.0
Total for ISD HR1 Expansion - 260 FTE		13381.8	0.0	0.0	18479.7	31861.5	0.0

Developmental Disabilities Support

BU PCode
63000 P519

State of New Mexico

E4 PCode Detail
(Dollars in Thousands)

Fund	Account		2024-25	2025-26	2026-27	FY 2027 Agency Request					Justification
			Actuals	Opbud	PCF Proj	GF	OSF	ISF/IAT	FF	Total	
05200	520100	Exempt Perm Positions P/T&F/T	136.2	96.1	0	79.5	0.0	0.0	79.5	159.0	
05200	520200	Term Positions	5,101.8	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	520300	Classified Perm Positions F/T	5,766.7	13,099.4	0	6,657.5	0.0	0.0	6,657.5	13,315.0	
05200	520400	Classified Perm Positions P/T	232.5	0.0	0	116.4	0.0	0.0	116.4	232.8	
05200	520600	Paid Unused Sick Leave	6.2	3.4	0	7.7	0.0	0.0	7.7	15.4	
05200	520700	Overtime & Other Premium Pay	231.9	525.2	0	122.5	0.0	0.0	122.5	245.0	
05200	520800	Annl & Comp Paid At Separation	32.6	144.2	0	10.4	0.0	0.0	10.4	20.8	
05200	520900	Differential Pay	0.4	0.0	0	0.2	0.0	0.0	0.2	0.4	
05200	521100	Group Insurance Premium	1,299.4	1,250.8	0	1,107.2	0.0	0.0	1,107.2	2,214.4	
05200	521200	Retirement Contributions	2,162.1	2,636.6	0	1,281.2	0.0	0.0	1,281.2	2,562.4	
05200	521300	F I C A	823.1	1,026.4	0	500.4	0.0	0.0	500.4	1,000.8	
05200	521400	Workers' Comp Assessment Fee	25.8	1.6	0	0.9	0.0	0.0	0.9	1.8	
05200	521410	GSD Work Comp Insur Premium	0.0	25.7	0	9.7	0.0	0.0	9.7	19.4	
05200	521500	Unemployment Comp Premium	8.0	10.3	0	7.4	0.0	0.0	7.4	14.8	
05200	521600	Employee Liability Ins Premium	135.2	212.4	0	144.7	0.0	0.0	144.7	289.4	
05200	521700	RHC Act Contributions	224.8	229.8	0	130.5	0.0	0.0	130.5	261.0	
06100	520700	Overtime & Other Premium Pay	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
	200	Personal services and employee benef	16,186.7	19,261.9	0	10,176.2	0.0	0.0	10,176.2	20,352.4	
05200	542100	Employee I/S Mileage & Fares	6.9	30.0	0	15.0	0.0	0.0	15.0	30.0	
05200	542200	Employee I/S Meals & Lodging	11.2	60.0	0	30.0	0.0	0.0	30.0	60.0	
05200	542500	Transp - Fuel & Oil	25.4	60.0	0	30.0	0.0	0.0	30.0	60.0	
05200	542600	Transp - Parts & Supplies	4.9	15.0	0	7.5	0.0	0.0	7.5	15.0	
05200	542700	Transp - Transp Insurance	0.2	0.2	0	0.1	0.0	0.0	0.0	0.1	
05200	542800	State Transp Pool Charges	174.8	300.0	0	150.0	0.0	0.0	150.0	300.0	
05200	543200	Maint - Furn, Fixt, Equipment	6.6	80.0	0	40.0	0.0	0.0	40.0	80.0	
05200	543300	Maint - Buildings & Structures	3.0	25.0	0	12.5	0.0	0.0	12.5	25.0	
05200	543400	Maint - Property Insurance	0.1	0.1	0	0.1	0.0	0.0	0.2	0.3	
05200	543830	IT HW/SW Agreements	1,150.1	1,700.0	0	1,083.5	332.0	0.0	593.7	2,009.2	
05200	544000	Supply Inventory IT	22.5	75.0	0	11.0	0.0	0.0	11.0	22.0	
05200	544100	Supplies-Office Supplies	14.1	35.0	0	10.0	0.0	0.0	10.0	20.0	
05200	544200	Supplies-Medical,Lab,Personal	12.2	55.4	0	10.0	0.0	0.0	10.0	20.0	
05200	544400	Supplies-Field Supplies	4.1	20.0	0	3.5	0.0	0.0	3.5	7.0	
05200	544900	Supplies-Inventory Exempt	5.2	35.0	0	17.5	0.0	0.0	17.5	35.0	

Developmental Disabilities Support

State of New Mexico

BU 63000 PCode P519

E4 PCode Detail
(Dollars in Thousands)

Fund	Account	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	FY 2027 Agency Request				Total	Justification
					GF	OSF	ISF/IAT	FF		
05200	545600	Reporting & Recording	0.0	0.6	0	0.0	0.0	0.0	0.0	0.0
05200	545710	DOIT HCM Assessment Fees	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0
05200	545900	Printing & Photo Services	1.2	7.2	0	4.0	0.0	0.0	4.0	8.0
05200	546100	Postage & Mail Services	3.7	7.0	0	3.5	0.0	0.0	3.5	7.0
05200	546400	Rent Of Land & Buildings	754.2	1,261.4	0	1,500.0	0.0	0.0	1,500.0	3,000.0
05200	546500	Rent Of Equipment	15.1	18.0	0	10.0	0.0	0.0	10.0	20.0
05200	546610	DOIT Telecommunications	187.0	200.3	0	97.6	0.0	0.0	97.5	195.1
05200	546700	Subscriptions/Dues/License Fee	61.7	90.0	0	45.0	0.0	0.0	45.0	90.0
05200	546800	Employee Training & Education	6.7	10.0	0	5.0	0.0	0.0	5.0	10.0
05200	546900	Advertising	0.1	0.5	0	0.3	0.0	0.0	0.3	0.6
05200	547300	Care & Support	2,593.5	4,233.5	0	4,000.0	0.0	0.0	0.0	4,000.0
05200	547309	Care & Support InterSt Agency	187.0	186.8	0	175.4	0.0	0.0	0.0	175.4
05200	547900	Miscellaneous Expense	0.5	10.8	0	5.5	0.0	0.0	5.5	11.0
05200	547999	Request to Pay Prior Year	50.0	0.0	0	55.0	0.0	0.0	0.0	55.0
05200	548400	Other Equipment	17.7	0.0	0	10.0	0.0	0.0	10.0	20.0
05200	549600	Employee O/S Mileage & Fares	10.0	48.0	0	25.0	0.0	0.0	25.0	50.0
05200	549700	Employee O/S Meals & Lodging	10.6	20.2	0	27.0	0.0	0.0	27.0	54.0
	400	Other	5,340.3	8,585.0	0	7,384.0	332.0	0.0	2,663.7	10,379.7
06100	555106	OFU - INTRA-Agency	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0
97600	550000	Other Financing Uses	0.0	284,324.8	0	0.0	0.0	0.0	0.0	0.0
97600	555100	Other Financing Uses	227,719.2	0.0	0	323,424.8	0.0	0.0	0.0	323,424.8
97600	555106	OFU - INTRA-Agency	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0
	500	Other financing uses	227,719.2	284,324.8	0	323,424.8	0.0	0.0	0.0	323,424.8
TOTAL EXPENSE			249,246.2	312,171.7		340,985.0	332.0	0.0	12,839.9	354,156.9

Health Improvement

BU PCode
63000 P520

State of New Mexico

E4 PCode Detail
(Dollars in Thousands)

Fund	Account		2024-25	2025-26	2026-27	FY 2027 Agency Request					Justification
			Actuals	Opbud	PCF Proj	GF	OSF	ISF/IAT	FF	Total	
05200	520100	Exempt Perm Positions P/T&F/T	118.8	250.0	0	82.0	14.8	0.0	62.2	159.0	
05200	520200	Term Positions	2,803.3	2,100.0	0	44.8	8.1	0.0	34.0	86.9	
05200	520300	Classified Perm Positions F/T	8,556.6	16,783.3	0	8,302.7	1,788.0	0.0	9,135.6	19,226.3	
05200	520600	Paid Unused Sick Leave	3.1	0.0	0	8.9	1.6	0.0	6.7	17.2	
05200	520700	Overtime & Other Premium Pay	399.7	750.0	0	141.1	25.4	0.0	107.0	273.5	
05200	520800	Annl & Comp Paid At Separation	26.1	95.0	0	12.0	2.2	0.0	9.0	23.2	
05200	520900	Differential Pay	0.0	0.0	0	0.3	0.0	0.0	0.2	0.5	
05200	521100	Group Insurance Premium	1,265.3	1,500.0	0	1,275.1	229.9	0.0	966.2	2,471.2	
05200	521200	Retirement Contributions	2,200.4	2,500.0	0	1,572.1	283.3	0.0	1,191.3	3,046.7	
05200	521300	F I C A	862.3	1,000.0	0	621.9	112.1	0.0	471.2	1,205.2	
05200	521400	Workers' Comp Assessment Fee	32.3	1.7	0	1.1	0.2	0.0	0.8	2.1	
05200	521410	GSD Work Comp Insur Premium	0.0	27.2	0	11.1	2.0	0.0	8.5	21.6	
05200	521500	Unemployment Comp Premium	10.1	10.9	0	8.5	1.5	0.0	6.5	16.5	
05200	521600	Employee Liability Ins Premium	171.4	224.6	0	166.5	30.0	0.0	126.2	322.7	
05200	521700	RHC Act Contributions	228.2	262.0	0	163.4	29.5	0.0	123.8	316.7	
	200	Personal services and employee benef	16,677.6	25,504.7	0	12,411.5	2,528.6	0.0	12,249.2	27,189.3	
05200	542100	Employee I/S Mileage & Fares	1.7	118.2	0	109.5	10.1	0.0	83.1	202.7	
05200	542200	Employee I/S Meals & Lodging	248.0	435.0	0	135.0	12.5	0.0	102.5	250.0	
05200	542500	Transp - Fuel & Oil	25.1	19.3	0	5.4	0.5	0.0	4.1	10.0	
05200	542600	Transp - Parts & Supplies	3.6	0.0	0	0.5	0.1	0.0	0.4	1.0	
05200	542700	Transp - Transp Insurance	0.2	0.2	0	0.1	0.0	0.0	0.0	0.1	
05200	542800	State Transp Pool Charges	258.2	134.6	0	297.0	27.5	0.0	225.5	550.0	
05200	543100	Maint - Grounds & Roadways	0.1	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	543200	Maint - Furn, Fixt, Equipment	22.1	0.0	0	1.4	0.1	0.0	1.0	2.5	
05200	543300	Maint - Buildings & Structures	0.9	57.2	0	1.4	0.1	0.0	1.0	2.5	
05200	543400	Maint - Property Insurance	0.1	0.1	0	0.2	0.0	0.0	0.1	0.3	
05200	543830	IT HW/SW Agreements	14.6	175.0	0	8.1	0.8	0.0	6.1	15.0	
05200	544000	Supply Inventory IT	19.7	209.3	0	8.1	0.8	0.0	6.1	15.0	
05200	544100	Supplies-Office Supplies	25.5	14.5	0	10.8	1.0	0.0	8.2	20.0	
05200	544200	Supplies-Medical,Lab,Personal	0.2	56.6	0	0.0	0.0	0.0	0.0	0.0	
05200	544400	Supplies-Field Supplies	0.1	0.0	0	0.4	0.0	0.0	0.4	0.8	
05200	544900	Supplies-Inventory Exempt	20.3	24.7	0	16.2	1.5	0.0	12.3	30.0	
05200	545600	Reporting & Recording	0.0	0.0	0	0.2	0.1	0.0	0.2	0.5	

Health Improvement

State of New Mexico

BU PCode
63000 P520

E4 PCode Detail
(Dollars in Thousands)

Fund	Account	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	FY 2027 Agency Request				Total	Justification	
					GF	OSF	ISF/IAT	FF			
05200	545710	DOIT HCM Assessment Fees	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	545900	Printing & Photo Services	7.8	2.3	0	5.4	0.5	0.0	4.1	10.0	
05200	546100	Postage & Mail Services	15.8	23.3	0	13.5	1.2	0.0	10.3	25.0	
05200	546400	Rent Of Land & Buildings	648.0	1,150.0	0	1,080.0	100.0	0.0	820.0	2,000.0	
05200	546500	Rent Of Equipment	15.1	16.4	0	18.9	1.7	0.0	14.4	35.0	
05200	546600	Communications	0.7	0.6	0	1.4	0.1	0.0	1.0	2.5	
05200	546610	DOIT Telecommunications	185.0	211.9	0	117.5	10.9	0.0	89.2	217.6	
05200	546700	Subscriptions/Dues/License Fee	2.4	7.1	0	5.4	0.5	0.0	4.1	10.0	
05200	546800	Employee Training & Education	1.2	1.7	0	20.4	2.1	0.0	16.6	39.1	
05200	546900	Advertising	6.2	1.7	0	10.8	1.0	0.0	8.2	20.0	
05200	547900	Miscellaneous Expense	6.0	1.7	0	24.6	1.3	0.0	18.6	44.5	
05200	547999	Request to Pay Prior Year	53.4	0.0	0	0.8	0.1	0.0	0.6	1.5	
05200	548300	Information Tech Equipment	0.0	182.5	0	0.0	0.0	0.0	0.0	0.0	
05200	549600	Employee O/S Mileage & Fares	3.7	19.6	0	2.7	0.3	0.0	2.0	5.0	
05200	549700	Employee O/S Meals & Lodging	4.5	8.3	0	2.7	0.3	0.0	2.0	5.0	
	400	Other	1,590.2	2,871.8	0	1,898.4	175.1	0.0	1,442.1	3,515.6	
TOTAL EXPENSE			18,267.8	28,376.5		14,309.9	2,703.7	0.0	13,691.3	30,704.9	

State Health Benefits

BU PCode
63000 P521

State of New Mexico

E4 PCode Detail
(Dollars in Thousands)

Fund	Account	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	FY 2027 Agency Request				Total	Justification	
					GF	OSF	ISF/IAT	FF			
72440	544100	Supplies-Office Supplies	4.7	0.0	0	0.0	4.7	0.0	0.0	4.7	
72440	544900	Supplies-Inventory Exempt	0.3	0.0	0	0.0	0.5	0.0	0.0	0.5	
72440	545900	Printing & Photo Services	2.0	0.0	0	0.0	2.3	0.0	0.0	2.3	
72440	546100	Postage & Mail Services	19.2	0.0	0	0.0	22.2	0.0	0.0	22.2	Increase in volume and cost
72440	546400	Rent Of Land & Buildings	45.9	0.0	0	0.0	66.8	0.0	0.0	66.8	
72440	546500	Rent Of Equipment	2.4	0.0	0	0.0	2.5	0.0	0.0	2.5	Increase in cost
72440	546610	DOIT Telecommunications	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
72440	547309	Care & Support InterSt Agency	1,756.9	0.0	0	0.0	1,780.5	0.0	0.0	1,780.5	
72440	547350	Claims and Benefits Expenses	532,769.8	480,998.5	0	0.0	619,678.4	0.0	0.0	619,678.4	projected Increase in enrollees
72440	547900	Miscellaneous Expense	172.2	0.0	0	0.0	172.5	0.0	0.0	172.5	
72440	547999	Request to Pay Prior Year	941.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
72440	549600	Employee O/S Mileage & Fares	0.5	0.0	0	0.0	1.0	0.0	0.0	1.0	Increase in trips
72440	549700	Employee O/S Meals & Lodging	0.5	0.0	0	0.0	1.0	0.0	0.0	1.0	Increase in trips
	400	Other	535,715.4	480,998.5	0	0.0	621,732.4	0.0	0.0	621,732.4	
TOTAL EXPENSE			535,715.4	480,998.5		0.0	621,732.4	0.0	0.0	621,732.4	

Program Support

BU PCode
63000 P522

State of New Mexico

E4 PCode Detail
(Dollars in Thousands)

Fund	Account		2024-25	2025-26	2026-27	FY 2027 Agency Request				Justification	
			Actuals	Opbud	PCF Proj	GF	OSF	ISF/IAT	FF		Total
00000	520300	Classified Perm Positions F/T	0.0	0.0	1,479.32	0.0	0.0	0.0	0.0	0.0	
00000	521100	Group Insurance Premium	0.0	0.0	85.26	0.0	0.0	0.0	0.0	0.0	
00000	521200	Retirement Contributions	0.0	0.0	291.4	0.0	0.0	0.0	0.0	0.0	
00000	521300	F I C A	0.0	0.0	90.67	0.0	0.0	0.0	0.0	0.0	
00000	521700	RHC Act Contributions	0.0	0.0	37.6	0.0	0.0	0.0	0.0	0.0	
05200	520100	Exempt Perm Positions P/T&F/T	1,451.3	3,168.8	1,644.57	1,309.7	318.6	0.0	1,927.1	3,555.4	
05200	520200	Term Positions	170.0	120.0	0.86	138.4	22.8	0.0	190.7	351.9	
05200	520300	Classified Perm Positions F/T	17,089.3	25,119.9	28,095.77	9,987.9	2,458.1	0.0	12,550.4	24,996.4	
05200	520600	Paid Unused Sick Leave	38.6	45.0	0	0.0	0.0	0.0	0.0	0.0	
05200	520700	Overtime & Other Premium Pay	9.2	22.5	0	0.0	0.0	0.0	0.0	0.0	
05200	520800	Annl & Comp Paid At Separation	69.7	135.0	0	524.9	0.0	0.0	621.7	1,146.6	
05200	520900	Differential Pay	0.0	0.0	0	686.7	0.0	0.0	813.3	1,500.0	
05200	521100	Group Insurance Premium	1,536.6	1,705.1	3,236.95	366.2	0.0	0.0	433.8	800.0	
05200	521200	Retirement Contributions	3,600.4	3,750.0	5,702.52	704.0	182.0	0.0	1,048.6	1,934.6	
05200	521300	F I C A	1,363.1	1,375.0	1,823.72	976.5	250.3	0.0	1,452.0	2,678.8	
05200	521400	Workers' Comp Assessment Fee	43.3	3.1	0	1.3	0.2	0.0	1.7	3.2	
05200	521410	GSD Work Comp Insur Premium	0.0	49.8	0	13.0	2.2	0.0	18.1	33.3	
05200	521500	Unemployment Comp Premium	13.6	20.1	0	10.0	1.7	0.0	13.8	25.5	
05200	521600	Employee Liability Ins Premium	230.0	411.2	0	195.2	33.4	0.0	270.6	499.2	
05200	521700	RHC Act Contributions	374.3	362.0	614.17	23.9	6.2	0.0	35.6	65.7	
90100	520300	Classified Perm Positions F/T	0.0	0.0	93.38	0.0	0.0	0.0	0.0	0.0	
90100	521100	Group Insurance Premium	0.0	0.0	5.62	0.0	0.0	0.0	0.0	0.0	
90100	521200	Retirement Contributions	0.0	0.0	17.76	0.0	0.0	0.0	0.0	0.0	
90100	521300	F I C A	0.0	0.0	5.72	0.0	0.0	0.0	0.0	0.0	
90100	521700	RHC Act Contributions	0.0	0.0	2.31	0.0	0.0	0.0	0.0	0.0	
	200	Personal services and employee benef	25,989.4	36,287.5	43,227.58	14,937.7	3,275.5	0.0	19,377.4	37,590.6	
05200	542100	Employee I/S Mileage & Fares	2.3	30.0	0	11.2	2.9	0.0	16.4	30.5	
05200	542200	Employee I/S Meals & Lodging	27.9	39.5	0	14.6	3.5	0.0	21.9	40.0	
05200	542500	Transp - Fuel & Oil	5.8	6.0	0	1.1	0.0	0.0	1.4	2.5	
05200	542600	Transp - Parts & Supplies	0.2	1.1	0	0.0	0.0	0.0	0.1	0.1	
05200	542700	Transp - Transp Insurance	0.3	0.4	0	0.1	0.0	0.0	0.1	0.2	
05200	542800	State Transp Pool Charges	57.4	51.5	0	18.7	4.4	0.0	27.0	50.1	
05200	543200	Maint - Furn, Fixt, Equipment	69.8	78.5	0	32.2	0.0	0.0	38.1	70.3	

Program Support

BU 63000 PCode P522

State of New Mexico

E4 PCode Detail
(Dollars in Thousands)

Fund	Account		2024-25	2025-26	2026-27	FY 2027 Agency Request				Justification	
			Actuals	Opbud	PCF Proj	GF	OSF	ISF/IAT	FF		Total
05200	543300	Maint - Buildings & Structures	72.4	153.6	0	21.0	4.5	0.0	31.0	56.5	
05200	543400	Maint - Property Insurance	0.2	0.1	0	0.2	0.0	0.0	0.2	0.4	
05200	543500	Maint - Supplies	0.0	5.0	0	0.0	0.0	0.0	0.0	0.0	
05200	543820	Maintenance IT	243.5	1,300.0	0	918.7	0.4	0.0	1,089.4	2,008.5	
05200	543830	IT HW/SW Agreements	12,760.6	12,786.4	0	5,547.5	13.5	0.0	6,587.6	12,148.6	
05200	544000	Supply Inventory IT	426.0	601.3	0	457.8	0.0	0.0	542.3	1,000.1	
05200	544100	Supplies-Office Supplies	9.3	81.4	0	3.7	0.8	0.0	4.5	9.0	
05200	544400	Supplies-Field Supplies	1.2	1.5	0	0.2	0.0	0.0	0.3	0.5	
05200	544800	Supplies-Education&Recreation	0.0	0.0	0	33.6	8.2	0.0	50.5	92.3	
05200	544900	Supplies-Inventory Exempt	397.0	109.5	0	0.0	0.0	0.0	0.0	0.0	
05200	545600	Reporting & Recording	2.2	17.5	0	8.6	1.8	0.0	13.2	23.6	
05200	545700	ISD Services	1,767.9	1,675.7	0	1,310.9	0.0	0.0	1,552.7	2,863.6	
05200	545710	DOIT HCM Assessment Fees	791.3	788.0	0	466.2	0.0	0.0	552.3	1,018.5	
05200	545900	Printing & Photo Services	180.7	56.7	0	0.5	0.0	0.0	0.6	1.1	
05200	546100	Postage & Mail Services	23.7	38.2	0	3.9	0.1	0.0	4.7	8.7	
05200	546109	Postage&Mail Svcs - Int Agency	0.0	290.0	0	0.0	0.0	0.0	0.0	0.0	
05200	546400	Rent Of Land & Buildings	1,943.1	2,292.3	0	976.4	182.7	0.0	1,369.9	2,529.0	
05200	546500	Rent Of Equipment	36.6	110.1	0	18.3	0.0	0.0	21.7	40.0	
05200	546600	Communications	0.0	5.0	0	1.8	0.8	0.0	2.4	5.0	
05200	546610	DOIT Telecommunications	1,155.2	387.9	0	131.6	22.5	0.0	182.5	336.6	
05200	546700	Subscriptions/Dues/License Fee	747.1	323.9	0	141.8	7.4	0.0	175.8	325.0	
05200	546800	Employee Training & Education	28.7	101.1	0	29.8	0.0	0.0	35.2	65.0	
05200	546900	Advertising	46.1	54.5	0	2.5	0.0	0.0	3.2	5.7	
05200	547000	Legal Settlements	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	547900	Miscellaneous Expense	4.3	8.2	0	0.5	0.0	0.0	0.5	1.0	
05200	547999	Request to Pay Prior Year	3.3	1.5	0	0.0	0.0	0.0	0.0	0.0	
05200	548200	Furniture & Fixtures	0.0	223.7	0	226.2	58.2	0.0	336.8	621.2	
05200	548300	Information Tech Equipment	656.9	110.8	0	131.3	0.0	0.0	155.5	286.8	
05200	548400	Other Equipment	0.0	25.0	0	20.3	5.2	0.0	30.2	55.7	
05200	549600	Employee O/S Mileage & Fares	14.0	33.0	0	6.9	0.0	0.0	8.1	15.0	
05200	549700	Employee O/S Meals & Lodging	15.1	19.2	0	14.8	3.0	0.0	20.7	38.5	
05200	549900	Brd & Comm O/S Meals & Lodging	0.0	0.0	0	457.7	0.0	0.0	542.1	999.8	
	400	Other	21,490.1	21,808.1	0	11,010.6	319.9	0.0	13,418.9	24,749.4	

Program Support

BU PCode
63000 P522

State of New Mexico

E4 PCode Detail
(Dollars in Thousands)

Fund	Account	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	FY 2027 Agency Request				Total	Justification
					GF	OSF	ISF/IAT	FF		
TOTAL EXPENSE		47,479.6	58,095.6		25,948.3	3,595.4	0.0	32,796.3	62,340.0	

Child Support Enforcement

BU PCode
63000 P523

State of New Mexico

E4 PCode Detail
(Dollars in Thousands)

Fund	Account		2024-25	2025-26	2026-27	FY 2027 Agency Request				Justification	
			Actuals	Opbud	PCF Proj	GF	OSF	ISF/IAT	FF		Total
00000	520300	Classified Perm Positions F/T	0.0	0.0	397.85	0.0	0.0	0.0	0.0	0.0	
00000	521100	Group Insurance Premium	0.0	0.0	44.67	0.0	0.0	0.0	0.0	0.0	
00000	521200	Retirement Contributions	0.0	0.0	95.72	0.0	0.0	0.0	0.0	0.0	
00000	521300	F I C A	0.0	0.0	24.39	0.0	0.0	0.0	0.0	0.0	
00000	521700	RHC Act Contributions	0.0	0.0	11.92	0.0	0.0	0.0	0.0	0.0	
05200	520100	Exempt Perm Positions P/T&F/T	145.2	152.9	157.2	57.8	0.0	0.0	112.2	170.0	
05200	520300	Classified Perm Positions F/T	19,427.3	22,490.9	24,840.7	6,703.0	0.0	0.0	15,527.8	22,230.8	
05200	520600	Paid Unused Sick Leave	38.8	39.9	0	15.1	0.0	0.0	29.3	44.4	
05200	520700	Overtime & Other Premium Pay	1.9	8.0	0	3.0	0.0	0.0	5.9	8.9	
05200	520800	Annl & Comp Paid At Separation	62.9	492.6	0	186.5	0.0	0.0	362.1	548.6	
05200	521100	Group Insurance Premium	2,276.7	2,608.3	4,182.57	1,318.4	0.0	0.0	2,559.3	3,877.7	
05200	521200	Retirement Contributions	3,768.4	4,148.3	4,828.14	1,545.8	0.0	0.0	3,000.7	4,546.5	
05200	521300	F I C A	1,418.9	1,562.8	1,532.24	570.8	0.0	0.0	1,107.9	1,678.7	
05200	521400	Workers' Comp Assessment Fee	48.8	2.8	0	1.1	0.0	0.0	2.0	3.1	
05200	521410	GSD Work Comp Insur Premium	0.0	44.7	0	11.2	0.0	0.0	21.8	33.0	
05200	521500	Unemployment Comp Premium	15.0	17.9	0	8.5	0.0	0.0	16.6	25.1	
05200	521600	Employee Liability Ins Premium	254.2	368.3	0	167.3	0.0	0.0	324.7	492.0	
05200	521700	RHC Act Contributions	399.0	431.2	519.76	147.8	0.0	0.0	286.9	434.7	
05200	523200	COVID Related Time Worked	0.7	0.0	0	0.0	0.0	0.0	0.0	0.0	
	200	Personal services and employee benef	27,857.8	32,368.6	36,635.14	10,736.3	0.0	0.0	23,357.2	34,093.5	
05200	542100	Employee I/S Mileage & Fares	0.8	1.0	0	0.3	0.0	0.0	0.7	1.0	
05200	542200	Employee I/S Meals & Lodging	16.0	15.0	0	5.1	0.0	0.0	9.9	15.0	
05200	542500	Transp - Fuel & Oil	4.6	5.5	0	1.9	0.0	0.0	3.6	5.5	
05200	542600	Transp - Parts & Supplies	2.0	1.2	0	0.4	0.0	0.0	0.8	1.2	
05200	542700	Transp - Transp Insurance	0.3	0.3	0	0.1	0.0	0.0	0.1	0.2	
05200	542800	State Transp Pool Charges	87.6	95.8	0	28.9	0.0	0.0	56.1	85.0	
05200	543200	Maint - Furn, Fixt, Equipment	7.4	7.4	0	2.5	0.0	0.0	4.9	7.4	
05200	543300	Maint - Buildings & Structures	24.4	1.0	0	0.3	0.0	0.0	0.7	1.0	
05200	543400	Maint - Property Insurance	0.2	0.2	0	0.2	0.0	0.0	0.3	0.5	
05200	543500	Maint - Supplies	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	543830	IT HW/SW Agreements	154.7	336.8	0	114.5	0.0	0.0	222.3	336.8	
05200	544000	Supply Inventory IT	3.5	6.0	0	2.0	0.0	0.0	4.0	6.0	
05200	544100	Supplies-Office Supplies	15.2	16.0	0	6.8	0.0	0.0	13.2	20.0	

Child Support Enforcement

State of New Mexico

BU PCode
63000 P523

E4 PCode Detail
(Dollars in Thousands)

Fund	Account	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	FY 2027 Agency Request				Total	Justification
					GF	OSF	ISF/IAT	FF		
05200	544900	Supplies-Inventory Exempt	10.1	6.0	0	3.4	0.0	0.0	6.6	10.0
05200	545600	Reporting & Recording	5.8	6.5	0	2.2	0.0	0.0	4.3	6.5
05200	545710	DOIT HCM Assessment Fees	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0
05200	545900	Printing & Photo Services	29.6	47.5	0	16.2	0.0	0.0	31.3	47.5
05200	546100	Postage & Mail Services	613.9	595.0	0	202.3	0.0	0.0	392.7	595.0
05200	546320	Utilities - Electricity	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0
05200	546400	Rent Of Land & Buildings	2,921.2	3,049.3	0	1,040.9	0.0	0.0	2,020.6	3,061.5
05200	546500	Rent Of Equipment	141.5	144.8	0	49.2	0.0	0.0	95.6	144.8
05200	546600	Communications	11.8	7.4	0	2.5	0.0	0.0	4.9	7.4
05200	546610	DOIT Telecommunications	440.7	347.4	0	112.8	0.0	0.0	219.0	331.8
05200	546700	Subscriptions/Dues/License Fee	89.9	82.4	0	28.0	0.0	0.0	54.4	82.4
05200	546800	Employee Training & Education	37.1	14.0	0	4.8	0.0	0.0	9.2	14.0
05200	546900	Advertising	50.8	53.6	0	18.2	0.0	0.0	35.4	53.6
05200	547000	Legal Settlements	38.0	0.0	0	0.0	0.0	0.0	0.0	0.0
05200	547300	Care & Support	12.6	10.0	0	3.4	0.0	0.0	6.6	10.0
05200	547900	Miscellaneous Expense	205.5	316.1	0	107.5	0.0	0.0	208.6	316.1
05200	547999	Request to Pay Prior Year	84.0	1.0	0	0.3	0.0	0.0	0.7	1.0
05200	549600	Employee O/S Mileage & Fares	12.4	13.0	0	5.4	0.0	0.0	10.6	16.0
05200	549700	Employee O/S Meals & Lodging	8.4	10.0	0	4.4	0.0	0.0	8.6	13.0
	400 Other		5,030.2	5,190.2	0	1,764.5	0.0	0.0	3,425.7	5,190.2
TOTAL EXPENSE			32,888.1	37,558.8		12,500.8	0.0	0.0	26,782.9	39,283.7

Medical Assistance

BU PCode
63000 P524

State of New Mexico

E4 PCode Detail
(Dollars in Thousands)

Fund	Account		2024-25	2025-26	2026-27	FY 2027 Agency Request				Justification	
			Actuals	Opbud	PCF Proj	GF	OSF	ISF/IAT	FF		Total
00000	520300	Classified Perm Positions F/T	0.0	0.0	1,837.11	0.0	0.0	0.0	0.0	0.0	
00000	521100	Group Insurance Premium	0.0	0.0	134.13	0.0	0.0	0.0	0.0	0.0	
00000	521200	Retirement Contributions	0.0	0.0	393.54	0.0	0.0	0.0	0.0	0.0	
00000	521300	F I C A	0.0	0.0	112.6	0.0	0.0	0.0	0.0	0.0	
00000	521700	RHC Act Contributions	0.0	0.0	49.99	0.0	0.0	0.0	0.0	0.0	
05200	520100	Exempt Perm Positions P/T&F/T	217.0	119.0	226.69	54.7	0.0	0.0	64.3	119.0	
05200	520200	Term Positions	6.6	0.0	0.84	0.0	0.0	0.0	0.0	0.0	
05200	520300	Classified Perm Positions F/T	12,530.1	17,043.9	17,007.74	8,018.0	467.3	0.0	9,961.1	18,446.4	
05200	520400	Classified Perm Positions P/T	0.0	17.2	0	7.9	0.0	0.0	9.3	17.2	
05200	520600	Paid Unused Sick Leave	16.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	520700	Overtime & Other Premium Pay	2.8	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	520800	Annl & Comp Paid At Separation	22.8	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	521100	Group Insurance Premium	1,217.3	1,457.8	2,382.48	687.0	0.0	0.0	806.5	1,493.5	
05200	521200	Retirement Contributions	2,453.9	2,155.5	3,321.75	1,123.4	0.0	0.0	1,318.8	2,442.2	
05200	521300	F I C A	916.8	914.7	1,056.53	473.5	0.0	0.0	555.9	1,029.4	
05200	521400	Workers' Comp Assessment Fee	27.8	2.0	0	1.2	0.0	0.0	1.3	2.5	
05200	521410	GSD Work Comp Insur Premium	0.0	33.1	0	11.5	0.0	0.0	13.4	24.9	
05200	521500	Unemployment Comp Premium	8.7	13.3	0	8.7	0.0	0.0	10.3	19.0	
05200	521600	Employee Liability Ins Premium	146.4	273.1	0	171.4	0.0	0.0	201.2	372.6	
05200	521700	RHC Act Contributions	255.1	249.5	358.31	128.6	0.0	0.0	150.9	279.5	
90100	520300	Classified Perm Positions F/T	0.0	0.0	284.04	0.0	0.0	0.0	0.0	0.0	
90100	521100	Group Insurance Premium	0.0	0.0	11.25	0.0	0.0	0.0	0.0	0.0	
90100	521200	Retirement Contributions	0.0	0.0	54.02	0.0	0.0	0.0	0.0	0.0	
90100	521300	F I C A	0.0	0.0	17.41	0.0	0.0	0.0	0.0	0.0	
90100	521700	RHC Act Contributions	0.0	0.0	7.02	0.0	0.0	0.0	0.0	0.0	
	200	Personal services and employee benef	17,821.4	22,279.1	27,255.44	10,685.9	467.3	0.0	13,093.0	24,246.2	
05200	542100	Employee I/S Mileage & Fares	0.8	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	542200	Employee I/S Meals & Lodging	3.6	3.0	0	1.5	0.0	0.0	1.6	3.1	
05200	542500	Transp - Fuel & Oil	0.6	2.0	0	1.0	0.0	0.0	1.0	2.0	
05200	542600	Transp - Parts & Supplies	0.0	0.2	0	0.1	0.0	0.0	0.1	0.2	
05200	542700	Transp - Transp Insurance	0.2	0.2	0	0.1	0.0	0.0	0.0	0.1	
05200	542800	State Transp Pool Charges	8.7	8.5	0	4.5	0.0	0.0	4.6	9.1	
05200	543300	Maint - Buildings & Structures	61.2	0.0	0	0.0	0.0	0.0	0.0	0.0	

Medical Assistance

BU 63000 PCode P524

State of New Mexico

E4 PCode Detail
(Dollars in Thousands)

Fund	Account	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	FY 2027 Agency Request				Total	Justification	
					GF	OSF	ISF/IAT	FF			
05200	543400	Maint - Property Insurance	0.1	0.1	0	0.2	0.0	0.0	0.2	0.4	
05200	543830	IT HW/SW Agreements	911.9	1,000.0	0	500.0	0.0	0.0	500.0	1,000.0	
05200	544000	Supply Inventory IT	63.5	4.0	0	2.0	0.0	0.0	2.0	4.0	
05200	544100	Supplies-Office Supplies	5.1	2.0	0	1.0	0.0	0.0	1.0	2.0	
05200	544900	Supplies-Inventory Exempt	293.3	158.0	0	70.0	0.0	0.0	70.0	140.0	
05200	545600	Reporting & Recording	85.3	80.0	0	40.0	0.0	0.0	40.0	80.0	
05200	545710	DOIT HCM Assessment Fees	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	545900	Printing & Photo Services	1.9	2.0	0	1.0	0.0	0.0	1.0	2.0	
05200	546100	Postage & Mail Services	24.2	1,000.0	0	539.0	0.0	0.0	538.9	1,077.9	
05200	546400	Rent Of Land & Buildings	428.6	1,104.0	0	552.0	0.0	0.0	552.0	1,104.0	
05200	546500	Rent Of Equipment	58.8	60.0	0	30.0	0.0	0.0	30.0	60.0	
05200	546600	Communications	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	546610	DOIT Telecommunications	197.0	257.7	0	125.6	0.0	0.0	125.7	251.3	
05200	546700	Subscriptions/Dues/License Fee	23.6	30.0	0	15.0	0.0	0.0	15.0	30.0	
05200	546800	Employee Training & Education	36.7	12.0	0	6.0	0.0	0.0	6.0	12.0	
05200	546900	Advertising	20.3	30.0	0	15.0	0.0	0.0	15.0	30.0	
05200	547000	Legal Settlements	1,009.5	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	547450	Grants to Other Agencies	22,360.8	21,295.4	0	0.0	0.0	0.0	0.0	0.0	
05200	547900	Miscellaneous Expense	0.5	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	547999	Request to Pay Prior Year	2.4	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	548200	Furniture & Fixtures	528.5	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	548300	Information Tech Equipment	826.3	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	549600	Employee O/S Mileage & Fares	12.4	18.0	0	9.0	0.0	0.0	9.0	18.0	
05200	549700	Employee O/S Meals & Lodging	17.3	24.0	0	12.0	0.0	0.0	12.0	24.0	
97600	543830	IT HW/SW Agreements	21,170.2	0.0	0	0.0	0.0	0.0	0.0	0.0	
97600	546100	Postage & Mail Services	5.5	0.0	0	0.0	0.0	0.0	0.0	0.0	
97600	546800	Employee Training & Education	3.2	0.0	0	0.0	0.0	0.0	0.0	0.0	
97600	547300	Care & Support	8,399,352.2	#####	0	1,225,543.1	213,157.5	895,043.1	7,977,853.4	#####	
97600	547900	Miscellaneous Expense	3,213.3	0.0	0	0.0	0.0	0.0	0.0	0.0	
97600	547909	Misc Expense Interagency	1,731.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
97600	549600	Employee O/S Mileage & Fares	5.1	0.0	0	0.0	0.0	0.0	0.0	0.0	
97600	549700	Employee O/S Meals & Lodging	5.5	0.0	0	0.0	0.0	0.0	0.0	0.0	
	400	Other	8,452,469.0	#####	0	1,227,468.1	213,157.5	895,043.1	7,979,778.5	#####	

Medical Assistance

BU PCode
63000 P524

State of New Mexico

E4 PCode Detail
(Dollars in Thousands)

Fund	Account	2024-25	2025-26	2026-27	FY 2027 Agency Request				Total	Justification
		Actuals	Opbud	PCF Proj	GF	OSF	ISF/IAT	FF		
TOTAL EXPENSE		8,470,290.4	#####		1,238,154.0	213,624.8	895,043.1	7,992,871.5	#####	

Income Support

BU PCode
63000 P525

State of New Mexico

E4 PCode Detail
(Dollars in Thousands)

Fund	Account		2024-25	2025-26	2026-27	FY 2027 Agency Request					Justification
			Actuals	Opbud	PCF Proj	GF	OSF	ISF/IAT	FF	Total	
00000	520300	Classified Perm Positions F/T	0.0	0.0	1,404.45	0.0	0.0	0.0	0.0	0.0	
00000	521100	Group Insurance Premium	0.0	0.0	150.96	0.0	0.0	0.0	0.0	0.0	
00000	521200	Retirement Contributions	0.0	0.0	277.15	0.0	0.0	0.0	0.0	0.0	
00000	521300	F I C A	0.0	0.0	86.08	0.0	0.0	0.0	0.0	0.0	
00000	521700	RHC Act Contributions	0.0	0.0	35.75	0.0	0.0	0.0	0.0	0.0	
05200	520100	Exempt Perm Positions P/T&F/T	155.0	120.2	161.92	72.6	0.0	0.0	91.2	163.8	
05200	520200	Term Positions	418.6	403.6	3.69	239.4	0.0	0.0	301.1	540.5	
05200	520300	Classified Perm Positions F/T	47,719.7	51,855.5	65,107.84	26,563.0	0.0	0.0	33,398.9	59,961.9	
05200	520400	Classified Perm Positions P/T	0.0	51.1	0	0.0	0.0	0.0	0.0	0.0	
05200	520500	Temporary Positions F/T & P/T	75.6	6,176.3	0	0.0	0.0	0.0	0.0	0.0	
05200	520600	Paid Unused Sick Leave	26.0	36.0	0	12.7	0.0	0.0	15.9	28.6	
05200	520700	Overtime & Other Premium Pay	387.7	2,540.9	0	187.0	0.0	0.0	235.2	422.2	
05200	520800	Annl & Comp Paid At Separation	211.4	140.1	0	89.9	0.0	0.0	113.0	202.9	
05200	520900	Differential Pay	0.7	0.9	0	0.4	0.0	0.0	0.4	0.8	
05200	521100	Group Insurance Premium	6,510.6	7,919.7	11,656.73	4,759.9	0.0	0.0	5,984.8	10,744.7	
05200	521200	Retirement Contributions	9,898.9	11,874.1	12,435.6	5,094.8	0.0	0.0	6,405.9	11,500.7	
05200	521300	F I C A	3,759.6	5,076.7	4,000.92	1,977.5	0.0	0.0	2,486.4	4,463.9	
05200	521400	Workers' Comp Assessment Fee	133.0	8.6	0	5.4	0.0	0.0	6.7	12.1	
05200	521410	GSD Work Comp Insur Premium	0.0	138.9	0	56.6	0.0	0.0	71.1	127.7	
05200	521500	Unemployment Comp Premium	40.9	55.7	0	43.3	0.0	0.0	54.4	97.7	
05200	521600	Employee Liability Ins Premium	692.5	1,145.3	0	846.0	0.0	0.0	1,063.6	1,909.6	
05200	521700	RHC Act Contributions	1,029.0	1,234.3	1,340.2	508.5	0.0	0.0	639.4	1,147.9	
05200	521900	Other Employee Benefits	4.2	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	523200	COVID Related Time Worked	1.1	0.0	0	0.0	0.0	0.0	0.0	0.0	
90100	520300	Classified Perm Positions F/T	0.0	0.0	47.92	0.0	0.0	0.0	0.0	0.0	
90100	521100	Group Insurance Premium	0.0	0.0	6.78	0.0	0.0	0.0	0.0	0.0	
90100	521200	Retirement Contributions	0.0	0.0	9.11	0.0	0.0	0.0	0.0	0.0	
90100	521300	F I C A	0.0	0.0	2.94	0.0	0.0	0.0	0.0	0.0	
90100	521700	RHC Act Contributions	0.0	0.0	1.18	0.0	0.0	0.0	0.0	0.0	
97500	520300	Classified Perm Positions F/T	1,120.3	1,523.2	1,412.04	0.0	0.0	0.0	1,586.8	1,586.8	
97500	520500	Temporary Positions F/T & P/T	1.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
97500	520700	Overtime & Other Premium Pay	0.7	0.0	0	0.0	0.0	0.0	0.0	0.0	
97500	520800	Annl & Comp Paid At Separation	2.4	0.0	0	0.0	0.0	0.0	0.0	0.0	

Income Support

BU PCode
63000 P525

State of New Mexico

E4 PCode Detail
(Dollars in Thousands)

Fund	Account		2024-25	2025-26	2026-27	FY 2027 Agency Request				Total	Justification
			Actuals	Opbud	PCF Proj	GF	OSF	ISF/IAT	FF		
97500	521100	Group Insurance Premium	158.9	212.6	297.43	0.0	0.0	0.0	217.4	217.4	
97500	521200	Retirement Contributions	215.5	249.3	268.57	0.0	0.0	0.0	213.2	213.2	
97500	521300	F I C A	80.9	110.1	86.55	0.0	0.0	0.0	79.9	79.9	
97500	521400	Workers' Comp Assessment Fee	0.2	0.2	0	0.0	0.0	0.0	0.2	0.2	
97500	521410	GSD Work Comp Insur Premium	0.0	3.7	0	0.0	0.0	0.0	2.4	2.4	
97500	521500	Unemployment Comp Premium	0.0	1.5	0	0.0	0.0	0.0	1.8	1.8	
97500	521600	Employee Liability Ins Premium	0.0	30.7	0	0.0	0.0	0.0	36.2	36.2	
97500	521700	RHC Act Contributions	22.4	28.8	28.56	0.0	0.0	0.0	22.2	22.2	
	200	Personal services and employee benef	72,666.9	90,938.0	98,822.36	40,457.0	0.0	0.0	53,028.1	93,485.1	
05200	542100	Employee I/S Mileage & Fares	1.1	25.0	0	100.4	0.0	0.0	52.4	152.8	
05200	542200	Employee I/S Meals & Lodging	22.4	25.0	0	424.9	0.0	0.0	160.7	585.6	
05200	542500	Transp - Fuel & Oil	80.1	200.0	0	88.6	0.0	0.0	111.4	200.0	
05200	542600	Transp - Parts & Supplies	72.0	250.0	0	110.8	0.0	0.0	139.3	250.1	
05200	542700	Transp - Transp Insurance	0.9	0.9	0	0.4	0.0	0.0	0.4	0.8	
05200	542800	State Transp Pool Charges	132.0	250.0	0	55.7	0.0	0.0	70.0	125.7	
05200	543200	Maint - Furn, Fixt, Equipment	11.7	150.0	0	66.5	0.0	0.0	83.6	150.1	
05200	543300	Maint - Buildings & Structures	188.2	500.0	0	243.7	0.0	0.0	306.4	550.1	
05200	543400	Maint - Property Insurance	0.6	0.5	0	0.8	0.0	0.0	1.0	1.8	
05200	543500	Maint - Supplies	2.6	10.0	0	4.4	0.0	0.0	5.6	10.0	
05200	543700	Maintenance Services	0.6	2.0	0	0.9	0.0	0.0	1.1	2.0	
05200	543820	Maintenance IT	13.0	0.0	0	11.6	0.0	0.0	14.5	26.1	
05200	543830	IT HW/SW Agreements	3,482.3	6,500.0	0	2,890.8	0.0	0.0	3,624.2	6,515.0	
05200	544000	Supply Inventory IT	28.8	20.0	0	186.1	0.0	0.0	233.9	420.0	
05200	544100	Supplies-Office Supplies	63.0	60.0	0	26.6	0.0	0.0	33.4	60.0	
05200	544400	Supplies-Field Supplies	0.9	0.0	0	149.2	0.0	0.0	205.8	355.0	
05200	544800	Supplies-Education&Recreation	0.0	10.0	0	22.2	0.0	0.0	27.9	50.1	
05200	544900	Supplies-Inventory Exempt	1,184.1	150.0	0	99.4	0.0	0.0	124.9	224.3	
05200	545600	Reporting & Recording	3.2	5.0	0	6.6	0.0	0.0	8.4	15.0	
05200	545900	Printing & Photo Services	34.4	36.0	0	15.9	0.0	0.0	20.1	36.0	
05200	546100	Postage & Mail Services	2,481.5	10,100.1	0	4,227.2	0.0	0.0	5,315.0	9,542.2	
05200	546310	Utilities - Sewer/Garbage	18.4	25.0	0	11.1	0.0	0.0	13.9	25.0	
05200	546320	Utilities - Electricity	146.2	180.0	0	88.6	0.0	0.0	111.4	200.0	
05200	546330	Utilities - Water	13.7	19.0	0	13.3	0.0	0.0	16.7	30.0	
05200	546340	Utilities - Natural Gas	12.1	25.3	0	11.2	0.0	0.0	14.1	25.3	

Income Support

BU PCode
63000 P525

State of New Mexico

E4 PCode Detail
(Dollars in Thousands)

Fund	Account		2024-25	2025-26	2026-27	FY 2027 Agency Request				Justification	
			Actuals	Opbud	PCF Proj	GF	OSF	ISF/IAT	FF		Total
05200	546400	Rent Of Land & Buildings	9,712.3	11,171.9	0	6,967.1	60.8	0.0	4,143.6	11,171.5	
05200	546409	Rent Expense - Interagency	0.0	447.2	0	6.2	0.0	0.0	7.8	14.0	
05200	546500	Rent Of Equipment	252.5	270.0	0	119.6	0.0	0.0	150.4	270.0	
05200	546600	Communications	101.7	105.0	0	46.5	0.0	0.0	58.5	105.0	
05200	546610	DOIT Telecommunications	377.9	1,109.5	0	581.3	0.0	0.0	731.0	1,312.3	
05200	546700	Subscriptions/Dues/License Fee	23.3	30.0	0	13.3	0.0	0.0	16.7	30.0	
05200	546800	Employee Training & Education	12.7	15.0	0	6.6	0.0	0.0	8.4	15.0	
05200	546900	Advertising	4.8	239.5	0	88.6	0.0	0.0	111.4	200.0	
05200	547450	Grants to Other Agencies	434.1	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	547900	Miscellaneous Expense	59.2	108.5	0	44.3	0.0	0.0	55.7	100.0	
05200	547999	Request to Pay Prior Year	105.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	548200	Furniture & Fixtures	421.4	0.0	0	141.9	0.0	0.0	178.5	320.4	
05200	549600	Employee O/S Mileage & Fares	11.2	15.0	0	6.6	0.0	0.0	8.4	15.0	
05200	549700	Employee O/S Meals & Lodging	12.5	17.4	0	8.9	0.0	0.0	11.1	20.0	
97400	543200	Maint - Furn, Fixt, Equipment	1.0	0.0	0	0.0	0.0	0.0	1.0	1.0	
97400	547300	Care & Support	17,056.1	23,851.2	0	0.0	0.0	0.0	23,850.2	23,850.2	
97400	547350	Claims and Benefits Expenses	4.3	0.0	0	0.0	0.0	0.0	0.0	0.0	
97400	547999	Request to Pay Prior Year	0.6	0.0	0	0.0	0.0	0.0	0.0	0.0	
97500	542200	Employee I/S Meals & Lodging	0.2	0.0	0	0.0	0.0	0.0	0.0	0.0	
97500	543820	Maintenance IT	0.0	1.0	0	0.0	0.0	0.0	1.5	1.5	
97500	543830	IT HW/SW Agreements	23.5	1.3	0	0.0	0.0	0.0	0.0	0.0	
97500	547300	Care & Support	1,136,321.9	1,203,816.3	0	28,565.8	0.0	0.0	1,183,999.4	1,212,565.2	
97500	547410	Grants To Public Schools&Univ	0.0	440.4	0	0.0	0.0	0.0	0.0	0.0	
97500	547440	Grants To Other Entities	1,030.0	325.4	0	0.0	0.0	0.0	296.5	296.5	
97500	547450	Grants to Other Agencies	64,225.0	69,429.0	0	0.0	0.0	0.0	0.0	0.0	
97500	547900	Miscellaneous Expense	0.1	0.0	0	0.0	0.0	0.0	0.0	0.0	
97500	547999	Request to Pay Prior Year	392.3	0.0	0	0.0	0.0	0.0	0.0	0.0	
97500	549600	Employee O/S Mileage & Fares	0.4	0.0	0	0.0	0.0	0.0	0.0	0.0	
97500	549700	Employee O/S Meals & Lodging	0.2	0.0	0	0.0	0.0	0.0	0.0	0.0	
97600	547300	Care & Support	0.3	0.5	0	0.5	0.0	0.0	0.0	0.5	
97600	547450	Grants to Other Agencies	600.3	1,012.2	0	0.0	0.0	0.0	0.0	0.0	
	400	Other	1,239,178.6	1,330,950.1	0	45,454.1	60.8	0.0	1,224,326.2	1,269,841.1	
TOTAL EXPENSE			1,311,845.6	1,421,888.1		85,911.1	60.8	0.0	1,277,354.3	1,363,326.2	

Health Care Affordability Fund

BU PCode
63000 P762

State of New Mexico

E4 PCode Detail
(Dollars in Thousands)

Fund	Account		2024-25	2025-26	2026-27	FY 2027 Agency Request				Justification	
			Actuals	Opbud	PCF Proj	GF	OSF	ISF/IAT	FF		Total
72420	520300	Classified Perm Positions F/T	294.0	660.0	0	0.0	722.4	0.0	0.0	722.4	To support new created FY26 approved positions
72420	520800	Annl & Comp Paid At Separation	0.1	0.0	0	0.0	0.0	0.0	0.0	0.0	
72420	521100	Group Insurance Premium	23.6	70.5	0	0.0	107.4	0.0	0.0	107.4	To support new created FY26 approved positions
72420	521200	Retirement Contributions	56.6	187.0	0	0.0	167.2	0.0	0.0	167.2	To support new created FY26 approved positions
72420	521300	F I C A	21.0	76.5	0	0.0	53.3	0.0	0.0	53.3	To support new created FY26 approved positions
72420	521400	Workers' Comp Assessment Fee	0.8	0.1	0	0.0	0.1	0.0	0.0	0.1	GSD Fixed Rates
72420	521410	GSD Work Comp Insur Premium	0.0	1.5	0	0.0	1.0	0.0	0.0	1.0	GSD Fixed Rates
72420	521500	Unemployment Comp Premium	0.2	0.6	0	0.0	0.7	0.0	0.0	0.7	GSD Fixed Rates
72420	521600	Employee Liability Ins Premium	4.3	12.3	0	0.0	14.5	0.0	0.0	14.5	GSD Fixed Rates
72420	521700	RHC Act Contributions	5.9	20.0	0	0.0	13.9	0.0	0.0	13.9	To support new created FY26 approved positions
	200	Personal services and employee benef	406.4	1,028.5	0	0.0	1,080.5	0.0	0.0	1,080.5	
72420	542100	Employee I/S Mileage & Fares	0.9	24.5	0	0.0	1.2	0.0	0.0	1.2	
72420	542200	Employee I/S Meals & Lodging	1.2	24.3	0	0.0	1.2	0.0	0.0	1.2	
72420	542500	Transp - Fuel & Oil	0.0	0.0	0	0.0	1.0	0.0	0.0	1.0	Travel expenses for new ftes
72420	542700	Transp - Transp Insurance	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0	GSD Fixed Rates
72420	543820	Maintenance IT	0.6	0.0	0	0.0	1.5	0.0	0.0	1.5	
72420	544000	Supply Inventory IT	0.9	11.4	0	0.0	9.0	0.0	0.0	9.0	Computers for new staff
72420	544100	Supplies-Office Supplies	2.6	7.5	0	0.0	4.5	0.0	0.0	4.5	supplies for new staff
72420	544900	Supplies-Inventory Exempt	3.3	0.0	0	0.0	5.0	0.0	0.0	5.0	furniture for new staff
72420	545700	ISD Services	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
72420	545710	DOIT HCM Assessment Fees	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
72420	545900	Printing & Photo Services	1.2	0.0	0	0.0	7.0	0.0	0.0	7.0	
72420	546100	Postage & Mail Services	0.8	0.0	0	0.0	1.0	0.0	0.0	1.0	
72420	546400	Rent Of Land & Buildings	0.0	29.2	0	0.0	66.8	0.0	0.0	66.8	New Building Lease
72420	546409	Rent Expense - Interagency	19.3	0.0	0	0.0	0.0	0.0	0.0	0.0	
72420	546500	Rent Of Equipment	0.8	7.3	0	0.0	1.0	0.0	0.0	1.0	
72420	546610	DOIT Telecommunications	0.0	11.6	0	0.0	9.8	0.0	0.0	9.8	Fixed Rates
72420	546700	Subscriptions/Dues/License Fee	0.7	0.0	0	0.0	0.7	0.0	0.0	0.7	
72420	546800	Employee Training & Education	2.6	0.0	0	0.0	2.6	0.0	0.0	2.6	
72420	546900	Advertising	0.0	2.4	0	0.0	0.0	0.0	0.0	0.0	

Health Care Affordability Fund

State of New Mexico

BU PCode
63000 P762

E4 PCode Detail
(Dollars in Thousands)

Fund	Account		2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	FY 2027 Agency Request				Total	Justification
						GF	OSF	ISF/IAT	FF		
72420	547360	Insurance Premiums-non_payroll	68,679.3	145,768.9	0	0.0	201,853.1	0.0	0.0	201,853.1	Increase in enrollment
72420	547900	Miscellaneous Expense	0.1	0.0	0	0.0	0.2	0.0	0.0	0.2	
72420	548200	Furniture & Fixtures	0.0	12.2	0	0.0	8.0	0.0	0.0	8.0	
72420	548300	Information Tech Equipment	0.0	12.2	0	0.0	0.0	0.0	0.0	0.0	
72420	549600	Employee O/S Mileage & Fares	3.1	46.4	0	0.0	5.0	0.0	0.0	5.0	
72420	549700	Employee O/S Meals & Lodging	4.1	42.1	0	0.0	5.0	0.0	0.0	5.0	
	400	Other	68,721.4	146,000.0	0	0.0	201,983.6	0.0	0.0	201,983.6	
72420	555106	OFU - INTRA-Agency	30,000.0	30,000.0	0	0.0	0.0	0.0	0.0	0.0	
	500	Other financing uses	30,000.0	30,000.0	0	0.0	0.0	0.0	0.0	0.0	
TOTAL EXPENSE			99,127.9	177,028.5		0.0	203,064.1	0.0	0.0	203,064.1	

Medicaid Behavioral Health

BU PCode
63000 P766

State of New Mexico

E4 PCode Detail
(Dollars in Thousands)

Fund	Account		2024-25	2025-26	2026-27	FY 2027 Agency Request					Justification
			Actuals	Opbud	PCF Proj	GF	OSF	ISF/IAT	FF	Total	
05200	520300	Classified Perm Positions F/T	0.0	0.0	0	0.0	0.0	305.0	305.0	610.0	
05200	521100	Group Insurance Premium	0.0	0.0	0	0.0	0.0	7.3	7.3	14.6	
05200	521200	Retirement Contributions	0.0	0.0	0	0.0	0.0	58.3	58.3	116.6	
05200	521300	F I C A	0.0	0.0	0	0.0	0.0	23.3	23.3	46.6	
05200	521700	RHC Act Contributions	0.0	0.0	0	0.0	0.0	6.1	6.1	12.2	
	200	Personal services and employee benef	0.0	0.0	0	0.0	0.0	400.0	400.0	800.0	
05200	544100	Supplies-Office Supplies	0.0	0.0	0	0.0	0.0	37.1	37.1	74.2	
05200	547450	Grants to Other Agencies	0.0	0.0	0	0.0	0.0	2,575.0	2,575.0	5,150.0	
97600	545609	Report/Record Inter St Agency	616.1	100.0	0	100.0	0.0	0.0	0.0	100.0	
97600	547300	Care & Support	798,394.9	936,442.0	0	252,349.0	0.0	0.0	927,723.0	1,180,072.0	
	400	Other	799,011.0	936,542.0	0	252,449.0	0.0	2,612.1	930,335.1	1,185,396.2	
TOTAL EXPENSE			799,011.0	936,542.0		252,449.0	0.0	3,012.1	930,735.1	1,186,196.2	

Behavioral Health Services

BU PCode
63000 P767

State of New Mexico

E4 PCode Detail
(Dollars in Thousands)

Fund	Account		2024-25	2025-26	2026-27	FY 2027 Agency Request				Justification	
			Actuals	Opbud	PCF Proj	GF	OSF	ISF/IAT	FF		Total
00000	520300	Classified Perm Positions F/T	0.0	0.0	684.1	0.0	0.0	0.0	0.0	0.0	
00000	521100	Group Insurance Premium	0.0	0.0	50.61	0.0	0.0	0.0	0.0	0.0	
00000	521200	Retirement Contributions	0.0	0.0	130.12	0.0	0.0	0.0	0.0	0.0	
00000	521300	F I C A	0.0	0.0	41.93	0.0	0.0	0.0	0.0	0.0	
00000	521700	RHC Act Contributions	0.0	0.0	16.91	0.0	0.0	0.0	0.0	0.0	
05200	520100	Exempt Perm Positions P/T&F/T	138.6	160.2	314.4	315.4	0.0	0.0	0.0	315.4	
05200	520200	Term Positions	654.4	738.6	3.05	1,519.0	0.0	0.0	0.0	1,519.0	
05200	520300	Classified Perm Positions F/T	2,921.0	3,950.7	4,946.73	2,697.0	0.0	0.0	766.6	3,463.6	
05200	520600	Paid Unused Sick Leave	2.8	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	520700	Overtime & Other Premium Pay	0.8	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	520800	Annl & Comp Paid At Separation	11.8	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	521100	Group Insurance Premium	291.4	430.8	578.72	770.0	0.0	0.0	0.0	770.0	
05200	521200	Retirement Contributions	714.6	887.1	1,002.02	883.3	0.0	0.0	0.0	883.3	
05200	521300	F I C A	270.0	352.7	322.9	351.2	0.0	0.0	0.0	351.2	
05200	521400	Workers' Comp Assessment Fee	6.8	0.6	0	0.6	0.0	0.0	0.0	0.6	
05200	521410	GSD Work Comp Insur Premium	0.0	10.4	0	6.8	0.0	0.0	0.0	6.8	
05200	521500	Unemployment Comp Premium	2.1	4.2	0	5.2	0.0	0.0	0.0	5.2	
05200	521600	Employee Liability Ins Premium	35.3	85.9	0	101.3	0.0	0.0	0.0	101.3	
05200	521700	RHC Act Contributions	74.3	92.2	109.87	91.8	0.0	0.0	0.0	91.8	
24810	520200	Term Positions	71.5	0.0	0	0.0	0.0	0.0	0.0	0.0	
24810	521100	Group Insurance Premium	5.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
24810	521200	Retirement Contributions	13.8	0.0	0	0.0	0.0	0.0	0.0	0.0	
24810	521300	F I C A	5.2	0.0	0	0.0	0.0	0.0	0.0	0.0	
24810	521400	Workers' Comp Assessment Fee	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
24810	521700	RHC Act Contributions	1.4	0.0	0	0.0	0.0	0.0	0.0	0.0	
	200	Personal services and employee benef	5,220.7	6,713.4	8,201.35	6,741.6	0.0	0.0	766.6	7,508.2	
05200	542100	Employee I/S Mileage & Fares	1.7	5.0	0	3.1	0.0	0.0	0.0	3.1	
05200	542200	Employee I/S Meals & Lodging	19.9	18.8	0	20.8	0.0	0.0	0.0	20.8	
05200	542500	Transp - Fuel & Oil	1.0	1.0	0	1.0	0.0	0.0	0.0	1.0	
05200	542600	Transp - Parts & Supplies	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	542700	Transp - Transp Insurance	0.0	0.1	0	0.0	0.0	0.0	0.0	0.0	
05200	542800	State Transp Pool Charges	11.8	13.0	0	13.0	0.0	0.0	0.0	13.0	
05200	543200	Maint - Furn, Fixt, Equipment	1.4	10.0	0	5.0	0.0	0.0	0.0	5.0	

Behavioral Health Services

State of New Mexico

BU PCode
63000 P767

E4 PCode Detail
(Dollars in Thousands)

Fund	Account	2024-25 Actuals	2025-26 Opbud	2026-27 PCF Proj	FY 2027 Agency Request				Total	Justification	
					GF	OSF	ISF/IAT	FF			
05200	543300	Maint - Buildings & Structures	0.0	0.5	0	0.5	0.0	0.0	0.0	0.5	
05200	543400	Maint - Property Insurance	0.0	0.1	0	0.1	0.0	0.0	0.0	0.1	
05200	543500	Maint - Supplies	0.0	1.3	0	1.3	0.0	0.0	0.0	1.3	
05200	543830	IT HW/SW Agreements	4.1	20.0	0	5.0	0.0	0.0	0.0	5.0	
05200	544000	Supply Inventory IT	0.4	5.0	0	1.0	0.0	0.0	0.0	1.0	
05200	544100	Supplies-Office Supplies	7.7	10.0	0	10.0	0.0	0.0	0.0	10.0	
05200	544900	Supplies-Inventory Exempt	55.9	55.0	0	60.0	0.0	0.0	0.0	60.0	
05200	545900	Printing & Photo Services	3.2	5.0	0	5.0	0.0	0.0	0.0	5.0	
05200	546100	Postage & Mail Services	71.4	50.0	0	72.0	0.0	0.0	0.0	72.0	
05200	546400	Rent Of Land & Buildings	510.5	800.0	0	800.0	0.0	0.0	0.0	800.0	
05200	546409	Rent Expense - Interagency	(10.3)	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	546500	Rent Of Equipment	15.9	14.9	0	16.9	0.0	0.0	0.0	16.9	
05200	546610	DOIT Telecommunications	138.3	81.1	0	68.3	0.0	0.0	0.0	68.3	
05200	546700	Subscriptions/Dues/License Fee	52.3	55.1	0	55.1	0.0	0.0	0.0	55.1	
05200	546800	Employee Training & Education	18.8	15.0	0	27.3	0.0	0.0	0.0	27.3	
05200	546900	Advertising	0.9	2.0	0	1.5	0.0	0.0	0.0	1.5	
05200	547450	Grants to Other Agencies	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	547900	Miscellaneous Expense	0.5	1.5	0	1.5	0.0	0.0	0.0	1.5	
05200	547999	Request to Pay Prior Year	66.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
05200	549600	Employee O/S Mileage & Fares	3.1	15.0	0	13.0	0.0	0.0	0.0	13.0	
05200	549700	Employee O/S Meals & Lodging	15.0	30.0	0	28.0	0.0	0.0	0.0	28.0	
24810	543830	IT HW/SW Agreements	1.6	0.0	0	0.0	0.0	0.0	0.0	0.0	
24810	544000	Supply Inventory IT	23.4	0.0	0	0.0	0.0	0.0	0.0	0.0	
24810	546700	Subscriptions/Dues/License Fee	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
24810	547300	Care & Support	0.0	100.0	0	179.5	0.0	0.0	100.0	279.5	
24810	547450	Grants to Other Agencies	971.0	971.5	0	0.0	0.0	0.0	0.0	0.0	
24810	547900	Miscellaneous Expense	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0	
	400	Other	1,985.6	2,280.9	0	1,388.9	0.0	0.0	100.0	1,488.9	
TOTAL EXPENSE			7,206.3	8,994.3		8,130.5	0.0	0.0	866.6	8,997.1	

Developmental Disabilities Support

BU PCode
63000 P519

State of New Mexico
Contract by PCode Detail
(Dollars in Thousands)

Fund	Account	#	Contract Purpose	Actuals	FY 2027 Agency Request				Total	Justification
					GF	OSF	ISF/IAT	FF		
05200	535100	Medical Services	1000	1,840.5	82.0	0.0	0.0	82.0	164.0	
05200	535200	Professional Services	1000	6,771.6	2,458.6	0.0	0.0	2,458.6	4,917.2	
05200	535300	Other Services	1000	1,850.7	3,615.3	0.0	0.0	3,614.3	7,229.6	
05200	535310	Other Services - Higher Ed	1000	316.3	166.6	0.0	0.0	166.6	333.2	
05200	535600	IT Services	1000	0.3	2.5	0.0	0.0	2.5	5.0	
TOTAL EXPENSE				10,779.4	6,325.0	0.0	0.0	6,324.0	12,649.0	

Health Improvement

BU PCode
63000 P520

State of New Mexico
Contract by PCode Detail
 (Dollars in Thousands)

Fund	Account	#	Contract Purpose	Actuals	----- FY 2027 Agency Request -----				Total	Justification
					GF	OSF	ISF/IAT	FF		
05200	535200	Professional Services	1000	0.0	6.0	0.0	0.0	6.0	12.0	
05200	535300	Other Services	1000	1,599.2	195.2	0.0	0.0	405.3	600.5	
05200	535600	IT Services	1000	0.0	680.3	0.0	0.0	680.2	1,360.5	
TOTAL EXPENSE				1,599.2	881.5	0.0	0.0	1,091.5	1,973.0	

State Health Benefits

BU PCode
63000 P521

State of New Mexico
Contract by PCode Detail
 (Dollars in Thousands)

Fund	Account	#	Contract Purpose	Actuals	----- FY 2027 Agency Request -----				Total	Justification
					GF	OSF	ISF/IAT	FF		
72430	535900	Insurance Contract Premiums 1000		7,619.4	0.0	7,650.6	0.0	0.0	7,650.6	
72440	535200	Professional Services 1000		0.0	0.0	5,434.1	0.0	0.0	5,434.1	
72440	535300	Other Services 1000		25,220.3	0.0	25,391.0	0.0	0.0	25,391.0	
TOTAL EXPENSE				32,839.7	0.0	38,475.7	0.0	0.0	38,475.7	

Program Support

BU PCode
63000 P522

State of New Mexico
Contract by PCode Detail
(Dollars in Thousands)

Fund	Account	#	Contract Purpose	Actuals	FY 2027 Agency Request				Total	Justification
					GF	OSF	ISF/IAT	FF		
05200	535200	Professional Services	1000	608.3	714.1	184.7	0.0	1,063.6	1,962.4	
05200	535300	Other Services	1000	595.6	683.8	117.6	0.0	948.6	1,750.0	
05200	535400	Audit Services	1000	277.9	146.0	37.7	0.0	217.4	401.1	
05200	535600	IT Services	1000	48,588.2	27,194.7	64.6	2,300.0	32,287.4	61,846.7	
TOTAL EXPENSE				50,070.1	28,738.6	404.6	2,300.0	34,517.0	65,960.2	

Child Support Enforcement

BU PCode
63000 P523

State of New Mexico
Contract by PCode Detail
(Dollars in Thousands)

Fund	Account	#	Contract Purpose	Actuals	FY 2027 Agency Request				Total	Justification
					GF	OSF	ISF/IAT	FF		
05200	535100	Medical Services	1000	34.9	14.4	2.5	0.0	28.1	45.0	
05200	535200	Professional Services	1000	80.0	38.2	6.7	0.0	74.1	119.0	
05200	535300	Other Services	1000	2,044.1	546.5	95.8	0.0	1,060.9	1,703.2	
05200	535309	Other Services - Interagency	1000	3,669.9	0.0	0.0	0.0	0.0	0.0	
05200	535400	Audit Services	1000	11.6	3.9	0.7	0.0	7.5	12.1	
05200	535600	IT Services	1000	2,631.5	685.5	491.7	0.0	3,656.1	4,833.3	
TOTAL EXPENSE				8,472.0	1,288.5	597.4	0.0	4,826.7	6,712.6	

Medical Assistance

BU PCode
63000 P524

State of New Mexico
Contract by PCode Detail
(Dollars in Thousands)

Fund	Account	#	Contract Purpose	Actuals	FY 2027 Agency Request				Total	Justification
					GF	OSF	ISF/IAT	FF		
05200	535100	Medical Services	1000	26.4	5,968.0	0.0	0.0	5,968.0	11,936.0	
05200	535200	Professional Services	1000	13,135.5	15,205.4	0.0	0.0	21,212.3	36,417.7	
05200	535300	Other Services	1000	26,976.7	17,828.6	0.0	0.0	82,272.5	100,101.1	
05200	535309	Other Services - Interagency	1000	670.5	0.0	0.0	0.0	0.0	0.0	
05200	535310	Other Services - Higher Ed	1000	(146.5)	0.0	0.0	0.0	0.0	0.0	
05200	535400	Audit Services	1000	0.0	715.5	0.0	0.0	715.5	1,431.0	
05200	535500	Attorney Services	1000	17.9	149.6	0.0	0.0	0.0	149.6	
05200	535600	IT Services	1000	44,468.1	2,696.6	9,939.4	759.9	49,205.9	62,601.8	
20520	535200	Professional Services	1000	262.3	0.0	811.4	0.0	0.0	811.4	
20520	535300	Other Services	1000	59.7	0.0	0.0	0.0	0.0	0.0	
97600	535200	Professional Services	1000	41,056.6	0.0	0.0	0.0	0.0	0.0	
97600	535300	Other Services	1000	13,083.9	0.0	0.0	0.0	0.0	0.0	
97600	535600	IT Services	1000	55,971.5	0.0	0.0	0.0	0.0	0.0	
TOTAL EXPENSE				195,582.6	42,563.7	10,750.8	759.9	159,374.2	213,448.6	

Income Support

BU PCode
63000 P525

State of New Mexico
Contract by PCode Detail
(Dollars in Thousands)

Fund	Account	#	Contract Purpose	Actuals	FY 2027 Agency Request				Total	Justification
					GF	OSF	ISF/IAT	FF		
05200	535100	1000	Medical Services Medical exams for commercial drivers	0.8	1.2	0.0	0.0	0.0	1.2	
05200	535200	1000	Professional Services Employment/Income verification services	10,706.8	10,675.1	0.0	0.0	14,741.8	25,416.9	
05200	535300	1000	Other Services Contract staff, alarm systems, interpreter and translation services, janitorial and building maintenance, batch mailing, call center, security guards	33,945.3	20,823.5	0.0	0.0	25,776.4	46,599.9	
05200	535600	1000	IT Services ASPEN updates	19,052.1	19,360.1	0.0	0.0	26,388.3	45,748.4	
97400	535600	1000	IT Services ASPEN updates	2,765.0	0.0	0.0	0.0	26.0	26.0	
97500	535200	1000	Professional Services Food bank contract, SNAP education contracts, legal	5,353.5	1,181.4	0.0	0.0	3,684.8	4,866.2	
97500	535300	1000	Other Services Contracts for commodity supplemental food program, community services block grant, employment and training program, emergency homeless assistance program, homeless meals program, refugee assistance program, and TANF program providers	5,662.3	2,127.6	0.0	0.0	13,513.6	15,641.2	
97500	535500	1000	Attorney Services	379.8	0.0	0.0	0.0	0.0	0.0	
97500	535600	1000	IT Services	626.1	0.0	0.0	0.0	0.0	0.0	
TOTAL EXPENSE				78,491.7	54,168.9	0.0	0.0	84,130.9	138,299.8	

Health Care Affordability Fund

BU PCode
63000 P762

State of New Mexico
Contract by PCode Detail
(Dollars in Thousands)

Fund	Account	#	Contract Purpose	Actuals	FY 2027 Agency Request				Total	Justification	
					GF	OSF	ISF/IAT	FF			
72420	535200	Professional Services	1000	To provide outreach and education, enrollment assistance, as well as work plan and reporting.	0.0	0.0	1,700.0	0.0	0.0	1,700.0	Increase in services
72420	535300	Other Services	1001	For policy implementation for New Mexico Medical Insurance Pool	0.0	0.0	500.0	0.0	0.0	500.0	For professional services
TOTAL EXPENSE					0.0	0.0	2,200.0	0.0	0.0	2,200.0	

State of New Mexico
Contract by PCode Detail
(Dollars in Thousands)

Fund	Account	#	Contract Purpose	Actuals	----- FY 2027 Agency Request -----				Total	Justification
					GF	OSF	ISF/IAT	FF		
05200	535300	Other Services	1001	0.0	2,345.1	0.0	235.4	2,580.5	5,161.0	
05200	535309	Other Services - Interagency	1001	0.0	1,595.9	0.0	0.0	1,595.9	3,191.8	
TOTAL EXPENSE				0.0	3,941.0	0.0	235.4	4,176.4	8,352.8	

BU PCode
63000 P767

Contract by PCode Detail
(Dollars in Thousands)

Fund	Account	#	Contract Purpose	Actuals	----- FY 2027 Agency Request -----				Total	Justification
					GF	OSF	ISF/IAT	FF		
05200	535100	Medical Services	1000	8,017.5	5,975.5	0.0	0.0	537.0	6,512.5	
05200	535200	Professional Services	1000	1,147.9	170.0	0.0	0.0	0.0	170.0	
05200	535300	Other Services	1000	32.7	1.0	0.0	0.0	313.0	314.0	
05200	535309	Other Services - Interagency	1000	0.1	0.0	0.0	0.0	0.0	0.0	
05200	535600	IT Services	1000	274.0	0.0	0.0	0.0	0.0	0.0	
24810	535100	Medical Services	1000	87,509.0	55,877.4	0.0	3,600.0	30,416.6	89,894.0	
24810	535200	Professional Services	1000	1,662.9	0.0	0.0	0.0	0.0	0.0	
24810	535300	Other Services	1000	190.8	3,043.5	169.5	0.0	1,083.4	4,296.4	
24810	535309	Other Services - Interagency	1000	4.0	0.0	0.0	0.0	0.0	0.0	
TOTAL EXPENSE				98,838.9	65,067.4	169.5	3,600.0	32,350.0	101,186.9	

State of New Mexico
SPECIALS, SUPPLEMENTALS AND DEFICIENCIES DFA

(Prepare separate forms for each request)

BU: 63000
Agency: Health Care Authority Department
Program: _____
Analyst: Chrissie Rodriguez
Phone: 505-490-7198

Request Type: Special (FY 27)

Rank: 6

TOTAL SOURCES MUST EQUAL TOTAL USES

(Dollars in Thousands)

Sources		Uses	
Revenue Account	Amount	Uses Account	Amount
Federal Revenues	5,220.0	Contractual Services	9,000.0
General Fund Transfers	3,780.0	Total Uses	9,000.0
Total Sources	9,000.0		
Full Time Equivalents (FTE)			
Type	Amount of FTE	Request is related to a recurring expense	No
	0.00	Request is related to a capital request	No
Total FTE	0.00	Request is related to proposed legislation	No

Language requested for inclusion in General Appropriations Act (Please Follow Legislative Bill Drafting Conventions - See Instructions)

For system enhancements related to institutional care and waiver eligibility processing.

Justification Quantitative Data (Description)

In 2024, 43 ICW change requests were scoped to address longstanding issues and modernization gaps in ASPEN's Institutional Care and Waiver functionality. The enhancements were estimated at \$10 million. With available resources in FY25, 8 CRs were funded and have been completed or are currently in development. The remaining 35 CRs represent critical fixes to support program integrity, reduce processing time, and ensure eligibility rules reflect current Medicaid policy and waiver standards.

These system gaps affect thousands of New Mexicans in need of long-term care services and contribute to significant caseworker burden due to manual workarounds. Automating these processes will result in improved access to care for elderly and disabled individuals and reduce delays in service delivery.

Request: Provide a brief description of what the request does, how the dollars will be spent and explain why it is a nonrecurring need.

This request supports nonrecurring funding to complete critical ASPEN system enhancements related to Institutional Care and Waiver eligibility processing. There are over 30 change requests (CRs) identified as necessary to modernize and streamline complex eligibility rules and case processing in these programs for our elderly or disabled customers needing institutional care or home base waivers with institutional level care. The total estimated cost to complete all 43 CRs was estimated approximately \$10 million in 2024. With limited funding, the department was able to advance 8 CRs, leaving 35 change requests pending.

This funding will support development and implementation of the remaining 35 CRs, allowing the Department to complete needed Institutional Care and Waiver enhancements. These changes will improve program accuracy, ensure federal compliance, reduce manual interventions by field staff, and increase overall efficiency in eligibility processing.

Request: How the dollars will be spent.

The funding will be used for vendor costs (Deloitte) to complete development, testing, and implementation of identified ICW enhancement change requests. These enhancements are necessary to ensure the accurate and timely delivery of services due to changes in Medicaid policy and program operations. System enhancements may be used to make corrections and updates to eligibility logic, improve workflows for case processing, generate required notices, and create reports needed for program integrity.

Request: Explain why request is nonrecurring need.

The bulk of the cost is associated with one-time vendor development and deployment efforts to modernize the system. Once implemented, these enhancements require minimal maintenance and will be absorbed into ongoing operations.

Consequences: Provide a brief description of consequences of not funding a performance and accountability task.

Without this funding, the Department will be unable to complete the remaining CRs. This will prolong manual workarounds, increase the risk of eligibility errors, delay services for individuals in need of long-term care, and increased hardship on this vulnerable population of New Mexicans.

Performance: How will agency performance be affected.

Completing these CRs will reduce caseworker workload, improve processing time, and increase the accuracy of benefit determinations.

Performance: How will agency performance will be improved.

System enhancements will reduce error rates, improve eligibility determination timelines, and ensure that vulnerable New Mexicans receive timely access to long term care services. They will also reduce field workload and enable staff to focus on customer service and high value tasks.

Brief description of problem agency is addressing.

Institutional Care and Waiver programs are among the most complex eligibility determinations in ASPEN. Current system limitations require extensive manual processing, increasing the risk of delays, errors, and inconsistent application of policy. These pending CRs are essential to modernize the system and reduce the administrative burden on eligibility staff, ensuring accurate and timely access to critical long-term care services.

State of New Mexico
SPECIALS, SUPPLEMENTALS AND DEFICIENCIES DFA

(Prepare separate forms for each request)

BU: 63000
Agency: Health Care Authority Department
Program: _____
Analyst: Eli Gallegos
Phone: 505-396-0314

Request Type: Special (FY 27)

Rank: 3

TOTAL SOURCES MUST EQUAL TOTAL USES

(Dollars in Thousands)

Sources		Uses	
Revenue Account	Amount	Uses Account	Amount
Federal Revenues	762.1	Contractual Services	3,048.3
General Fund Transfers	2,286.2	Total Uses	3,048.3
Total Sources	3,048.3		
Full Time Equivalents (FTE)			
Type	Amount of FTE	Request is related to a recurring expense	No
	0.00	Request is related to a capital request	No
Total FTE	0.00	Request is related to proposed legislation	No

Language requested for inclusion in General Appropriations Act (Please Follow Legislative Bill Drafting Conventions - See Instructions)

For enhancements to the summer electronic benefits transfer program eligibility system.

Justification Quantitative Data (Description)

SUN Bucks is a new program that was implemented in State Fiscal Year (SFY 25) and required system enhancements to be completed to start administering the program. During implementation ISD received funds to be able to issue the benefits. For ISD to remain compliant with CFR, system enhancements are needed to fulfill the program requirement as outlined in the CFR. Under the SUN Bucks program, benefits were issued to approximately 290,000 New Mexican students. A 2022 report from the Food Research and Action Center (FRAC) found that only about 17% of children who received free or reduced-price school meals during the school year participated in summer meal programs in New Mexico—highlighting a significant gap in summer food security that the Summer EBT (SUN Bucks) program seeks to address. Notably, 90% of SUN Bucks recipients are directly certified through NMHCA or NMPED programs. This past school year, New Mexico issued over \$39 million in SUN Bucks benefits, generating an estimated economic impact of more than \$100 million statewide.

Request: Provide a brief description of what the request does, how the dollars will be spent and explain why it is a nonrecurring need.

Income Support Division is requesting funding to enhance the eligibility system to complete the requirements needed for SUN Bucks program as outlined in Code of Federal Regulations (CFR).

Request: How the dollars will be spent.

These funds will be utilized to complete the system enhancements needed to comply with CFR.

Request: Explain why request is nonrecurring need.

NMHCA has confirmed with our technology contractor, Deloitte, that after the first year of operation, The nonrecurring need will not be needed as the funds will complete the system to be federally compliant.

Consequences: Provide a brief description of consequences of not funding a performance and accountability task.

If NMHCA is unable to fund and implement these enhancements, the state will be out of compliance with CFR requirements.

Performance: How will agency performance be affected.

ISD will be federally compliant by CFR to make sure the deadlines are adhered to. This will allow customers access to the SUN Bucks benefits timely as outlined in CFR.

Performance: How will agency performance will be improved.

ISD performance will be improved as the benefits will be issued timely as outlined in federal regulations.

Brief description of problem agency is addressing.

This will allow ISD to successfully administer the program based on CFR that is outlined for SUN Bucks Program. SUN Bucks is joint departmental effort between NMHCA and NMPED. While the program relies on NMPED data and rules, NMHCA facilitates the benefits issuance, card services and correspondence with recipients in the State of NM.

State of New Mexico
SPECIALS, SUPPLEMENTALS AND DEFICIENCIES DFA

(Prepare separate forms for each request)

BU: 63000
Agency: Health Care Authority Department
Program:
Analyst: Jason Schupp
Phone: 505-383-2036

Request Type: Special (FY 27)

Rank: 4

TOTAL SOURCES MUST EQUAL TOTAL USES

(Dollars in Thousands)

Sources		Uses	
Revenue Account	Amount	Uses Account	Amount
Federal Revenues	1,789.6	Contractual Services	7,158.4
General Fund Transfers	5,368.8	Total Uses	7,158.4
Total Sources	7,158.4		
Full Time Equivalents (FTE)			
Type	Amount of FTE	Request is related to a recurring expense	No
	0.00	Request is related to a capital request	No
Total FTE	0.00	Request is related to proposed legislation	No

Language requested for inclusion in General Appropriations Act (Please Follow Legislative Bill Drafting Conventions - See Instructions)

To enhance the security of the electronic benefits transfer cards.

Justification Quantitative Data (Description)

From April 2024 – January 2025 we had \$528,394.45 reported to us as stolen benefits. This is only a percentage of the actual stolen benefits during this time period.

Request: Provide a brief description of what the request does, how the dollars will be spent and explain why it is a nonrecurring need.

New Mexico Income Support is requesting funds to cover the costs of enhancing the security of our Electronic Benefit Transaction (EBT) cards from magnetic stripe cards to EuroPay, Mastercard, and Visa (EMV) cards. Magnetic stripe cards are easy to skim data from and clone. EMV cards have an embedded chip within the card that protects card data such as card numbers and pins. This enhancement will allow us to safeguard benefits on clients' cards as New Mexico currently does not reimburse stolen or skimmed benefits.

Request: How the dollars will be spent.

Funds will be utilized to pay Fidelity National Information Services also know as FIS who is our current EBT vendor for the Health Care Authority. Funds will be used to upgrade and enhance our current card stock from a less secure magnetic stripe to a EMV card with an embedded chip. We would replace all EBT cards on a mass scale within the state of New Mexico to ensure that every household who currently has benefits or has applied to receive benefits has the more secure card. The funds would also cover any contractual costs with FIS to include retailer notification and testing, the destruction of old EBT cards, replacement of disaster EBT cards, upgrading current Point of Sale Machines for farmers markets, as well as having a dedicated team to troubleshoot during the transition.

Request: Explain why request is nonrecurring need.

The bulk of the funds would cover one-time fees in implementing tap/EMV cards. Limited funds would be required for ongoing card replacement fees.

Consequences: Provide a brief description of consequences of not funding a performance and accountability task.

If our request for funds is not approved, New Mexico will likely maintain its magnetic stripe cards for EBT. With a less secure card, more benefits will be stolen when the data is skimmed and the card is cloned. Recipients impacted by theft will not have food to feed their families or will have to rely on local food pantries until they get their next months benefit. Recipients will also have to replace their EBT cards and change their pins to further secure their benefits.

Local grocery stores and workers are also impacted if the funding for this request is not approved. When benefits are stolen, they are not spent within the state of New Mexico. This causes a loss of income for the grocery stores as those dollars were not spent there. This can cause loss of hours for staff, loss of positions, loss of food as the customer was not able to buy it before it's expiration date. This will also radiate out into the community as the loss of income and hours means less items being bought in other establishments from the profit made from SNAP dollars being spent.

Performance: How will agency performance be affected.

Agency performance will be improved. With more secure EBT cards, we would receive less calls about stolen benefits, which will allow more time for staff to focus on other areas of need.

Performance: How will agency performance will be improved.

Agency performance will be improved as we will have a more secure system to protect client benefits. Better protection means less calls about stolen benefits which will allow caseworkers more time to focus on other areas of need. Utilizing EMV cards will also bring New Mexico up to the current, most secure method of card technology today.

Brief description of problem agency is addressing.

New Mexico currently utilizes magnetic stripe cards. These cards have become less secure and are easily skimmed and cloned causing recipients who are food insecure to have their food benefits stolen before they are able to supply their household with food for the month.

State of New Mexico
SPECIALS, SUPPLEMENTALS AND DEFICIENCIES DFA

(Prepare separate forms for each request)

BU: 63000
Agency: Health Care Authority Department
Program:
Analyst: Marcos Rivera
Phone: 505-709-5709

Request Type: Special (FY 27)

Rank: 2

TOTAL SOURCES MUST EQUAL TOTAL USES

(Dollars in Thousands)

Sources		Uses	
Revenue Account	Amount	Uses Account	Amount
General Fund Transfers	8,855.2	Other	8,855.2
Total Sources	8,855.2	Total Uses	8,855.2
Full Time Equivalents (FTE)			
Type	Amount of FTE	Request is related to a recurring expense	No
	0.00	Request is related to a capital request	No
Total FTE	0.00	Request is related to proposed legislation	No

Language requested for inclusion in General Appropriations Act (Please Follow Legislative Bill Drafting Conventions - See Instructions)

For support system improvements, staff training and process enhancements to reduce payment errors, strengthen compliance and mitigate future liability under federal quality control requirements.

Justification Quantitative Data (Description)

The New Mexico Income Support Division (ISD) entered its second year of liability under the Quality Control (QC) provisions of Section 16(c) of the Food and Nutrition Act of 2008, as amended, and was assessed a liability of \$8,855.20. In FY 2024, USDA determined there is a 95 percent statistical probability that New Mexico's payment error rate of 14.61 percent exceeds 105 percent of the national performance standard. Additional funding is requested to support system improvements, staff training, and process enhancements to reduce payment errors, strengthen compliance, and mitigate future liability under federal QC requirements.

Request: Provide a brief description of what the request does, how the dollars will be spent and explain why it is a nonrecurring need.

New Mexico Income Support Division entered second year liability under the quality control (QC) provisions of Section 16(c) of the Food and Nutrition Act of 2008, as amended (the Act) and was assessed a liability amount of \$8,855.2. In FY 2024, USDA determined there is a 95 percent statistical probability that New Mexico's payment error rate of 14.61 percent exceeds 105 percent of the national performance measure.

Request: How the dollars will be spent.

New Mexico Income Support division will be seeking to take a 50/50 investment option with the United State Department of Agriculture (USDA): Food and Nutrition Services (FNS). Fifty percent of the funds will be held at risk by the USDA FNS and fifty percent of the funds will be used for new investment that will target the root cause of the payment error rate.

Request: Explain why request is nonrecurring need.

This is a nonrecurring request as this is a one-time SNAP penalty for the FFY2024 PER rate.

Consequences: Provide a brief description of consequences of not funding a performance and accountability task.

New Mexico Income Support will be out of compliance with federal regulation.

Performance: How will agency performance be affected.

Reduction of the payment error rate will lead to fewer SNAP dollars administered in error.

Performance: How will agency performance will be improved.

Improving the SNAP payment error rate will mitigate the risk of the agency from future penalties. The new investment will directly address the root cause errors.

Brief description of problem agency is addressing.

The funds will be used to fulfill the federal penalty and will used for a new investment that will directly target the root cause of the payment error rate.

State of New Mexico
SPECIALS, SUPPLEMENTALS AND DEFICIENCIES DFA

(Prepare separate forms for each request)

BU: 63000
Agency: Health Care Authority Department
Program:
Analyst: Colin Baillio
Phone: 505-629-2684

Request Type: Special (FY 27)

Rank: 1

TOTAL SOURCES MUST EQUAL TOTAL USES

(Dollars in Thousands)

Sources		Uses	
Revenue Account	Amount	Uses Account	Amount
Other Revenues	92,900.0	Other	92,900.0
Total Sources	92,900.0	Total Uses	92,900.0
Full Time Equivalents (FTE)			
Type	Amount of FTE	Request is related to a recurring expense	No
	0.00	Request is related to a capital request	No
Total FTE	0.00	Request is related to proposed legislation	No

Language requested for inclusion in General Appropriations Act (Please Follow Legislative Bill Drafting Conventions - See Instructions)

For maintaining health coverage for lawfully present medicaid enrollees who will lose medicaid eligibility on October 1, 2026. The other state funds appropriation is from the health care affordability fund.

Justification Quantitative Data (Description)

9,680 Medicaid enrollees will lose Medicaid eligibility due to the passage of HR 1, the federal reconciliation bill. Based on Medicaid data, HCA projects that the state would typically draw down \$74.3 million in federal funds to cover this population for 9 months, with \$18.6 million in state funds. In total, the cost of maintaining coverage for this group is 92.9 million.

Request: Provide a brief description of what the request does, how the dollars will be spent and explain why it is a nonrecurring need.

To maintain health coverage for lawfully present Medicaid enrollees who will lose Medicaid eligibility.

Request: How the dollars will be spent.

The dollars will be spent by either providing state-only funded Medicaid or Marketplace coverage.

Request: Explain why request is nonrecurring need.

This request provides funding to maintain coverage for 9,860 low-income New Mexicans who will otherwise become uninsured. The dollars will be spent by either providing state-only funded Medicaid or Marketplace coverage. While using reserves from the Health Care Affordability Fund to maintain coverage is feasible in the short-term, it is not sustainable in the long-term due to other program needs. In the future, HCA and the Legislature will need to work together to identify permanent funding for this program.

Consequences: Provide a brief description of consequences of not funding a performance and accountability task.

9,680 New Mexicans will become uninsured.

Performance: How will agency performance be affected.

Agency performance will be strengthened by having the resources to ensure New Mexicans have access to coverage and care.

Performance: How will agency performance will be improved.

HCA will be enabled to maintain coverage for nearly 10,000 New Mexicans, which not only improves access to care and financial stability, but minimizes uncompensated care for health care providers and supports a healthy workforce.

Brief description of problem agency is addressing.

9,680 Medicaid enrollees will lose Medicaid eligibility due to the passage of HR 1, the federal reconciliation bill. Based on Medicaid data, HCA projects that the state would typically draw down \$74.3 million in federal funds to cover this population for 9 months, with \$18.6 million in state funds. In total, the cost of maintaining coverage for this group is 92.9 million. HR 1 (2025) eliminates Medicaid eligibility for a large number of lawfully present non-citizens who currently qualify. HCA proposes addressing this problem by providing sufficient funding to maintain coverage.

State of New Mexico
SPECIALS, SUPPLEMENTALS AND DEFICIENCIES DFA

(Prepare separate forms for each request)

BU: 63000
Agency: Health Care Authority Department
Program:
Analyst: Marisa Vigil
Phone: 505-629-8476

Request Type: Special (FY 27)

Rank: 1

TOTAL SOURCES MUST EQUAL TOTAL USES

(Dollars in Thousands)

Sources		Uses	
Revenue Account	Amount	Uses Account	Amount
Federal Revenues	14,171.1	Contractual Services	23,859.0
General Fund Transfers	9,687.9	Total Uses	23,859.0
Total Sources	23,859.0		
Full Time Equivalents (FTE)			
Type	Amount of FTE	Request is related to a recurring expense	No
	0.00	Request is related to a capital request	No
Total FTE	0.00	Request is related to proposed legislation	No

Language requested for inclusion in General Appropriations Act (Please Follow Legislative Bill Drafting Conventions - See Instructions)

For information technology improvements and enhancements to the eligibility system to minimize the impact on customers and caseworkers as a result of federal legislation.

Justification Quantitative Data (Description)

H.R. 1 imposes new federal policies that change eligibility rules, verification requirements, and reporting standards for ISD-administered programs. To ensure accurate benefit issuance and maintain compliance, targeted system enhancements are needed to update business rules, automate verifications, integrate data exchanges, and revise system notices. Without these updates, the State will rely on manual workarounds, increasing errors, delaying benefits, and risking fiscal penalties and loss of federal funds. Because many of the changes add to caseworker workloads, automation is essential to maintain efficiency and service quality.

Request: Provide a brief description of what the request does, how the dollars will be spent and explain why it is a nonrecurring need.

The Income Support Division is requesting the funding to enhance the eligibility system as well as other IT solutions to minimize the impact on customers and caseworkers as a result of the H.R.1 federal policy changes.

Request: How the dollars will be spent.

Requested funds will support critical Eligibility System enhancements required to comply with H.R. 1. Funding will be used to design, develop, test, and deploy updates that incorporate new eligibility rules, verification requirements, and reporting functions. Enhancements will update business rules, automate data exchanges, improve user interfaces, and revise system notices—ensuring accurate, timely determinations, compliance with federal law, and protection of program integrity.

Request: Explain why request is nonrecurring need.

This is a one-time system enhancement to get the system compliant to correctly determine eligibility with the federal policy changes.

Consequences: Provide a brief description of consequences of not funding a performance and accountability task.

Failure to fund this will leave the State out of compliance with H.R. 1, risking fiscal penalties, sanctions, and loss of federal funding. Without system enhancements, staff would rely on manual processes, increasing errors, delaying benefits, and diverting resources from client service. Errors could result in overpayments or underpayments, undermining program integrity, public trust, and audit readiness.

Performance: How will agency performance be affected.

Funding will allow system upgrades to automate H.R. 1 requirements, reducing errors, speeding case processing, improving timeliness, and strengthening compliance and audit readiness. Without these enhancements, manual workarounds would increase backlogs, delays, and eligibility errors, risking sanctions and reduced service quality.

Performance: How will agency performance will be improved.

Agency performance will be improved by automating routine processes where possible, ensuring efficient and timely service delivery. These enhancements will support ongoing federal compliance and increase the accuracy of benefit issuance, enabling the agency to better serve eligible New Mexicans.

Brief description of problem agency is addressing.

H.R. 1 imposes new federal mandates requiring major Eligibility System changes to ensure accurate and timely benefit determinations across all ISD-administered programs. Without these enhancements, the State risks non-compliance, inaccurate benefit issuance, and fiscal penalties.

State of New Mexico
SPECIALS, SUPPLEMENTALS AND DEFICIENCIES DFA

(Prepare separate forms for each request)

BU: 63000
Agency: Health Care Authority Department
Program: _____
Analyst: Marisa Vigil
Phone: 505-629-8476

Request Type: Special (FY 27)

Rank: 1

TOTAL SOURCES MUST EQUAL TOTAL USES

(Dollars in Thousands)

Sources		Uses	
Revenue Account	Amount	Uses Account	Amount
Federal Revenues	4,310.3	Contractual Services	6,452.6
General Fund Transfers	2,142.3	Total Uses	6,452.6
Total Sources	6,452.6		
Full Time Equivalents (FTE)			
Type	Amount of FTE	Request is related to a recurring expense	No
	0.00	Request is related to a capital request	No
Total FTE	0.00	Request is related to proposed legislation	No

Language requested for inclusion in General Appropriations Act (Please Follow Legislative Bill Drafting Conventions - See Instructions)

For contracted staffing to assist with implementing multiple system enhancements.

Justification Quantitative Data (Description)

H.R. 1 introduces federal rule changes that require multiple system enhancements to ensure compliance. Implementing these changes concurrently with ongoing system work increases administrative effort and manual workload for caseworkers, raising the risk of case errors. Adding dedicated teams will allow ISD to implement the required enhancements on schedule, reduce manual intervention, improve accuracy, and maintain the Division's standard system development roadmap.

Request: Provide a brief description of what the request does, how the dollars will be spent and explain why it is a nonrecurring need.

H.R. 1 introduces federal rule changes that require multiple system enhancements to maintain compliance. These changes must be implemented alongside ongoing system work, placing additional demands on staff and resources. Adding dedicated teams will enable ISD to implement the required changes in a timely manner, reduce manual workload and administrative effort for caseworkers, minimize case errors, and allow the Division to continue executing its regular system development roadmap.

Request: How the dollars will be spent.

Funds will support dedicated teams to implement H.R. 1 system enhancements, including eligibility updates, automated verifications and notices, data integrations, and testing, ensuring timely, accurate updates while reducing manual workloads and case errors. These teams will allow timely implementation resulting in maintaining federal compliance.

Request: Explain why request is nonrecurring need.

This request is nonrecurring because the funding is needed solely to implement one-time system enhancements required by the H.R. 1 federal rule changes.

Consequences: Provide a brief description of consequences of not funding a performance and accountability task.

Without funding, ISD will be unable to implement required H.R. 1 system enhancements on time, leading to increased manual workloads, higher case error rates, delays in benefit issuance, potential federal noncompliance, and disruption to ongoing system development projects.

Performance: How will agency performance be affected.

Without the additional teams, ISD performance will be strained, leading to slower implementation of system changes, increased manual workloads, higher case error rates, and potential delays in delivering benefits accurately and on time.

Performance: How will agency performance will be improved.

Adding dedicated teams and implementing the H.R. 1 system enhancements will allow HCA to maintain federal compliance, reduce manual workload for caseworkers, minimize case errors, ensure timely and accurate benefit issuance, and allow ISD to maintain its regular system development roadmap.

Brief description of problem agency is addressing.

H.R. 1 federal rule changes require multiple system enhancements to maintain compliance. Without additional teams, ISD risks delays in implementation, increased manual workload for caseworkers, higher error rates, and disruption to ongoing system development projects.

State of New Mexico
SPECIALS, SUPPLEMENTALS AND DEFICIENCIES DFA

(Prepare separate forms for each request)

BU: 63000
Agency: Health Care Authority Department
Program: _____
Analyst: Marisa Vigil
Phone: 505-629-8476

Request Type: Special (FY 27)

Rank: 1

TOTAL SOURCES MUST EQUAL TOTAL USES

(Dollars in Thousands)

Sources		Uses	
Revenue Account	Amount	Uses Account	Amount
Federal Revenues	8,794.5	Contractual Services	13,165.5
General Fund Transfers	4,371.0	Total Uses	13,165.5
Total Sources	13,165.5		
Full Time Equivalents (FTE)			
Type	Amount of FTE	Request is related to a recurring expense	No
	0.00	Request is related to a capital request	No
Total FTE	0.00	Request is related to proposed legislation	No

Language requested for inclusion in General Appropriations Act (Please Follow Legislative Bill Drafting Conventions - See Instructions)

For posting and notice-related costs resulting from revised federal policy changes.

Justification Quantitative Data (Description)

H.R. 1 introduces federal policy changes that alter eligibility, verification, and reporting for ISD programs, requiring a higher volume of client notices. Adequate funding for postage and printing is needed to ensure timely, accurate communication, maintain due process, and avoid customer confusion, increased call center volume, delays, and potential federal penalties.

Request: Provide a brief description of what the request does, how the dollars will be spent and explain why it is a nonrecurring need.

The Income Support Division also requests additional funding to cover increased postage and notice-related costs resulting from the H.R.1 federal policy changes. These changes will require the Division to issue a significantly higher volume of client notifications to ensure households are informed of eligibility impacts, rights, and responsibilities in a timely and federally compliant manner. ISD has estimated that notices will also be issued more frequently with the semi-annual recertification for Medicaid along with additional recipients being subject to the work requirements for both SNAP and Medicaid.

Request: How the dollars will be spent.

The requested funds will cover increased printing and mailing costs for client notices required by H.R. 1, including updated eligibility, verification, and reporting notices, postage for higher-volume and multi-notice mailings, envelopes and materials, and system-generated notices to ensure federal compliance. These funds will enable timely communication to households, reduce confusion, and maintain compliance with federal due process standards.

Request: Explain why request is nonrecurring need.

The implementation of H.R. 1 primarily involves one-time costs, such as sending initial notices to customers to inform them of the new policy changes and their responsibilities. Since these outreach and communication efforts are not ongoing, the associated funding does not need to be recurring.

Consequences: Provide a brief description of consequences of not funding a performance and accountability task.

Without funding, ISD cannot issue timely, accurate notices, increasing errors, customer confusion, staff workload, and risk of federal noncompliance.

Performance: How will agency performance be affected.

Funding will allow ISD to send timely, accurate notices that maintain federal compliance and reduce errors, delays, and customer confusion.

Performance: How will agency performance will be improved.

Performance will improve by sending the correct notices to ensure accuracy, maintain federal compliance, and reduce churn in turn reducing staff administrative effort.

Brief description of problem agency is addressing.

H.R. 1 requires ISD to send a substantially higher volume of federally mandated client notices, creating increased postage and printing costs that must be funded to ensure timely, compliant communication with households.

State of New Mexico
SPECIALS, SUPPLEMENTALS AND DEFICIENCIES DFA

(Prepare separate forms for each request)

BU: 63000
Agency: Health Care Authority Department
Program:
Analyst: Colin Baillio
Phone: 5056292684

Request Type: Special (FY 27)

Rank: 1

TOTAL SOURCES MUST EQUAL TOTAL USES

(Dollars in Thousands)

Sources		Uses	
Revenue Account	Amount	Uses Account	Amount
Other Revenues	30,000.0	Other	30,000.0
Total Sources	30,000.0	Total Uses	30,000.0
Full Time Equivalents (FTE)			
Type	Amount of FTE	Request is related to a recurring expense	No
	0.00	Request is related to a capital request	No
Total FTE	0.00	Request is related to proposed legislation	No

Language requested for inclusion in General Appropriations Act (Please Follow Legislative Bill Drafting Conventions - See Instructions)

For services for the medicaid expansion adult population in the medical assistance program. The other state funds appropriation is from the health care affordability fund.

Justification Quantitative Data (Description)

This \$30,000.0 is in the FY26 base budget and was determined by the Legislative Finance Committee.

Request: Provide a brief description of what the request does, how the dollars will be spent and explain why it is a nonrecurring need.

To cover the cost of the Medicaid Expansion Program.

Request: How the dollars will be spent.

For services for the Medicaid expansion adult population in the medical assistance program of the health care authority in fiscal year 2027. The other state funds appropriation is from the health care affordability fund.

Request: Explain why request is nonrecurring need.

This request provides \$30,000.0 to cover the costs of the Medicaid Expansion program. The dollars will be spent to partially fund the state share of the program. This is being requested as a nonrecurring item because the funding needs for HCAF programs required by law will not be sustainable if this \$30,000.0 is included on an ongoing basis. HCAF cannot sustain this level of funding on an ongoing basis, but there are sufficient funds in reserve to provide these funds for one additional year.

Consequences: Provide a brief description of consequences of not funding a performance and accountability task.

The Legislature will need to find a different source for the funding.

Performance: How will agency performance be affected.

The agency will have sufficient funds to for the Medicaid Expansion program.

Performance: How will agency performance will be improved.

The agency will have sufficient funds to for the Medicaid Expansion program.

Brief description of problem agency is addressing.

The dollars will be spent to partially fund the state share of the Medicaid Expansion program.

State of New Mexico
SPECIALS, SUPPLEMENTALS AND DEFICIENCIES DFA

(Prepare separate forms for each request)

BU: 63000
Agency: Health Care Authority Department
Program: _____
Analyst: Nancy Laster
Phone: 5056180264

Request Type: Special (FY 27)

Rank: 7

TOTAL SOURCES MUST EQUAL TOTAL USES

(Dollars in Thousands)

Sources		Uses	
Revenue Account	Amount	Uses Account	Amount
General Fund Transfers	5,000.0	Contractual Services	5,000.0
Total Sources	5,000.0	Total Uses	5,000.0
Full Time Equivalents (FTE)			
Type	Amount of FTE	Request is related to a recurring expense	No
	0.00	Request is related to a capital request	No
Total FTE	0.00	Request is related to proposed legislation	No

Language requested for inclusion in General Appropriations Act (Please Follow Legislative Bill Drafting Conventions - See Instructions)

To provide assistance for boarding homes to achieve licensed status.

Justification Quantitative Data (Description)

Currently there are 3 licensed boarding homes in the state of NM.

Request: Provide a brief description of what the request does, how the dollars will be spent and explain why it is a nonrecurring need.

The request will provide grant opportunities for locations that are providing services as a boarding home but remain unlicensed due to the high upfront cost of requirements for licensure.

Request: How the dollars will be spent.

Request: Explain why request is nonrecurring need.

Consequences: Provide a brief description of consequences of not funding a performance and accountability task.

Performance: How will agency performance be affected.

Performance: How will agency performance will be improved.

Brief description of problem agency is addressing.

State of New Mexico
SPECIALS, SUPPLEMENTALS AND DEFICIENCIES DFA

(Prepare separate forms for each request)

BU: 63000
Agency: Health Care Authority Department
Program: _____
Analyst: Nick Boukas
Phone: 505-538-0121

Request Type: Special (FY 27)

Rank: 9

TOTAL SOURCES MUST EQUAL TOTAL USES

(Dollars in Thousands)

Sources		Uses	
Revenue Account	Amount	Uses Account	Amount
General Fund Transfers	2,000.0	Contractual Services	2,000.0
Total Sources	2,000.0	Total Uses	2,000.0
Full Time Equivalents (FTE)			
Type	Amount of FTE	Request is related to a recurring expense	No
	0.00	Request is related to a capital request	No
Total FTE	0.00	Request is related to proposed legislation	No

Language requested for inclusion in General Appropriations Act (Please Follow Legislative Bill Drafting Conventions - See Instructions)

For costs associated with competency to stand trial examinations, testing and court-ordered testimony provided by contracted forensic examiners.

Justification Quantitative Data (Description)

Funds will be used to cover contractual costs for forensic evaluators to conduct CST evaluations, psychological and psychiatric testing, and to provide expert court testimony as required. BHSD does not employ in-house forensic examiners, so all CST-related services are provided through external contracts. The appropriation will allow BHSD to keep pace with the growing number and complexity of court-ordered evaluations.

This is a nonrecurring request to address the current surge in CST evaluations and legal proceedings following recent statutory changes under HB8. While ongoing system pressures may continue, the requested funds are intended to serve as a short-term response to immediate increases in demand and costs, while BHSD evaluates longer-term structural needs.

Request: Provide a brief description of what the request does, how the dollars will be spent and explain why it is a nonrecurring need.

BHSD is requesting a non-recurring General Fund appropriation of \$2,000.0 in FY27 to support costs associated with Competency to Stand Trial (CST) examinations, testing, and court-ordered testimony provided by contracted forensic examiners. The funding will address increased demand and complexity in evaluations stemming from changes introduced by House Bill 8 (HB8), as well as shifting legal interpretations involving CST, involuntary commitment, and Assisted Outpatient Treatment (AOT). The request is nonrecurring because it is intended to stabilize system capacity during a period of legal transition and heightened court activity.

Request: How the dollars will be spent.

Funds will be used to cover contractual costs for forensic evaluators to conduct CST evaluations, psychological and psychiatric testing, and to provide expert court testimony as required. BHSD does not employ in-house forensic examiners, so all CST-related services are provided through external contracts. The appropriation will allow BHSD to keep pace with the growing number and complexity of court-ordered evaluations.

Request: Explain why request is nonrecurring need.

This is a nonrecurring request to address the current surge in CST evaluations and legal proceedings following recent statutory changes under HB8. While ongoing system pressures may continue, the requested funds are intended to serve as a short-term response to immediate increases in demand and costs, while BHSD evaluates longer-term structural needs.

Consequences: Provide a brief description of consequences of not funding a performance and accountability task.

Without this funding, BHSD risks falling behind on court-mandated evaluations, which could result in legal non-compliance, court delays, and challenges from the judicial system. Inadequate funding would also limit BHSD's ability to respond to new expectations under HB8 and evolving court interpretations related to CST and AOT, further straining the behavioral health and criminal justice systems.

Performance: How will agency performance be affected.

If unfunded, BHSD's ability to deliver timely, high-quality CST evaluations will be compromised. This could lead to a backlog of court cases, delay in treatment for individuals awaiting evaluation, and reduced confidence in the state's ability to meet its legal obligations related to forensic mental health.

Performance: How will agency performance will be improved.

With this funding, BHSD can ensure continued compliance with court mandates and maintain the timeliness and quality of CST evaluations. It will also allow BHSD to adapt more effectively to the requirements of HB8 and help ensure that individuals involved in the criminal justice system receive appropriate evaluation and intervention in accordance with the law.

Brief description of problem agency is addressing.

BHSD is addressing the increased demand, complexity, and cost of Competency to Stand Trial evaluations resulting from statutory changes (HB8) and evolving judicial expectations. As CST and AOT processes become more legally complex, BHSD must ensure the availability of qualified forensic professionals to meet the growing and shifting needs of New Mexico's courts and behavioral health system.

State of New Mexico
SPECIALS, SUPPLEMENTALS AND DEFICIENCIES DFA

(Prepare separate forms for each request)

BU: 63000
Agency: Health Care Authority Department
Program: _____
Analyst: Nick Boukas
Phone: 505-538-0121

Request Type: Special (FY 27)

Rank: 8

TOTAL SOURCES MUST EQUAL TOTAL USES

(Dollars in Thousands)

Sources		Uses	
Revenue Account	Amount	Uses Account	Amount
General Fund Transfers	5,000.0	Contractual Services	5,000.0
Total Sources	5,000.0	Total Uses	5,000.0
Full Time Equivalents (FTE)			
Type	Amount of FTE	Request is related to a recurring expense	Yes
	0.00	Request is related to a capital request	No
Total FTE	0.00	Request is related to proposed legislation	No

Language requested for inclusion in General Appropriations Act (Please Follow Legislative Bill Drafting Conventions - See Instructions)

For the linkages supportive housing program.

Justification Quantitative Data (Description)

Approximately 90% of the \$5.0 million will cover rental assistance payments for Linkages participants. Due to significant rent inflation statewide, maintaining the current number of vouchers and housing supports requires this sustained investment. The remainder supports temporary hotel/motel accommodations when permanent housing is not immediately available, and monthly home visits by support providers to promote participant stability.

Approximately 90% of the \$5.0 million will cover rental assistance payments for Linkages participants. Due to significant rent inflation statewide, maintaining the current number of vouchers and housing supports requires this sustained investment. The remainder supports temporary hotel/motel accommodations when permanent housing is not immediately available, and monthly home visits by support providers to promote participant stability.

If not funded, BHSD will face reduced program capacity and diminished ability to meet performance targets related to housing stability, behavioral health outcomes, and community-based service delivery. The loss of housing supports will likely increase pressure on crisis and inpatient systems, compromising the division's overall service delivery performance.

Request: Provide a brief description of what the request does, how the dollars will be spent and explain why it is a nonrecurring need.

The requested \$5.0 million in FY27 is a continuation of the non-recurring special appropriation initially awarded in FY26 to sustain the Linkages Supportive Housing Program. This program provides rental assistance and supportive services to approximately 550 individuals statewide with Serious Mental Illness (SMI), Substance Use Disorder (SUD), or co-occurring conditions who are experiencing homelessness or housing instability. Many participants represent entire households, so the program's impact extends beyond individuals to support families whose future success is immeasurable. A major driver of this funding need is the continued escalation in rental costs across New Mexico, which significantly increases the per-voucher expense required to maintain housing stability. This request is non-recurring and essential to preserve the current program capacity and service level funded through the one-time FY26 appropriation.

Request: How the dollars will be spent.

Approximately 90% of the \$5.0 million will cover rental assistance payments for Linkages participants. Due to significant rent inflation statewide, maintaining the current number of vouchers and housing supports requires this sustained investment. The remainder supports temporary hotel/motel accommodations when permanent housing is not immediately available, and monthly home visits by support providers to promote participant stability.

Request: Explain why request is nonrecurring need.

This is a nonrecurring request to continue the FY26 special appropriation funding vehicle, which was not incorporated into the base budget. While the \$5.0 million amount matches the prior year, rising rental prices have made it necessary to maintain this level of funding to preserve the program's expanded capacity and avoid reductions in housing supports.

Consequences: Provide a brief description of consequences of not funding a performance and accountability task.

Failure to fund this request would result in the loss of rental assistance for up to 157 participants, leading to possible displacement, relapse, or increased utilization of emergency rooms, shelters, and crisis services. This would disrupt continuity of care and significantly undermine recovery progress for individuals with behavioral health challenges.

Performance: How will agency performance be affected.

If not funded, BHSD will face reduced program capacity and diminished ability to meet performance targets related to housing stability, behavioral health outcomes, and community-based service delivery. The loss of housing supports will likely increase pressure on crisis and inpatient systems, compromising the division's overall service delivery performance.

Performance: How will agency performance will be improved.

If funded, BHSD will maintain its expanded voucher capacity, stabilize housing for vulnerable individuals and families, and continue to reduce the need for high-cost emergency interventions. Sustaining the Linkages program directly supports performance metrics tied to housing retention, reduction in behavioral health crises, and improved participant recovery outcomes.

Brief description of problem agency is addressing.

BHSD is addressing the challenge of housing instability for vulnerable individuals with behavioral health conditions, particularly amid a rapidly escalating rental market. The Linkages program stabilizes housing and behavioral health outcomes, but sharply rising rent costs threaten program effectiveness without sustained funding.

State of New Mexico
SPECIALS, SUPPLEMENTALS AND DEFICIENCIES DFA

(Prepare separate forms for each request)

BU: 63000
Agency: Health Care Authority Department
Program:
Analyst: Nick Boukas
Phone: 505-538-0121

Request Type: Special (FY 27)

Rank: 5

TOTAL SOURCES MUST EQUAL TOTAL USES

(Dollars in Thousands)

Sources		Uses	
Revenue Account	Amount	Uses Account	Amount
General Fund Transfers	7,000.0	Contractual Services	7,000.0
Total Sources	7,000.0	Total Uses	7,000.0
Full Time Equivalents (FTE)			
Type	Amount of FTE	Request is related to a recurring expense	No
	0.00	Request is related to a capital request	No
Total FTE	0.00	Request is related to proposed legislation	No

Language requested for inclusion in General Appropriations Act (Please Follow Legislative Bill Drafting Conventions - See Instructions)

To implement training for statewide screening, brief intervention and referral to treatment as mandated by the 2025 New Mexico Comprehensive Addiction and Recovery Act to include development, delivery and support of a new training infrastructure aligned with legislative directives.

Justification Quantitative Data (Description)

Request: Provide a brief description of what the request does, how the dollars will be spent and explain why it is a nonrecurring need.

This request provides nonrecurring funding of \$7,000.0 to implement SBIRT training statewide as mandated by Senate Bill 42 (2025). It has been determined by HCA leadership that all components of SBIRT training, including those newly related to the Comprehensive Addiction and Recovery Act (CARA) will reside within BHSD. This funding amount encompasses adequate resources to cover all CARA-related SBIRT training components, alongside existing SBIRT requirements. SBIRT is an evidence-based program designed for universal screening of patients for substance use and mental health conditions, followed by brief interventions and referrals to treatment when needed. The funds will support training for approximately 777 Medicaid providers currently identified, about 300 providers enrolled in the Primary Care Payment Reform Project, 36 acute care hospitals participating in the HealthCare Delivery and Access Act (HDAA) program, roughly 40 Public Health Offices, and additional provider types such as School-Based Health Clinics, Tribal Facilities, and Federally Qualified Health Centers (FQHCs).

Request: How the dollars will be spent.

This request provides \$7,000.0 in nonrecurring funding to cover costs associated with delivering SBIRT training statewide, including the newly mandated CARA training components transferred to BHSD per Senate Bill 42 (2025). The dollars will be spent on provider training development and delivery, technical assistance, curriculum updates, and outreach to multiple provider groups across New Mexico, including hospitals, primary care providers, public health offices, and community clinics. This is a nonrecurring need because the funds are intended to build out the initial statewide training infrastructure and curriculum updates required for SBIRT under the new legislation. Ongoing SBIRT training will be absorbed into future operating budgets.

Request: Explain why request is nonrecurring need.

This funding covers initial development and statewide implementation of SBIRT training aligned with the new SB42 legislative requirements and CARA components. Once this foundational work is complete, ongoing SBIRT training costs will be integrated into the agency's regular operating budget, making this a one-time investment.

Consequences: Provide a brief description of consequences of not funding a performance and accountability task.

Failure to fund this request would leave BHSD without the resources necessary to implement mandatory SBIRT training for hospitals, birthing centers, prenatal care providers, and other healthcare settings as required by SB42. This would compromise the state's ability to meet legislative mandates, potentially impacting early identification and intervention for substance use disorders and mental health conditions across New Mexico.

Performance: How will agency performance be affected.

Without adequate funding, BHSD will be unable to execute the full scope of SBIRT training and support as mandated, leading to gaps in provider readiness and program delivery. This would hinder statewide efforts to improve behavioral health outcomes and reduce substance use-related harms.

Performance: How will agency performance will be improved.

With this funding, BHSD will establish a robust SBIRT training program that meets legislative requirements and ensures providers statewide are equipped to screen, intervene, and refer patients effectively. This will enhance early detection of substance use and mental health concerns, improving care coordination and health outcomes.

Brief description of problem agency is addressing.

Senate Bill 42 (2025) shifts responsibility for SBIRT training to BHSD and mandates universal SBIRT implementation in all hospitals, birthing centers, and prenatal care settings. The agency must expand training capacity to include these new requirements and CARA-related components, which were not previously funded or included in the FY27 budget. Adequate funding is needed to support this rapid expansion and fulfill the state's legislative and public health obligations.

State of New Mexico
SPECIALS, SUPPLEMENTALS AND DEFICIENCIES DFA

(Prepare separate forms for each request)

BU: 63000
Agency: Health Care Authority Department
Program: _____
Analyst: Dana Flannery
Phone: 500-900-9237

Request Type: Special (FY 27)

Rank: 0

TOTAL SOURCES MUST EQUAL TOTAL USES

(Dollars in Thousands)

Sources		Uses	
Revenue Account	Amount	Uses Account	Amount
Federal Revenues	35,215.6	Other	45,000.0
General Fund Transfers	9,784.4	Total Uses	45,000.0
Total Sources	45,000.0		
Full Time Equivalents (FTE)			
Type	Amount of FTE	Request is related to a recurring expense	No
	0.00	Request is related to a capital request	No
Total FTE	0.00	Request is related to proposed legislation	No

Language requested for inclusion in General Appropriations Act (Please Follow Legislative Bill Drafting Conventions - See Instructions)

For certified community behavioral health clinician services.

Justification Quantitative Data (Description)

See federal publications from SAMHSA and CMS, available here: CCBHC Evaluations and Reports | SAMHSA

Request: Provide a brief description of what the request does, how the dollars will be spent and explain why it is a nonrecurring need.

For FY26, approximately \$3,000.0 in existing GRO funding is allocated to support Medicaid match for CCBHC provider claims. Additionally, Medicaid has incorporated roughly \$16,000.0 in capitation payments to assist with covering provider claims costs. For FY27, the agency requests \$9.7 million General Fund to cover the state Medicaid match necessary to sustain and expand CCBHC provider claims costs forecasted to near \$65 million by the end of FY27.?

??HCA was one of 10 states selected participate in the federal Medicaid Certified Community Behavioral Health Clinic (CCBHC) Demonstration program by the Centers for Medicare and Medicaid Services. The CCBHC Demonstration provides enhanced federal Medicaid matching funds to support expansion of designated clinics that provide a comprehensive range of outpatient mental health, substance use disorder, and primary care screening services, serving all ages, regardless of diagnosis, insurance, place of residence, or ability to pay.

Request: How the dollars will be spent.

For FY26, approximately \$3,000.0 in existing GRO funding is allocated to support Medicaid match for CCBHC provider claims. Additionally, Medicaid has incorporated roughly \$16,000.0 in capitation payments to assist with covering provider claims costs. For FY27, the agency requests \$9.7 million General Fund to cover the state Medicaid match necessary to sustain and expand CCBHC provider claims costs forecasted to near \$65 million by the end of FY27.?

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Request: Explain why request is nonrecurring need.

This request is initially non-recurring during the program implementation period with a recurring need once the program is fully implemented.

Consequences: Provide a brief description of consequences of not funding a performance and accountability task.

Populations of Focus: Include adults with serious mental illness (SMI), youth with serious emotional disturbances (SED) and their families, individuals with a substance use disorder (SUD), or a behavioral health condition. New Mexico is dedicated to the treatment and recovery of all people who need help with their behavioral health, and our population of focus ensures that anyone needing help will be provided service.

Performance: How will agency performance be affected.

The CCBHC initiative seeks to expand access to evidence-based behavioral health, substance use disorder services and primary care screening services. CCBHCs must also provide rapid access to behavioral health crisis services for the lifespan, expanding access to this critical service throughout New Mexico.

Performance: How will agency performance will be improved.

CCBHCs expand rapid access to high-quality evidence-based mental health and substance use services.?

Brief description of problem agency is addressing.

The program has been operational from January 1, 2025. Process and timeline for certification of new CCBHCs are here:

[CCBHC_Certification-Process_3.4.25.pdf](#).

HCA is required to participate in a national evaluation of the CCBHC program and to submit data regularly to federal partners. HCA is also reviewing program performance and outcomes monthly, quarterly and during certification/re-certification reviews to ensure fidelity to the model and appropriate outcomes. CCBHCs must submit data and meet stringent timeliness and access requirements designated by HCA. More information is available here: [Resources - New Mexico Recovery Project FAQs](#):

[CCBHC_FAQs_July2025_FINAL-1.pdf](#)?

State of New Mexico
SPECIALS, SUPPLEMENTALS AND DEFICIENCIES DFA

(Prepare separate forms for each request)

BU: 63000
Agency: Health Care Authority Department
Program: _____
Analyst: Dana Flannery
Phone: 505-500-9237

Request Type: Special (FY 27)

Rank: 0

TOTAL SOURCES MUST EQUAL TOTAL USES

(Dollars in Thousands)

Sources		Uses	
Revenue Account	Amount	Uses Account	Amount
Federal Revenues	71.4	Other	100.0
General Fund Transfers	28.6	Total Uses	100.0
Total Sources	100.0		
Full Time Equivalents (FTE)			
Type	Amount of FTE	Request is related to a recurring expense	No
	0.00	Request is related to a capital request	No
Total FTE	0.00	Request is related to proposed legislation	No

Language requested for inclusion in General Appropriations Act (Please Follow Legislative Bill Drafting Conventions - See Instructions)

For traditional healing services in the medicaid program.

Justification Quantitative Data (Description)

No current claims exist for non-beneficiaries who use Traditional Health Care Practices. After Year 1 of the Demonstration, MAD will have utilization data that can inform Year 2 fiscal need. The Year 1 estimated need is \$100,000. This was based on analysis by Arizona for the same program.

Request: Provide a brief description of what the request does, how the dollars will be spent and explain why it is a nonrecurring need.

\$100,000 was requested from General Fund in FY26 to reimburse for Traditional Health Care Services provided to non-Native Americans who are eligible for Indian Health Services. The agency is requesting the same funding in FY27.

Request: How the dollars will be spent.

Traditional Health Care Services provided to non-beneficiaries (non-Native Americans eligible for Indian Health Services) will be reimbursed by Medicaid.

Request: Explain why request is nonrecurring need.

Once utilization of these services is evaluated the recurring need will be included in the base budget.

Consequences: Provide a brief description of consequences of not funding a performance and accountability task.

Non-native americans will not have access to the same services that native americans have access to.

Performance: How will agency performance be affected.

Traditional Health Care Practices will be evaluated by a third party as required under the 1115 Demonstration.

Performance: How will agency performance will be improved.

Non-native americans will have access to the same services that native americans have access to.

Brief description of problem agency is addressing.

"Traditional Health Care Practices reimbursement for traditional healers who serve Medicaid members is 100% federally funded. However, the Special Terms and Conditions specify that "non-beneficiaries" (non-Native American Medicaid members who are eligible for Indian Health Services) are also included in the THCP benefit. Expansion funding is needed to ensure coverage for non-beneficiaries. This program is voluntary for the Nations, Tribes and Pueblos, only one of which (Navajo Nation) has opted to participate to date.

DFA Performance Based Budgeting Data System

Annual Performance Report

Agency: 63000 Health Care Authority Department

Program: P519 Developmental Disabilities Support

The purpose of the developmental disabilities support program is to administer a statewide system of community-based services and support to improve the quality of life and increase the independence and interdependence of individuals with developmental disabilities and children with or at risk for developmental delay or disability and their families.

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Efficiency	Percent of home- and community-based waiver program applicants who have a service plan and budget in place within ninety days of income and clinical eligibility determination	95.0%	90.0%	No	The Centers for Medicare and Medicaid Services require that waiver recipients have an approved budget and service plan in place no more than 90 days after eligibility determination. During FY25 Q4, 102 out of 111 individuals had a service plan in place within 90 days of income and clinical eligibility determination. For the entire FY25, 445 out of 496 individuals had a service plan in place within 90 days of income and clinical eligibility determination.
Explanatory	Number of home visits	N/A	0	N/A	As an abuse, neglect and exploitation prevention strategy the Developmental Disabilities Supports Division conducts face to face Health and Wellness visits in the home of each home and community-based services waiver participant two times per year.
Explanatory	Number of individuals deemed eligible awaiting services	N/A	194	N/A	Historically there has been a long wait for developmental disabilities waiver services. People could wait over 13 years to receive greatly needed services. In FY22 a legislative appropriation was received, along with federal American Rescue Plan funding, to eliminate the waiting list. The elimination of the waiting list took over three years to complete and over 3100 new people have entered into waiver services. The waitlist was cleared for a point in time; people apply for the developmental disabilities' waivers every day. In the 2025 legislative session, DDSD received recurring funding in our base budget to support a no wait list policy. This means DDSD will no longer need to rely on new annual legislative appropriations to bring more people into the waiver programs. Now DDSD will offer waiver services to people who meet criteria monthly. This measure is to ensure a new waitlist does not grow and we are getting people into services timely.
Explanatory	Number of individuals receiving home- and community-based waiver program services	N/A	8,395	N/A	In FY25 8,395 people were supported through developmental disabilities home and community-based services waivers.

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P519 Developmental Disabilities Support

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Explanatory	Percent of home visits that result in an abuse, neglect or exploitation report	N/A	.6	N/A	As an abuse, neglect and exploitation (ANE) prevention strategy the Developmental Disabilities Supports Division conducts face to face Health and Wellness visits in the home of each home and community-based services waiver participant two times per year. If abuse, neglect or exploitation is suspected at one of these visits, DDSD must file and ANE report and document this on the Health and Wellness Visit entry in Therap, the electronic case management system. Less than 1% of all home visits resulted in an abuse, neglect, or exploitation (ANE) report, to be exact 89 of 15,330 visits resulted in ANE report for .6%
Outcome	Number of developmental disabilities supports division health and wellness visits resulting in the division reporting suspected abuse, neglect or exploitation	New	New	Undef	
Outcome	Percent of adults between ages twenty-two and sixty-two years served in a developmental disabilities waiver program, traditional or mi via, who receive employment supports	13.0%	8.0%	No	there were 414 individuals on the Mi Via and Developmental Disabilities Waivers are receiving employment services out of the total of 5,364 people on the waivers between the ages of 22 and 62. This is an employment service utilization rate of approximately 8%. The number does not account for people who are employed and not using waiver employment support or people who may be accessing Division of Vocational Rehabilitation or school based services for exploring employment options. 8% is the ending total of FY25.
Outcome	Percent of general event reports in compliance with general events timely reporting requirements within the two day rule	86.0%	91.0%	Yes	The DD Waiver has a 2 day reporting requirement for certain at risk events that do not meet critical event reporting requirements to DHI. Throughout FY25 general event reporting remained compliant of the 86% threshold statewide at 90.7%, with 26,336 of 29,035 entries meeting reporting requirements. In FY25 Q4 general event reporting remained compliant of the 86% threshold statewide at 94.8%, with 7,733 of 8,461 entries meeting reporting requirements.
Outcome	Percent of people receiving home- and community-based waiver program services who have received their annual level of care assessment	95%	100%	Yes	The Centers for Medicare and Medicaid Services require that waiver recipients have approved medical eligibility. This is done through the level of care process. Every waiver recipient must have an approved level of care in order to receive waiver services. The data reflected 100% for FY25.

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P520 Health Improvement

The purpose of the health improvement program is to provide health facility licensing and certification surveys, community-based oversight and contract compliance surveys and a statewide incident management system so that people in New Mexico have access to quality healthcare and that vulnerable populations are safe from abuse, neglect and exploitation.

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Explanatory	Abuse rate for developmental disability waiver, mi via waiver, medically fragile waiver or the supports and services waiver clients	N/A	4	N/A	The yearly abuse rate is calculated as follows: there were a total number of 344 individuals with at least one substantiated allegation of ANE involving the calculated total average number of individuals receiving waiver services of 8,081 = $344/8081$ = for an abuse rate for SFY25 of 0.0425 x per 100 individuals = 4.256% abuse rates.
Explanatory	Re-abuse rate for developmental disabilities waiver, mi via waiver, medically fragile waiver and other supports and services waiver clients	N/A		N/A	The FY25 annual re-abuse rate is as follows: There were 29 individuals with more than one substantiated allegation of ANE divided by the total average number of individuals served across all four waiver programs which is 8,081 individuals = $29/8081$ = .003588 x per 100 = for a re-abuse rate of .3588 for the SFY25.
Output	Number of adult daycare center regulation review surveys conducted	New	New	Undef	This new measure is to report the percent of completed annual surveys for licensed Adult Daycare Facility in accordences with regulatory requirement 8.370.20.20 (B) NMAC.
Output	Number of caregiver criminal history screening appeal clearance recidivism/ re-offense (conviction) after a successful appeal	10	0	Yes	In FY25 there were (0) no re-offences after applicants had successfully gone through the CCHSP Reconsideration Appeal board.

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P520 Health Improvement

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Output	Percent of acute and continuing care facility survey statement of deficiencies based on the center for medicare and medicaid services form 2567 state form distributed to the facility within ten days of survey exit	85.0%	74.8%	No	ACC's Q4 performance was 52%. Three main factors affected ACC's performance: Vacancy rate, the number of surveyors who can independently survey, and the type of surveys. ACC's vacancy rate for Q4 was 36% with only four surveyors who can independently perform surveys: ACC has two surveyors who are in training. In addition, 57% of the surveys were Complaints and EMTALAs. These two types of surveys generated Federal tags, which accounted for 92% of the total citations written. Federal citations require significantly more writing than non-Federal tags. Currently, ACC has two open positions and two that are in the process of being filled. Since surveyor training is extensive and will likely produce independent surveyors by late 2nd Quarter 2026, the ACC team has implemented weekly survey status reviews to assure timely distribution of the 2567 to the facilities.
Output	Percent of assisted living and related facilities' survey statement of deficiencies distributed to the facility within ten business days of the survey exit date	85.0%	60.5%	No	DHI has experienced a significant increase in survey workload and complaint surveys requiring additional time to complete survey investigations and write and review citations, many times having to investigate onsite at one facility to meet complaint deadline prior to previous survey report being completed. In addition, higher severity deficiencies require additional time for review and corrections to ensure each deficiency is defensible. In addition, in Q4, DHI has revised the Life Safety Code survey process to include a more thorough review, which has resulted in an increase in LSC deficiencies which have taken much longer to write resulting in delay in release of the 2567s.
Output	Percent of complaint surveys for assisted living and related facilities initiated that meet criteria for three-day and fifteen-day high priority	85.0%	100.0%	Yes	All assigned complaints at assisted living facilities that met the criteria for 3-day priority assignment were initiated and completed within the required time frames for all quarters.
Output	Percent of incident management bureau-assigned investigations initiated within required timelines	86.0%	95.1%	Yes	The overall initiation compliance for FY25 is 95.07%. 1,712 initiated on time divided by the total number of IMB reports assigned for investigation 1,808 = 95.07%

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P520 Health Improvement

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Output	Percent of long-term care health facility survey statement of deficiencies based on the center for medicare and medicaid services form 2567 state form distributed to the facility within ten days of survey exit	85.0%	69.0%	No	DHI did not meet the goal of 85% or greater for any of the quarters. Following are some of the challenges we faced: we have one Review Team and federally certified survey reports take priority over licensed oversight work, several new team members were hired over the last year and a lot of training goes into writing defensible citations, which includes a lot more back & forth communication with the Review Team, complex survey reports that involve civil monetary penalties must be reviewed by general counsel for approval, the inability to obtain medical records in a timely manner and not having adequate surveyor staff to meet the work load requirements, is a resource barrier to effectively managing the high volume of complaints received .
Output	Percent of quality management bureau 1915c home- and community-based services waiver program report of findings distributed within twenty-one working days from end of survey	86.0%	89.5%	Yes	For the prior 3 fiscal years QMB, rate of report distribution has steadily increased. However, during the course of FY 2025 we had 3 Surveyors and 1 Supervisor who resigned without completing survey report of finding for which they were the team leads. This resulted in 4 surveys having to be reanalyzed and written, taking extended time to completed. Of the 86 surveys completed in FY 2025, 77 were distributed on time. Of the nine (9) surveys distributed late three (3) were distributed between 21 – 29 days and six were greater than 30 days. For ROFs distributed over the timeline, analysis was completed to determine what issue occurred to delay the distribution and addressed as needed. Overall, distribution rate for FY 2025 was 89.5%
Quality	Percent of abuse, neglect and exploitation investigations completed according to established timelines	86.0%	97.5%	Yes	For FY25 the overall completion rate for investigations is 1738 investigations completed within the appropriate time frame / total number of investigations completed 1783 = 97.47% compliance.

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P520 Health Improvement

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Quality	Percent of developmental disabilities support division clients receiving wellness checks per year as part of the audit conducted by the quality management bureau	15.0%	10.2%	No	830 H/W visits were conducted by QMB in FY25. However, QMB surveyed a total of 1325 individuals in FY 2025. QMB conducts interviews and / or observations of individuals in our samples however, these interviews and observations are completed in the community, as well as other setting. H/W visits conducted by QMB are specific to those individuals receiving in 1) DDW (Living Care Arrangements): Support Living, Family Living, Intensive Medical Living Services and Customized In-Home Supports; and 2) Medically Fragile Waiver (Home Health, Private Duty Nursing). Additionally, when conducting residential visits, QMB conducts a H/W visit for the individual in the compliance survey sample, plus any other individual receiving services and present in the home at the time of the unannounced QMB compliance visit.
Quality	Percent of nursing home citations upheld/ unchanged when challenged through the informal dispute review process	New	New	Yes	N/A
Quality	Percent of nursing home incident reports submitted following participation in a division of health improvement training on reporting requirements	85.0%	95.8%	No	A huge highlight for our team this year has been the updated and newly implemented online reporting system. This system makes it easier for facilities to submit their reports online and allows them to submit their 5 day follow up reports online, which is something they have never been able to do. We have had an overwhelmingly positive response from our facilities with this new system.
Quality	Percent of nursing home survey citations upheld when reviewed by the centers for medicare and medicaid services and through informal dispute resolution process	90.0%	100.0%	Yes	
Quality	Percent of nursing home surveys in which the center for medicare and medicaid services imposed a sanction	New	New	Yes	N/A

Program: P521 State Health Benefits

The purpose of the health benefits program is to effectively administer comprehensive health-benefit plans to state and local government employees.

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Efficiency	Annual loss ratio for the health benefits fund	98/0	117/0	Yes	N/A

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P521 State Health Benefits

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Explanatory	Amount of projected year-end fund balance of the health benefits fund, in thousands	N/A	-\$124.0	N/A	The employee group health benefits program has been operating at a deficit since FY21, with the Legislature allocating more than \$225 million in general fund appropriations to backfill loses caused by a multi-year premium holiday. Total recurring revenue for the fund was well short of total expenses in FY24, posing a significant challenge for the Health Care Authority, even with a 10 percent rate increase that went into effect in FY25. Additionally, the department reported a \$124 million fund balance deficit for the employee benefits fund; however, this appears to be a methodological shift from prior years, when the department reported the fund's cash deficit.
Explanatory	Number of state health plan members who designate the stay well health center as their primary care provider	N/A	2,578	N/A	Reported by Stay Well health center. The increase in members each quarter is consistent with expectations of increasing membership throughout the year.
Explanatory	Number of visits to the stay well health center	N/A	7,385	N/A	Reported by Stay Well health center.
Explanatory	Percent of available appointments filled at the stay well health center	N/A	92.5%	N/A	Reported by Stay Well Health Center.
Explanatory	Percent of eligible state employees purchasing state medical insurance	N/A	78.2%	N/A	N/A
Explanatory	Rate per one thousand members of emergency department use categorized as nonemergent	N/A	16	N/A	BCBS annual = 16.33 PHS annual = 15.55 Total annual = 15.94
Outcome	Number of employees enrolled in the state employee premium assistance program	New	0	Undef	
Outcome	Percent change in the average per-member per-month total healthcare cost	5.0%	2.2%	No	BCBS annual = 6.53%; PHS annual = (2.17%); total annual=2.18%
Outcome	Percent change in total medical premium	5.0%	10.0%	Undef	Change "state employee" to "total"
Outcome	Percent of state group prescriptions filled with generic drugs within three percent of public-entity-peer rate as reported by pharmacy benefits manager	80.0%	84.3%	Yes	Recommend change metric to "Year-over-year change in the percent of generic prescriptions filled as a percentage of total"
Quality	Percent of emergency department visits for medicaid managed care members age thirteen years and older with a principal diagnosis of alcohol or other drug dependence who had a follow-up visit for mental illness within seven days of emergency department visit	61.0%	0.0%	No	
Quality	Percent of state health plan members with diabetes receiving at least one hemoglobin A1C test in the last twelve months	86.0%	54.1%	No	BCBS annual = 62.44% PHS annual= 45.75% Total annual = 54.1%

Program: P522 Program Support

The purpose of program support is to provide overall leadership, direction and administrative support to each agency program and to assist it in achieving its programmatic goals.

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P522 Program Support

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Outcome	Average health care authority staff self-reported score related to having the tools, training and resources needed to telework effectively	80%	0%	Undef	Retired in FY25.
Outcome	Identified dollars to be recovered or collected for each dollar expended by the office of inspector general's medicaid program integrity unit	\$7	\$11	Undef	Research of historical data indicates it is achievable.
Outcome	Percent of administrative cost compared to total claims collected by the restitution services bureau	15%	10%	Yes	There is no change in staff at RSD or major changes in collections to warrant a different target.
Outcome	Percent of automated eligibility decisions including real time eligibility, administrative renewal, auto denial/closure, mass update, auto renewal and individual automation	30%	45%	Yes	Adding "auto renewal and IR automation" to reflect all automated systems.
Outcome	Percent of employees who leave the New Mexico health care authority during the quarter as an annualized number	15%	19%	No	
Outcome	Percent of employees who leave the New Mexico health care authority during the quarter as an annualized number	81%	0%	Undef	
Outcome	Percent of health care authority customers who reported being satisfied or very satisfied with the services they received from the contact center concerning the supplemental nutrition assistance program, medicaid, child support and other services	3%	78%	Undef	Updating the language to include to reflect the call center survey language
Outcome	Percent of New Mexico health care authority positions that are filled as a portion of budgeted positions	95%	98%	Undef	OHR will continue to track vacancy rates for the department. During the last legislative session, the department leveraged our low vacancy rates to secure funding for several divisions. The department is committed to maintaining low vacancy rates.
Output	Number of engagements across health care authority online and digital channels	900,000	8,418,768	Yes	Updated language to cover all digital media now and in the future.
Output	Percent of final decisions on administrative disqualification hearings issued within ninety days of hearing being scheduled	100.00%	100.00%	Yes	This annual metric has been met by OFH in 2023, 2024 and 2025

Program: P523 Child Support Enforcement

The purpose of the child support enforcement program is to provide location, establishment and collection services for custodial parents and their children; to ensure that all court orders for support payments are being met to maximize child support collections; and to reduce public assistance rolls.

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
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DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P523 Child Support Enforcement

Performance Measures:	2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Explanatory Average distribution per child	N/A	\$138	N/A	CSSD anticipates the FY25 12-month average to exceed the FY24 average by about \$1. This is a rolling average of all paying cases per child over the past 12 months. This performance measure was developed to demonstrate what an average monthly obligation may look like for a custodial parent. CSSD is starting to see consistency in this measure, which is the goal. The third quarter is always going to be the highest quarter each year due to tax intercepts, which the majority of which will be disbursed to the family rather than TANF recoveries since the January 2023 implementation of families first distribution rule changes. This performance measure includes data from the Navajo Nation Child Support Program, as they use the Child Support Enforcement System (CSES) however, the NM Child Support program does not manage the two Navajo Nation offices in New Mexico.
Explanatory Percent of noncustodial parents paying support to total cases with support orders	N/A	52%	N/A	This improvement is representative of the work to get right-sized court orders, based on parents actual income and their ability to pay, which national data shows parents will pay when they can afford to pay. This performance measure includes cases from the Navajo Nation Child Support program, who uses the Child Support Enforcement System (CSES) however, the New Mexico Child Support program does not manage the two Navajo Nation offices in New Mexico. Month to month 51%-58% of non-custodial parents are paying child support. This is an important metric because the gap between the percent paying monthly and the percent that receives a payment over the course of the year (78%) is the focus of child support modernization, to ensure that child support is a reliable and consistent source of income for custodial parents for their children so that they can have a healthy childhood.

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P523 Child Support Enforcement

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Outcome	Percent of cases with support orders	85%	83%	No	CSSD saw a nearly full percentage point increase in this measure from the previous quarter, which is a good reversal of a trend we had experienced over the last year. CSSD has been conducting outreach to reach parents who need our services but unaware of what we offer. Those outreach efforts have resulted in an increase in new cases opening, and the vast majority of those cases are establishment cases. The fact that we improved in this measure and new establishment cases are coming our way shows staff are working these cases timely to get court orders established. CSSD's implementation of the Establishment Dashboard as an additional tool to the Caseload Prioritization Tool is assisting staff in meeting expedited process deadlines for establishing a court order within 180 and 365 days.
Outcome	Percent of current support owed that is collected	60%	60%	No	This performance measure is key to getting consistent payments in from the paying parent to the custodial party. FY25 Quarters 1 and 2 are significantly higher than the same quarters in FY24. While the third quarter saw a small decrease from the previous quarter it is still up by nearly a full percentage point than the same quarter in FY24. The FY 25 Target increased from 60% in FY24 to 65%. CSSD may fall short of the 65% Target in FY 25, but continues to focus on establishing and reviewing cases to ensure the obligation is set at an amount based on the non-custodial's actual income and their ability to pay. When right-sized court orders are developed the non-custodial parent will be able to afford the monthly obligation and therefore CSSD will see an improvement in this performance metric over time.
Output	Amount of child support collected, in millions	\$147	\$119	Undef	Total dollars collected is trending a bit lower than the same three quarter in SF24. CSSD does have a smaller caseload which is one factor. There was also one day where the IRS failed to intercept tax refunds from non-custodial parties who were delinquent, which resulted in a loss of about \$40K.

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Annual Performance Report

Program: P523 Child Support Enforcement

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Output	Total dollars collected in child support obligations for each dollar expended by the child support services program	\$4	\$2	Undef	For every dollar spent in FFY24, CSSD collected \$2.18. Due to increased costs for the Child Support Enforcement System Replacement (CSESR) project, the Consolidated Customer Service Center (CCSC) and increased salaries for state staff, the CSSD saw another drop in the annual cost-effectiveness performance level in FFY24. These initiatives are very important initiatives for the program. As CSSD continues to ensure child support obligations are based on the parent's ability to pay, monthly obligations are slightly lower than previous years, which has impacted the overall total collections.

Program: P524 Medical Assistance

The purpose of the medical assistance program is to provide the necessary resources and information to enable low-income individuals to obtain either free or low-cost healthcare.

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Explanatory	Amount of expenditures for children and youth receiving services through medicaid school-based service programs through an individualized education program, in millions	N/A	\$19,103,795	N/A	The MSBS program was expanded in FY22 to include services provided to Medicaid enrolled students outside of an IEP. This includes services provided to students on Individualized Education Plan (IEP), Individualized Family Service Plan (IFSP), a section 504 accommodation plan pursuant to 34 CFR 104.36 (504 plan), an Individualized Health Care Plan (IHCP) or other plan of care. This measure, which reports expenditures for school-based services only captures claims that are submitted through the Medicaid fiscal agent. Some valid services may not have been provided to meet billing rules and therefore would not be submitted as claims. HCA saw an increase in direct service billing however, it continued to fluctuate between quarters due to these direct service provider shortages and seasonality.
Explanatory	Number of justice-involved individuals who are made eligible for medicaid prior to release	N/A	7,334	N/A	
Explanatory	Number of medicaid managed care members being served by patient-centered medical homes	N/A	Discont	N/A	

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P524 Medical Assistance

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Explanatory	Percent of infants and children in medicaid managed care who had six or more well-child visits in the first fifteen months of life	N/A	64%	N/A	<p>The infant well-child measure was monitored as an active performance measure for each MCO as required under the Centennial Care 2.0 MCO Contract and will continue to be monitored quarterly as part of the Turquoise Care (TC) contract performance measures.</p> <p>The percentage of infants in Medicaid managed care who received six or more well-child visits before the age of 15 months decreased by 2 percentage points from CY23 (66%) to CY24 (64%). However, the CY24 MCO aggregate rate of 64% is 5 percentage points above the MY23 Quality Compass National Average (59%).</p>
Outcome	Number of short-term complication admissions for medicaid managed care members with diabetes per one hundred thousand members	16.40	20.93	Yes	<p>HCA gauges MCO performance by applying the Centers for Medicaid and Medicare Services (CMS) Core Set of Adult Health Care Quality Measures for Medicaid (Adult Core Set) technical specifications established by the Agency for Healthcare Research and Quality (AHRQ). The SFY25 data reported is an MCO aggregate rate per 100,000 member months for Members with an inpatient hospital admission that occurred due to complications of diabetes within the fiscal year quarter. This data is reported by Turquoise Care MCO's on a quarterly basis and a lower rate indicates better performance.</p> <p>Comparing the SFY24 total (21.85) to the SFY25 total (20.93), HCA identified a 0.92 percentage point improvement in admissions per 100,000 member months. The SFY25 final rate of 20.93 was 4.53 admissions per 100,000 member months away from meeting the LFC target of 16.40. However, the SFY25 rate of 20.93 aligns with the 2023 Adult Core Set average (20.44) of all states reporting.</p>

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P524 Medical Assistance

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Outcome	Percent of adults in medicaid managed care age eighteen and over readmitted to a hospital within thirty days of discharge	8%	9%	No	The Plan All-Cause Readmission (PCR 18+) metric serves as an indicator of quality healthcare particularly concerning Care Coordination and discharge planning. The CY24 aggregate HEDIS rate of 9% remained steady as compared to the CY23 aggregate HEDIS rate (9%), which is 1 percentage point away from the LFC target of <8%. However, the CY24 HEDIS rate (9%) outperformed the MY23 Quality Compass National Average of 10%. HCA expects to see rates decrease quarter-over-quarter, as a lower rate represents a positive trend for this measure.
Outcome	Percent of children and adolescents in medicaid managed care ages three to twenty-one years who had one or more comprehensive well-care visits with a primary care provider or an obstetrician/ gynecologist during the measurement year	60%	48%	Undef	<p>The Child and Adolescent Well-Care Visits (WCV) measure captures at least one comprehensive well-care visit with a PCP or OB/GYN for members ages three (3) to 21 years. The WCV measure was monitored as an active Tracking Measure (TM) for each MCO as required under the Centennial Care 2.0 contract and will be monitored quarterly as part of the Turquoise Care contract, Performance Measure (PM) #2, to ensure improved health outcomes.</p> <p>The percentage of Members 3-21 years of age in Medicaid managed care who had a well-care visit increased by 3 percentage points from CY23 (45%) to CY24 (48%). This is 12 percentage points from the SFY25 target of 60%. The CY24 MCO aggregate rate of 48% is 4 percentage points from the MY23 Quality Compass National Average of 52%.</p>
Outcome	Percent of children enrolled in medicaid managed care who had four diphtheria, tetanus and acellular pertussis; three polio; one measles, mumps, and rubella; three haemophilus influenza type B; three hepatitis B; one chicken pox and four pneumococcal conjugate vaccines by their second birthday	69%	65%	No	This HEDIS measure is based on calendar year. CY25 will be available in Feb 2026. The CY24 rate of 65% is 4 percentage points away from the SFY25 LFC target of 69%. Although the target was not met, the CY24 MCO aggregate rate of 65% exceeded the MY23 Quality Compass National Average (64%), which is desirable to the state.
Outcome	Percent of discharges for members age six years or older in medicaid managed care who were hospitalized for treatment of selected mental illness diagnoses	55%	0%	Undef	THIS MEASURE WAS MOVED TO BHSD PM P767011

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P524 Medical Assistance

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Outcome	Percent of emergency department visits for medicaid managed care members age six years and older with a principal diagnosis of mental illness who had a follow-up visit for mental illness within thirty days of the emergency department visit	48%	0%	No	THIS MEASURE WAS MOVED TO BHSD PM P7670037
Outcome	Percent of hospital readmissions for children in medicaid managed care ages two through seventeen years within thirty days of discharge	5%	7%	Yes	The percentage of hospital readmissions for children post discharge improved by 1 percentage point from CY23 Q4 (8%) to CY24 Q4 (7%), which is 2 percentage points from meeting the LFC target of <5%. HCA expects to see rates decrease quarter-over-quarter, as a lower rate represents a positive trend for this measure.
Outcome	Percent of medicaid managed care member deliveries who received a prenatal care visit in the first trimester or within forty-two days of eligibility	80%	77%	No	<p>The timeliness of prenatal and postpartum care measure was a legacy performance measure for each Managed Care Organization (MCO), as required under the initial Centennial Care 1.0 MCO contract in 2014. HCA removed this mandatory performance measure from the MCO contracts in CY19. Then, in CY20, HCA reinstated this performance measure into the Centennial Care 2.0 MCO contracts.</p> <p>This measure will continue to be monitored in Turquoise Care as Performance Measure (PM) #3. The MCOs shall meet performance targets specified by HCA and failure to meet the HCA designated target for individual MCO performance measures during the applicable calendar year will result in a monetary penalty for the Agreement Year. Each MCO is required to collect, track, trend, and report performance measures on a quarterly basis to HCA. The data is reported and collected on a calendar year reporting period.</p>
Outcome	Percent of medicaid managed care member deliveries with a postpartum visit on or between seven and eighty-four calendar days after delivery	66%	72%	Yes	This HEDIS measure is based on the calendar year. CY25 will be available in Feb 2026. For CY24 the 72% exceeded the LFC target of 66% by 6 percentage points.

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P524 Medical Assistance

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Outcome	Percent of medicaid managed care members age eighteen years and older as of April 30 of the measurement year who were diagnosed with a new episode of major depression during the intake period and received at least one hundred eighty calendar days of continuous treatment with an antidepressant medication	35%	52%	Yes	The percentage of Members eighteen years and older as of April 30th of the measurement year who were diagnosed with a new episode of major depression during the intake period and received at least one-hundred eighty calendar days of continuous treatment with an antidepressant medication increased by 5 percentage points from CY23 (47%) to CY24 (52%), which exceeded the LFC assigned target of 35% by 17 percentage points.
Outcome	Percent of medicaid managed care members ages eighteen to sixty-four years with schizophrenia, schizoaffective disorder or bipolar disorder who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year	77%	83%	Undef	The percentage of Members 18-64 years of age with schizophrenia, schizoaffective disorder or bipolar disorder who were dispensed and antipsychotic medication and a diabetes screening test during the measurement year increased by 1 percentage point from CY23 (82%) to CY24 (83%), which is 6 percentage points above the LFC target of 77%. Additionally, the CY24 MCO aggregate rate of 83% is 2 percentage points above the MY23 Quality Compass National Average (81%).
Outcome	Percent of medicaid managed care members ages five through sixty-four who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year	55%	79%	Undef	This HEDIS measure is based on calendar year. This report covers CY24. CY24 increased by 3 percentage points from CY23 (76%) to CY24 (79%). The CY24 rate of 79% exceeded the LFC target of 55% by 24 percentage points, which is desirable to the state. Additionally, the CY24 MCO aggregate rate of 79% is 13 percentage points above the MY23 Quality Compass National Average (66%).
Outcome	Percent of medicaid managed care members participating in member rewards	47%	0%	No	This measure tracks the cumulative participation rate within the fiscal year and concludes with data through SFY25 Q4. The final participation rate reached 47%, which meets the SFY25 LFC target of 47%. This outcome reflects HCA's efforts through the Turquoise Engagement and Rewards Program to increase overall member engagement, particularly around the importance of preventive visits and condition management activities.

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P524 Medical Assistance

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Outcome	Percent of medicaid managed care members with a nursing facility level of care who are being served in a noninstitutional setting	85%	85%	Yes	HCA met the LFC-assigned target (85%) for SFY25. HCA saw a 3-percentage point decrease from SFY24 (88%) to SFY25 (85%). Contributing factors for the decrease could be from increased housing costs and lack of affordable housing allowing members to transition from a Nursing Facility (NF) back to the community. Other contributing factors include direct care workforce shortages of caregivers to provide personal care services that allow a member with a NFLOC to reside at home, significantly increasing Assisted Living Facility (ALF) rates with funding provided in 2025 House Bill 2. Rates were increased by 34% on average.
Outcome	Percent of members ages three to seventeen years enrolled in medicaid managed care who had an outpatient visit with a primary care physician or obstetrician/gynecologist and who had evidence of counseling for physical activity during the measurement year	58%	39%	No	This HEDIS measure is based on the calendar year. CY25 will be available in Feb 2026. Foyr CY24 there was a decrease by 25 percentage points from CY23 (64%) to CY24 (39%), which is 19 percentage points below the LFC target (58%). The observed decline in performance is attributed to one MCO solely reporting administrative claims data, and one MCO utilizing a hybrid data collection methodology which consists of both administrative claims data and medical record review.
Outcome	Percent of members eighteen to eighty-five years with type one or type two diabetes who received a kidney health evaluation	65%	44%	No	NCQA then replaced HBD in MY2024 with Glycemic Status Assessment for Patients with Diabetes (GSD), which includes results of the most recent glycemic status assessment (HbA1c or GMI) performed during the measurement year that are greater than 9% and it should be noted that missing test results, or if a test was not done during the measurement year, as documented through laboratory data or medical record review, are counted in the numerator events for this measure. The CY24 data reported above reflects an MCO aggregate percentage of Glycemic Status Assessment for Patients with Diabetes (GSD).

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P524 Medical Assistance

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Outcome	Percent of members under age twenty-one years enrolled in medicaid managed care who received a comprehensive or periodic oral evaluation with a dental provider during the measurement year	68%	53%	No	The percentage of infants in Medicaid managed care who received six or more well-child visits before the age of 15 months decreased by 2 percentage points from CY23 (66%) to CY24 (64%). However, the CY24 MCO aggregate rate of 64% is 5 percentage points above the MY23 Quality Compass National Average (59%).
Outcome	Percent of new substance use disorder episodes that result in treatment initiation through an inpatient substance use disorder admission, outpatient visit, intensive outpatient encounter, partial hospitalization, telehealth visit or medication treatment within fourteen days	50%	50%	Yes	This HEDIS measure is reported on calendar year. CY25 data will be available in Feb 2026. The CY24 50% met the LFC target. Additionally, the CY24 MCO aggregate rate of 50% is 5 percentage points above the MY23 Quality Compass National Average (45%).
Outcome	Percent of nonemergent utilization of all emergency department utilization that is categorized as nonemergent care	50%	57%	Yes	The use of the ER for non-emergent visits remained consistent from SFY24 Q4 (57%) to SFY25 Q4 (57%). In comparison to the LFC target of 50%, HCA is 7 percentage points from meeting the SFY25 target.
Output	Number of medicaid managed care members who have received treatment for hepatitis C in the reporting year	1,200	1,825	Yes	In SFY25, the aggregate MCO reported count was 1825 total Members receiving HCV treatment. HCA exceeded the SFY25 target of 1200. MCOs have attributed the increase of 1341 (SFY24) to 1825 (SFY25) to the returned workforce of Care Coordinators (CCs), Community Health Workers (CHWs), and Certified Peer Support Worker (CPSW). Additionally, the easy access to testing supports the increase in the total number of Medicaid Members receiving treatment for Hep C.
Output	Number of unique medicaid managed care members receiving behavioral health services by a nonbehavioral health provider	150,000	0	No	
Output	Number of unique medicaid managed care members receiving behavioral health services from a behavioral health provider	240,000	0	No	

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Annual Performance Report

Program: P524 Medical Assistance

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Output	Number of unique medicaid managed care members with a telemedicine visit at the end of the previous calendar year	140,000	132,035	Undef	The total unique Medicaid managed care members with a telemedicine visit in CY24 is 132,035, which decreased by 15,513 telemedicine visits from CY23 (147,548). The CY24 total is below the SFY25 LFC target of 140,000. The decrease can be attributed to the exit of Western Sky (WSSC) exiting the market as of June 30, 2024 and two new MCOs joining Turquoise Care as of July 1, 2025. Molina Health Care (MHC) and United Health Care (UHC) have recently established a baseline for this measure.
Output	Percent of provider payments included in value-based purchasing arrangements	50%	62%	Yes	This measure is based on calendar year. CY25 data will be available Feb 2026. CY24 DS IPT (62%) exceeds the SFY25 LFC Target of 50% by 12 percentage points. Due to claims running out and lag time associated with claims, VBP reporting is available 45 days after the quarter ends.
Quality	Percent of emergency department visits for medicaid managed care members age thirteen years and older with a principal diagnosis of alcohol or other drug dependence who had a follow-up visit for mental illness within seven days of emergency department visit	0	0.0%	Undef	THIS IS BHSD PM P767037. REMOVE FROM MAD PERFORMANCE MEASURES.
Quality	Percent of members reporting satisfaction with New Mexico's medicaid services	82%	80%	No	Member satisfaction in CY24 of 80% decreased by 2 percentage points from 82% in CY23, which was 2 percentage points from the LFC target of 82%. The Annual CAHPS survey results for CY25 will be available in July 2026.

Program: P525 Income Support

The purpose of the income support program is to provide cash assistance and supportive services to eligible low-income families so they can achieve self-sufficiency. Eligibility requirements are established by state law within broad federal statutory guidelines.

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Outcome	Average supplemental nutrition assistance program benefit payment, per client	\$300.00	\$184.31	No	For SFY25 the average SNAP benefit amount remained the same as there was no significant changes to allotment amounts or drastic changes to the SNAP caseload.

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P525 Income Support

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Outcome	Number of supplemental nutrition assistance program households who received the state supplemental nutrition assistance program supplement	0	295,284	Yes	ISD identified a growing need to protect this vulnerable population from food insecurity. In response, ISD proposed increasing the State SNAP supplement to a maximum of up to \$100 per month per household, beginning October 1, 2024. Since implementation, ISD has observed a steady increase in eligible households enrolling in the program each month.
Outcome	Percent of adult temporary assistance for needy families recipients who are mandatory for the New Mexico works program that obtained any new earned income during the report period that closed the case	37%	8%	Undef	FY25 improved to 7.8% over FY24 0.91%. For Q4, there were 96 adults enrolled in EWP, 4,928 adults enrolled in TANF and 29 in Wage Subsidy, totaling 5,053 unique adult recipients. After combining these TANF Categories of Eligibility (COE), Deloitte pulled a query of this sample directly out of the ASPEN system. Of the same categories identified, 349 TANF cases closed due to new work-related income that exceeded the net and gross income guidelines for the TANF program. This equates to a total of 7.77% of TANF participants that became ineligible for TANF due to new work-related income
Outcome	Percent of adult temporary assistance for needy families recipients who obtained any new unearned income during the report period that closed the case	45%	30%	Undef	This data is received from the NM Department of Workforce Solutions of all TANF mandatory adults who have obtained new income. This percentage is a cumulative average for the fiscal year.
Outcome	Percent of all parent participants who meet temporary assistance for needy families federal work participation requirements	45%	45%	Yes	The federal government measures a state's success in administering the TANF program using the Work Participation Rate (WPR). This measure is reported based on the Federal Fiscal Year. Therefore, the data reflected is in accordance the FFY. This will ensure an accurate presentation of quarterly work participation data. Due to the way in which the information is gathered and validated, there is a Quarter delay in the reporting which means as we move into the next quarter, performance percentages will change as cases are validated. All states are required to submit a monthly disaggregate report.

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P525 Income Support

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Outcome	Percent of expedited or emergency supplemental nutritional assistance program cases meeting federally required measure of timeliness within seven days	98%	96%	No	ISD saw progress throughout SFY25. ISD field operations staff continue to meet regularly regarding workload processes to ensure we continue to process timely benefits for all New Mexicans. Timeliness data is shared on a weekly basis amongst all bureaus of ISD to ensure management from every area is aware of the targets, the statuses and to collaborate on continuous improvement. While ISD's target is set by the Legislative Finance Committee (LFC), the division is also working with the USDA Food and Nutrition Service (FNS) to meet the federal target of 95% timeliness.
Outcome	Percent of mandatory temporary assistance for needy families adults with an active work participation agreement who are in compliance with the temporary assistance for needy families work requirements	97.0%	58.8%	No	Upon approval of TANF by ISD eligibility staff, a referral is generated to the NMW Service Provider via the WorkPath application. The NMW provider then schedules the initial appointment with the TANF participant and they review what their career path and educational goals are. To help the participant achieve their goals, the service providers assigns the individual activities that are captured on the Work Participation Agreement (WPA). Every month, a participant is expected to submit a timesheet that captures their participation hours in their activity. Hours are then validated by the service provider to ensure participations meets the criteria evaluated in the federal Work Participation Rates (WPR) as reported above in measures 525001 and 525002.
Outcome	Percent of non-expedited or non-emergency supplemental nutritional assistance program cases meeting the federally required measure of timeliness within thirty days	98%	96%	No	In Q4 of SFY25, ISD met the SNAP Expedite Timeliness target and has exceed the federal timeliness measure of 95% ISD field operations staff continue to meet regularly regarding workload processes to ensure we continue to process timely benefits for all New Mexicans. Timeliness data is shared on a weekly basis amongst all bureaus of ISD to ensure management from every area is aware of the targets, the statuses and to collaborate on continuous improvement.

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P525 Income Support

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Outcome	Percent of supplemental nutrition assistance program and medicaid recertifications, including supplemental nutrition assistance program and medicaid benefits, that were approved ongoing and terminated during reporting period	96.0%	94.5%	No	In FY25, ISD made significant strides to increasing the renewal timeliness rates for SNAP and Medicaid. ISD was successful in reducing and maintaining back logged cases which has resulted in increases to all timeliness measures. ISD continues to meet daily to discuss workload and staff allocation to ensure that we maintain timeliness standards.
Outcome	Percent of supplemental nutrition assistance program payment errors showing benefits were overissued during reporting period	1.20%	14.92%	Yes	This data represents SNAP households identified with a Quality Control error, that resulted in an overissuance of SNAP benefits. Overissuance is defined as a household receiving more benefits than they are eligible for or being ineligible for SNAP benefits. These are cases identified from the SNAP Quality Control Sample that is reported to the USDA Food and Nutrition Services to establish the overall SNAP Payment Error Rate for New Mexico. With the root cause errors being clients not reporting information or reporting incorrect information. These errors are a result of the expiration of the remaining PHE unwinding efforts which suspended interviews for new SNAP applications and renewals. Clients re adjusting to interviews and verification requirements have lead to many cases under reporting income or household compositions. In addition to HCAs income support divisions relatively new work forces lead to many of the errors in question.
Outcome	Percent of supplemental nutrition assistance program payment errors showing percent under-issued during reporting period	1.20%	1.20%	Yes	SFY 2025 represents the first three quarters of the federal fiscal year. There is a three month delay in reporting, due to the timing of the Quality Control reviews. For the first three quarters of SFY 25, a total of \$3,361 SNAP benefits were underissued to 23 cases. The average underissuance error per case was \$146.13.
Outcome	Percent of supplemental nutrition assistance program recertifications processed in a timely manner	75.0%	90.9%	Yes	The USDA/FNS requires SNAP households must complete an annual for ongoing eligibility. Households that submit their application on or before the 15th of the month in which their renewal is due are entitled to receive a timely determinations by the end of the recertification month.

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P525 Income Support

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Outcome	Percent of temporary assistance for needy families two-parent recipients meeting federal work participation requirements	60%	20%	No	The federal government measures a state's success in administering the TANF program using the Work Participation Rate (WPR). This measure is reported based on the Federal Fiscal Year. Therefore, the data reflected is in accordance the FFY. This will ensure an accurate presentation of quarterly work participation data. Due to the way in which the information is gathered and validated, there is a Quarter delay in the reporting which means as we move into the next quarter, performance percentages will change as cases are validated. All states are required to submit a monthly disaggregate report.
Outcome	Percent of two-parent temporary assistance for needy families meeting federal work participation requirements	Discont	0%	No	
Output	Number of homes heated and cooled in New Mexico via the low-income home energy assistance program	4,000	41,919	Yes	This figure is derived out of ASPEN and is a report of all households that received a LIHEAP benefit in SFY25.
Output	Number of meals provided to New Mexican families via the supplemental nutrition assistance program	1,250,000	299,530,300	Yes	The number of meals provided in SFY 2025 saw continued decrease in meals provide with the incorporation of Able bodied adult work requirements. The return to requirements resulted in a decrease to SNAP eligibilty rolls and a decrease in the number meals served overall.
Output	Number of New Mexican families provided with necessities and shelter for the last full month via the temporary assistance for needy families program	6,000	6,833	Yes	The data captured here comes directly from ASPEN is a the number of households that received a TANF cash payment for the final month of the fiscal year.

Program: P762 Health Care Affordability Fund

The purpose of the health care affordability fund program is to improve access to healthcare by helping New Mexicans pay for healthcare insurance and supporting the planning, design and implementation of healthcare coverage initiatives for uninsured New Mexicans.

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Explanatory	Average per member per month small business premium discount	N/A	0	N/A	New measure starting FY27.
Explanatory	Fund balance in the healthcare affordability fund at the end of the fiscal year	N/A	0	N/A	New measure starting FY27
Explanatory	Number of businesses participating in the small business premium relief initiative	N/A	0	N/A	New measure starting FY27
Explanatory	The average monthly marketplace affordability program out-of-pocket subsidy provided to eligible enrollees between zero and four hundred percent of the federal poverty level	N/A	0	N/A	New measure starting FY27

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P762 Health Care Affordability Fund

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Explanatory	The average monthly marketplace affordability program premium subsidy provided to eligible enrollees between zero and four hundred percent of the federal poverty level	N/A	0	N/A	New measure starting FY27
Outcome	Increase in percent of marketplace enrollees in turquoise plans	0	0.0%	Yes	No data for FY25 measure as FY26 is the first year.
Outcome	Increase in percent of small group enrollees in a platinum plan	0	0.0%	Yes	Discontinue measure FY27 added a LFC requested replacement measure.No data for FY25 measure as FY26 is the first year.
Outcome	Percent of premium covered by small business premium relief initiative	New	0%	Undef	New measure starting FY27
Outcome	Percent of state employee premium assistance-eligible population enrolled in marketplace coverage who are also enrolled in a turquoise plan	New	0	Undef	New measure starting FY27
Outcome	Total dollars saved for consumers across all programs	0	0	Yes	No data for FY25 measure as FY26 is the first year.
Outcome	Total enrollment in the coverage expansion plan	0	0	Yes	No data for FY25 measure as FY26 is the first year.

Program: P766 Medicaid Behavioral Health

The purpose of the medicaid behavioral health program is to provide the necessary resources and information to enable low-income individuals to obtain either free or low-cost behavioral healthcare.

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Outcome	Percent of adults with mental illness or substance use disorders receiving medicaid behavioral health services who have housing needs who receive assistance with their housing needs	Discont	0%	No	
Outcome	Percent of people with a diagnosis of alcohol or drug dependency who initiated treatment and received two or more additional services within thirty-four days of the initial visit	19%	18%	No	This measure is reported semi-annually on the calendar year. For the first half of CY25, overall engagement in AOD treatment across all reporting MCOs is 17.61%, exceeding the MY23 HEDIS national benchmark of 14.79% and slightly below the FY25 target of 19%.

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P766 Medicaid Behavioral Health

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Outcome	Percent of readmissions to same level of care or higher for children or youth discharged from residential treatment centers and inpatient care	5%	13%	No	<p>In FY25 Q4, the readmission rate for children and youth discharged from behavioral health inpatient psychiatric facilities and residential treatment centers to the same or higher level of care was 6.41%. This reflects notable progress compared to the previous quarter's refreshed rate of 14.59%, underscoring advancements in care transitions and discharge planning. The year-to-date average stands at 12.73%, representing cumulative system performance over the past 12 months.</p> <p>As with prior quarters, the impact of claims lag should be considered. The FY25 Q4 rate will be refreshed in the FY26 Q1 report for a more complete view.</p>
Output	Number of individuals served annually in substance use or mental health programs administered through the medicaid and non-medicaid programs administered by the health care authority	210,000	207,020	No	<p>This measure is reported quarterly on a calendar-year basis to align with Medicaid's schedule, providing a cumulative, unduplicated count of individuals served.</p> <p>By the end of Q2 CY25, 207,020 individuals were served, slightly less than the annual target of 210,000. Due to the 90-day claims submission window, current headcount figures may be revised in future reports. A more accurate count is expected in the next quarterly release, once additional claims are processed.</p>

Program: P767 Behavioral Health Services

The purpose of the behavioral health services program is to lead and oversee the provision of an integrated and comprehensive behavioral health prevention and treatment system so the program fosters recovery and supports the health and resilience of all New Mexicans.

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Explanatory	Number of certified community behavioral health clinics enrolled within the medicaid program	N/A	5	N/A	<p>As of Fiscal Year 2025, five CCBHCs have been certified, serving San Juan, McKinley, Sandoval, Santa Fe, Bernalillo, Doña Ana, and Eddy counties. This expansion has significantly increased access to behavioral health services across seven counties in New Mexico. Looking ahead, six additional providers have applied for certification and plan to begin operations in 2026, positioning the program for substantial growth and further extending critical behavioral health care to communities statewide.</p>

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P767 Behavioral Health Services

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Explanatory	Number of medicaid managed care members with alcohol abuse or dependence who had two or more additional visits within thirty-four days	N/A	16	N/A	This annual measure is based on the calendar year. CY25 data will be available in Feb 2026. The 16.12% of members, equivalent to 1,606 individuals, met the engagement criteria. This exceeds the 2023 NCQA national average of 12.4%, suggesting that New Mexico is successfully sustaining treatment engagement for individuals with alcohol use or dependence. The result may be partly attributed to an increase in Intensive Outpatient Program (IOP) providers and expanded access to Medication Assisted Treatment (MAT) prescribers, both of which have strengthened the state's capacity to provide timely, ongoing care.
Explanatory	Number of medicaid managed care members with alcohol abuse or dependence who initiated treatment within fourteen days of diagnosis	N/A	44	N/A	This measure is base on the calendar year. CY25 will be available in Feb 2026. For CY24, 4,364 members out of 9,960 identified members initiated treatment within 14 days of diagnosis.
Explanatory	Number of medicaid managed care members with opioid abuse or dependence who had two or more additional visits within thirty-four days	N/A	39	N/A	This annual measure is based on the calendar year. CY25 data will be available in Feb 2026. The actual 38.5% is for CY24. For CY24, 38.51% of members with opioid use or dependence achieved this engagement threshold. This rate is 7.81 percentage points higher than the 2023 NCQA National Average of 30.7%, indicating that New Mexico is performing well above national benchmarks in supporting members through early treatment. Contributing factors include the expansion of Intensive Outpatient Program (IOP) providers and increased availability of Medication Assisted Treatment (MAT) prescribers, both of which have improved access to timely, ongoing care.
Explanatory	Number of medicaid managed care members with opioid abuse or dependence who initiated treatment within fourteen days of diagnosis	N/A	0	N/A	

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P767 Behavioral Health Services

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Explanatory	Number of suicides of youth served by state medicaid and non-medicaid programs in the prior fiscal year	N/A	0	N/A	For FY25, there were zero recorded youth suicides among youth served by the Collaborative and Medicaid programs. This is a notable and encouraging improvement from FY24, which, after refreshed data, two youth suicides occurred, both from the Medicaid cohort. It is important to note that death data can be provisional and subject to updates as more information becomes available through NMVDRS.
Outcome	Number of individuals receiving telephone behavioral health services through medicaid and non-medicaid programs	30,000	44,267	Undef	In FY25, 44,267 unduplicated individuals received telephonic behavioral health services through Medicaid and non-Medicaid programs, surpassing the annual target of 30,000. This total reflects service delivery across urban (57.4%), rural (33.5%), and frontier (9.1%) areas of the state, with 91.4% of recipients enrolled in Medicaid, 5.2% in Medicaid Fee-for-Service, and 3.7% in non-Medicaid programs.
Outcome	Number of individuals served through telehealth and telephonic services in urban, rural and frontier communities for behavioral health	35,062	73,823	Yes	In FY25, a total of 73,823 unduplicated members received behavioral health services via telehealth, surpassing the annual target of 35,062 by more than double and marking a 3.5% increase from FY24. Of those served, 55% lived in urban areas, 35.9% in rural areas, and 8.8% in frontier areas.
Outcome	Percent of adults diagnosed with major depression who remained on an antidepressant medication for at least one hundred eighty days	42%	47%	Undef	This measure is based on calendar year. The 47.1% is data for the CY25 Q2. Annual HEDIS-audited results, received each June, reflect performance for the previous calendar year. Because this is a cumulative measure, performance improves over time as more members complete the full 180-day adherence period. Historically, adherence rates tend to increase throughout the year.
Outcome	Percent of adults with mental illness or substance abuse disorders receiving services who report satisfaction with staff's assistance with their housing need	Discont	0%	No	

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P767 Behavioral Health Services

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Outcome	Percent of emergency department visits, for medicaid managed care members age thirteen years and older, with a principal diagnosis of alcohol or other drug dependence who had a follow-up visit for substance use within seven days of emergency department visit	54.0%	23.2%	Undef	This annual measure is based on the calendar year. CY25 data will be available in Feb 2026. For CY24, 23.22% of eligible members received follow-up care within seven days, holding steady from the prior quarter's 23.19%. While the Legislative Finance Committee target of 54.0% was not reached it is a threshold that appears aspirational even by national standards, but performance more closely aligns with the NCQA Quality Compass national average of 24.08% for Measurement Year 2023 (MY2023). This consistency demonstrates that New Mexico's results are tracking with broader national trends.
Outcome	Percent of emergency department visits, for medicaid managed care members age thirteen years and older, with a principal diagnosis of alcohol or other drug dependence who had a follow-up visit for substance use within thirty days of emergency department visit	54.0%	33.8%	No	This annual HEDIS measure is based on the calendar year. CY25 data will be available in Feb 2026. The 33.8% result is for CY25 Q2. While this falls below the Legislative Finance Committee (LFC) target of 54%, it is just slightly under the 2023 NCQA benchmark of 35.5%. This result represents a solid starting point for continued improvement throughout the year. Early quarter rates for this measure are often lower due to its time-sensitive nature and potential delays in claims processing. As claims continue to be submitted and follow-up care progresses, performance is expected to improve.
Outcome	Percent of emergency department visits for members age six years and older with a principal diagnosis of mental illness who had a follow-up visit for mental illness within thirty days of the emergency department visit	54.0%	49.8%	No	This annual measure is based on the calendar year. CY25 data will be available in Feb 2026. During CY24, 49.8% of individuals with qualifying ED visits attended a follow-up appointment within 30 days. While the result is lower than the annual target of 54%, it exceeds the 2023 NCQA benchmark of 45.2% by more than four percentage points. As HCA moves into year two of Turquoise Care, a more complete report for CY25 may indicate improved as it will include follow-up metrics from Molina Healthcare and United Healthcare during a four quarter period.
Outcome	Percent of increase in health homes clients over the prior year	Discont	0%	No	
Outcome	Percent of individuals discharged from inpatient facilities who receive follow-up services at seven days	Discont	0%	No	

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Annual Performance Report

Program: P767 Behavioral Health Services

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Outcome	Percent of individuals discharged from inpatient facilities who receive follow-up services at thirty days	60%	52%	No	The Follow-Up After Hospitalization for Mental Illness (FUH) measure evaluates the percentage of patients who receive a follow-up visit with a mental health provider within 30 days of discharge from an inpatient stay for a mental health diagnosis on a calendar year basis. The 52.11% actuals are for CY24. The CY25 final report will be available in Feb. 2026.
Outcome	Percent of medicaid managed care members released from inpatient psychiatric hospitalization stays of four or more days who receive seven-day follow-up visits into community-based behavioral health	51%	31%	No	This annual HEDIS measure is based on the calendar year. CY25 data will be available in Feb 2026. In CY25 Q2, 31.18% of individuals (3,708 people) discharged from a psychiatric hospitalization under Turquoise Care received a follow-up visit with a community-based behavioral health provider within seven days. While the NCQA 2023 national average is 38.5% and the CY25 target is 51.0%, this quarter's results establish a valuable performance baseline for ongoing analysis and quality improvement.
Outcome	Percent of people with a diagnosis of alcohol or drug dependency who initiated treatment and received two or more additional services within thirty days of the initial visit	Discont	0%	No	
Outcome	Percent reduction in number of incidents from the first to last day of the school year in classrooms participating in the pax good behavior games, as measured by the spleen instrument	Discont	0%	No	
Output	Increase in number of crisis now connections during the report period	New	0	Undef	
Output	Number of unique medicaid managed care members receiving behavioral health services by a nonbehavioral health provider	100,000	131,154	Yes	This annual measure is based on the calendar year. CY25 data will be available in Feb 2026. In CY24, 131,154 unique Medicaid managed care members received behavioral health services from non-behavioral health providers, exceeding the annual target of 100,000. Overall, CY24 data shows that access to behavioral health services through non-behavioral health providers remained relatively stable despite the program transition.
Output	Number of unique medicaid managed care members receiving behavioral health services from a behavioral health provider	140,000	183,672	Yes	This annual measure is based on the calendar year. CY25 data will be available in Feb 2026. In CY24, 183,672 unique Medicaid managed care members received behavioral health services from BH providers, exceeding the target of 140,000.

DFA Performance Based Budgeting Data System

Annual Performance Report

Program: P767 Behavioral Health Services

Performance Measures:		2024-25 Target	2024-25 Result	Met Target	Year End Result Narrative
Output	Percent of certified peer support workers providing services in at least two quarters of the measurement year	Discont	0%	No	
Output	Percent of youth on probation who were served by the behavioral health and medicaid programs	Discont	0%	No	
Quality	Percent of persons receiving behavioral health services who report satisfaction with those services	Discont	0%	No	

P519 Developmental Disabilities Support

Purpose: The purpose of the developmental disabilities support program is to administer a statewide system of community-based services and support to improve the quality of life and increase the independence and interdependence of individuals with developmental disabilities and children with or at risk for developmental delay or disability and their families.

Performance Measures:		2023-24 Actual	2024-25 Actual	2025-26 Budget	2026-27 Request	2026-27 Recomm
Outcome	Percent of adults between ages twenty-two and sixty-two years served in a developmental disabilities waiver program, traditional or mi via, who receive employment supports	9.4%	8.0%	20.0%	17.0%	
Outcome	Percent of general event reports in compliance with general events timely reporting requirements within the two day rule	92.2%	91.0%	90.0%	90.0%	
Outcome	Percent of people receiving home- and community-based waiver program services who have received their annual level of care assessment	100%	100%	97%	86%	
Outcome	Number of developmental disabilities supports division health and wellness visits resulting in the division reporting suspected abuse, neglect or exploitation	New	New	New	75	
Explanatory	Number of home visits	9,526	0	N/A	N/A	
Explanatory	Number of individuals deemed eligible awaiting services	111	194	N/A	N/A	
Explanatory	Number of individuals receiving home- and community-based waiver program services	7,522	8,395	N/A	N/A	
Explanatory	Percent of home visits that result in an abuse, neglect or exploitation report	91.0	.6	N/A	N/A	
Efficiency	Percent of home- and community-based waiver program applicants who have a service plan and budget in place within ninety days of income and clinical eligibility determination	75.7%	90.0%	95.0%	86.0%	

P520 Health Improvement

Purpose: The purpose of the health improvement program is to provide health facility licensing and certification surveys, community-based oversight and contract compliance surveys and a statewide incident management system so that people in New Mexico have access to quality healthcare and that vulnerable populations are safe from abuse, neglect and exploitation.

Performance Measures:		2023-24 Actual	2024-25 Actual	2025-26 Budget	2026-27 Request	2026-27 Recomm
Quality	Percent of developmental disabilities support division clients receiving wellness checks per year as part of the audit conducted by the quality management bureau	TBD	10.2%	18.0%	N/A	
Quality	Percent of nursing home incident reports submitted following participation in a division of health improvement training on reporting requirements	91.0%	95.8%	89.0%	89.0%	
Quality	Percent of nursing home survey citations upheld when reviewed by the centers for medicare and medicaid services and through informal dispute resolution process	96.0%	100.0%	91.0%	Discont	
Quality	Percent of abuse, neglect and exploitation investigations completed according to established timelines	100.0%	97.5%	96.0%	93.0%	
Quality	Percent of nursing home citations upheld/unchanged when challenged through the informal dispute review process	New	New	New	65%	
Quality	Percent of nursing home surveys in which the center for medicare and medicaid services imposed a sanction	New	New	New	90%	

Performance Measures:		2023-24 Actual	2024-25 Actual	2025-26 Budget	2026-27 Request	2026-27 Recomm
Output	Number of caregiver criminal history screening appeal clearance recidivism/ re-offense (conviction) after a successful appeal	0	0	10	10	
Output	Percent of acute and continuing care facility survey statement of deficiencies based on the center for medicare and medicaid services form 2567 state form distributed to the facility within ten days of survey exit	82.0%	74.8%	88.0%	85.0%	
Output	Percent of complaint surveys for assisted living and related facilities initiated that meet criteria for three-day and fifteen-day high priority	TBD	100.0%	88.0%	90.0%	
Output	Percent of assisted living and related facilities' survey statement of deficiencies distributed to the facility within ten business days of the survey exit date	82.0%	60.5%	90.0%	85.0%	
Output	Percent of incident management bureau-assigned investigations initiated within required timelines	93.8%	95.1%	91.0%	88.0%	
Output	Percent of long-term care health facility survey statement of deficiencies based on the center for medicare and medicaid services form 2567 state form distributed to the facility within ten days of survey exit	75.0%	69.0%	88.0%	88.0%	
Output	Percent of quality management bureau 1915c home- and community-based services waiver program report of findings distributed within twenty-one working days from end of survey	94.6%	89.5%	91.0%	91.0%	
Output	Number of adult daycare center regulation review surveys conducted	New	New	New	25%	
Explanatory	Abuse rate for developmental disability waiver, mi via waiver, medically fragile waiver or the supports and services waiver clients		4	N/A	N/A	
Explanatory	Re-abuse rate for developmental disabilities waiver, mi via waiver, medically fragile waiver and other supports and services waiver clients	0		N/A	N/A	

P521 State Health Benefits

Purpose: The purpose of the health benefits program is to effectively administer comprehensive health-benefit plans to state and local government employees.

Performance Measures:		2023-24 Actual	2024-25 Actual	2025-26 Budget	2026-27 Request	2026-27 Recomm
Quality	Percent of state health plan members with diabetes receiving at least one hemoglobin A1C test in the last twelve months	49.0%	54.1%	86.0%	86.0%	
Outcome	Percent change in total medical premium	10.0%	10.0%	7.5%	6.0%	
Outcome	Percent change in the average per-member per-month total healthcare cost	TBD	2.2%	4.0%	4.0%	
Outcome	Percent of state group prescriptions filled with generic drugs within three percent of public-entity-peer rate as reported by pharmacy benefits manager	86.0%	84.3%	84.0%	84.0%	
Outcome	Number of employees enrolled in the state employee premium assistance program	New	0	New	0	
Explanatory	Number of state health plan members who designate the stay well health center as their primary care provider	2,162	2,578	N/A	N/A	
Explanatory	Number of visits to the stay well health center	7,815	7,385	N/A	N/A	
Explanatory	Percent of available appointments filled at the stay well health center	74.0%	92.5%	N/A	N/A	
Explanatory	Percent of eligible state employees purchasing state medical insurance	TBD	78.2%	N/A	N/A	

Performance Measures:		2023-24 Actual	2024-25 Actual	2025-26 Budget	2026-27 Request	2026-27 Recomm
Explanatory	Amount of projected year-end fund balance of the health benefits fund, in thousands	TBD	-\$124.0	N/A	N/A	
Explanatory	Rate per one thousand members of emergency department use categorized as nonemergent	16	16	N/A	N/A	
Efficiency	Annual loss ratio for the health benefits fund	89:000	117:000	98:000	98:000	

P522 Program Support

Purpose: The purpose of program support is to provide overall leadership, direction and administrative support to each agency program and to assist it in achieving its programmatic goals.

Performance Measures:		2023-24 Actual	2024-25 Actual	2025-26 Budget	2026-27 Request	2026-27 Recomm
Output	Percent of final decisions on administrative disqualification hearings issued within ninety days of hearing being scheduled	100.0%	100.0%	100.0%	100.0%	
Output	Number of engagements across health care authority online and digital channels	1,610,080	8,418,768	900,000	900,000	
Outcome	Percent of administrative cost compared to total claims collected by the restitution services bureau	9%	10%	13%	15%	
Outcome	Identified dollars to be recovered or collected for each dollar expended by the office of inspector general's medicaid program integrity unit	\$8	\$11	\$10	\$10	
Outcome	Percent of health care authority customers who reported being satisfied or very satisfied with the services they received from the contact center concerning the supplemental nutrition assistance program, medicaid, child support and other services	TBD	78%	N/A	75%	
Outcome	Average health care authority staff self-reported score related to having the tools, training and resources needed to telework effectively	0%	0%	Discont	Discont	
Outcome	Percent of automated eligibility decisions including real time eligibility, administrative renewal, auto denial/closure, mass update, auto renewal and individual automation	37%	45%	40%	40%	
Outcome	Percent of employees who leave the New Mexico health care authority during the quarter as an annualized number	34%	19%	15%	15%	
Outcome	Percent of New Mexico health care authority positions that are filled as a portion of budgeted positions	89%	98%	95%	95%	

P523 Child Support Enforcement

Purpose: The purpose of the child support enforcement program is to provide location, establishment and collection services for custodial parents and their children; to ensure that all court orders for support payments are being met to maximize child support collections; and to reduce public assistance rolls.

Performance Measures:		2023-24 Actual	2024-25 Actual	2025-26 Budget	2026-27 Request	2026-27 Recomm
Output	Amount of child support collected, in millions	\$119	\$119	\$120	\$120	
Output	Total dollars collected in child support obligations for each dollar expended by the child support services program	\$2	\$2	\$3	\$3	
Outcome	Percent of current support owed that is collected	58%	60%	65%	65%	
Outcome	Percent of cases with support orders	84%	83%	85%	85%	
Explanatory	Average distribution per child	\$129	\$138	N/A	N/A	
Explanatory	Percent of noncustodial parents paying support to total cases with support orders	51%	52%	N/A	N/A	

P524 Medical Assistance

Purpose: The purpose of the medical assistance program is to provide the necessary resources and information to enable low-income individuals to obtain either free or low-cost healthcare.

Performance Measures:		2023-24 Actual	2024-25 Actual	2025-26 Budget	2026-27 Request	2026-27 Recomm
Quality	Percent of members reporting satisfaction with New Mexico's medicaid services	82%	80%	82%	82%	
Quality	Percent of emergency department visits for medicaid managed care members age thirteen years and older with a principal diagnosis of alcohol or other drug dependence who had a follow-up visit for mental illness within seven days of emergency department visit	TBD	0.0%	63.0%	Discont	
Output	Number of medicaid managed care members who have received treatment for hepatitis C in the reporting year	1,341	1,825	1,200	0	
Output	Percent of provider payments included in value-based purchasing arrangements	64%	62%	63%	50%	
Output	Number of unique medicaid managed care members with a telemedicine visit at the end of the previous calendar year	147,548	132,035	145,000	Discont	
Outcome	Percent of members under age twenty-one years enrolled in medicaid managed care who received a comprehensive or periodic oral evaluation with a dental provider during the measurement year	51%	53%	53%	50%	
Outcome	Percent of children and adolescents in medicaid managed care ages three to twenty-one years who had one or more comprehensive well-care visits with a primary care provider or an obstetrician/ gynecologist during the measurement year	64%	48%	63%	52%	
Outcome	Percent of members eighteen to eighty-five years with type one or type two diabetes who received a kidney health evaluation	52%	44%	No Data	35%	
Outcome	Percent of hospital readmissions for children in medicaid managed care ages two through seventeen years within thirty days of discharge	8%	7%	5%	Discont	
Outcome	Percent of adults in medicaid managed care age eighteen and over readmitted to a hospital within thirty days of discharge	9%	9%	8%	8%	
Outcome	Percent of medicaid managed care member deliveries who received a prenatal care visit in the first trimester or within forty-two days of eligibility	78%	77%	80%	80%	
Outcome	Percent of medicaid managed care members participating in member rewards	51%	0%	51%	82%	
Outcome	Number of short-term complication admissions for medicaid managed care members with diabetes per one hundred thousand members	16.40	20.93	16.40	20.44	
Outcome	Percent of medicaid managed care members ages five through sixty-four who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year	TBD	79%	Discont	Discont	
Outcome	Percent of nonemergent utilization of all emergency department utilization that is categorized as nonemergent care	57%	57%	55%	55%	
Outcome	Percent of medicaid managed care members with a nursing facility level of care who are being served in a noninstitutional setting	88%	85%	85%	85%	
Outcome	Percent of discharges for members age six years or older in medicaid managed care who were hospitalized for treatment of selected mental illness diagnoses	55%	0%	60%	Discont	

Performance Measures:		2023-24 Actual	2024-25 Actual	2025-26 Budget	2026-27 Request	2026-27 Recomm
Outcome	Percent of children enrolled in medicaid managed care who had four diphtheria, tetanus and acellular pertussis; three polio; one measles, mumps, and rubella; three haemophilus influenza type B; three hepatitis B; one chicken pox and four pneumococcal conjugate vaccines by their second birthday	65%	65%	69%	64%	
Outcome	Percent of emergency department visits for medicaid managed care members age six years and older with a principal diagnosis of mental illness who had a follow-up visit for mental illness within thirty days of the emergency department visit	53%	0%	Discont	Discont	
Outcome	Percent of medicaid managed care member deliveries with a postpartum visit on or between seven and eighty-four calendar days after delivery	73%	72%	75%	75%	
Outcome	Percent of members ages three to seventeen years enrolled in medicaid managed care who had an outpatient visit with a primary care physician or obstetrician/gynecologist and who had evidence of counseling for physical activity during the measurement year	64%	39%	64%	Discont	
Outcome	Percent of medicaid managed care members ages eighteen to sixty-four years with schizophrenia, schizoaffective disorder or bipolar disorder who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year	82%	83%	Discont	Discont	
Outcome	Percent of medicaid managed care members age eighteen years and older as of April 30 of the measurement year who were diagnosed with a new episode of major depression during the intake period and received at least one hundred eighty calendar days of continuous treatment with an antidepressant medication	47%	52%	36%	Discont	
Outcome	Percent of new substance use disorder episodes that result in treatment initiation through an inpatient substance use disorder admission, outpatient visit, intensive outpatient encounter, partial hospitalization, telehealth visit or medication treatment within fourteen days	50%	50%	50%	50%	
Explanatory	Percent of infants and children in medicaid managed care who had six or more well-child visits in the first fifteen months of life	66%	64%	N/A	N/A	
Explanatory	Amount of expenditures for children and youth receiving services through medicaid school-based service programs through an individualized education program, in millions	18,294,844	19,103,795	N/A	N/A	
Explanatory	Number of justice-involved individuals who are made eligible for medicaid prior to release	7,016	7,334	N/A	N/A	
Explanatory	Number of medicaid managed care members being served by patient-centered medical homes	366,123	Discont	N/A	N/A	

P525 Income Support

Purpose: The purpose of the income support program is to provide cash assistance and supportive services to eligible low-income families so they can achieve self-sufficiency. Eligibility requirements are established by state law within broad federal statutory guidelines.

Performance Measures:		2023-24 Actual	2024-25 Actual	2025-26 Budget	2026-27 Request	2026-27 Recomm
Output	Number of meals provided to New Mexican families via the supplemental nutrition assistance program	34,456,371	99,530,300	1,270,000	1,270,000	
Output	Number of homes heated and cooled in New Mexico via the low-income home energy assistance program	44,287	41,919	30,000	30,000	

Performance Measures:		2023-24 Actual	2024-25 Actual	2025-26 Budget	2026-27 Request	2026-27 Recomm
Output	Number of New Mexican families provided with necessities and shelter for the last full month via the temporary assistance for needy families program	7,901	6,833	7,000	6,000	
Outcome	Percent of all parent participants who meet temporary assistance for needy families federal work participation requirements	10%	45%	45%	45%	
Outcome	Percent of temporary assistance for needy families two-parent recipients meeting federal work participation requirements	17%	20%	60%	60%	
Outcome	Percent of expedited or emergency supplemental nutritional assistance program cases meeting federally required measure of timeliness within seven days	65%	96%	98%	95%	
Outcome	Percent of non-expedited or non-emergency supplemental nutritional assistance program cases meeting the federally required measure of timeliness within thirty days	43%	96%	98%	95%	
Outcome	Percent of adult temporary assistance for needy families recipients who obtained any new unearned income during the report period that closed the case	28%	30%	45%	0%	
Outcome	Percent of adult temporary assistance for needy families recipients who are mandatory for the New Mexico works program that obtained any new earned income during the report period that closed the case	1%	8%	37%	37%	
Outcome	Average supplemental nutrition assistance program benefit payment, per client	\$184.31	\$184.31	\$300.00	\$292.00	
Outcome	Percent of supplemental nutrition assistance program payment errors showing benefits were overissued during reporting period	17.6%	14.9%	1.2%	1.2%	
Outcome	Percent of supplemental nutrition assistance program payment errors showing percent under-issued during reporting period	2.5%	1.2%	1.2%	6.0%	
Outcome	Percent of supplemental nutrition assistance program and medicaid recertifications, including supplemental nutrition assistance program and medicaid benefits, that were approved ongoing and terminated during reporting period	84.6%	94.5%	96.0%	96.0%	
Outcome	Percent of supplemental nutrition assistance program recertifications processed in a timely manner	77.2%	90.9%	75.0%	95.0%	
Outcome	Percent of mandatory temporary assistance for needy families adults with an active work participation agreement who are in compliance with the temporary assistance for needy families work requirements	53.8%	58.8%	97.0%	Discont	
Outcome	Number of supplemental nutrition assistance program households who received the state supplemental nutrition assistance program supplement	New	295,284	312,000	0	

P762 Health Care Affordability Fund

Purpose: The purpose of the health care affordability fund program is to improve access to healthcare by helping New Mexicans pay for healthcare insurance and supporting the planning, design and implementation of healthcare coverage initiatives for uninsured New Mexicans.

Performance Measures:		2023-24 Actual	2024-25 Actual	2025-26 Budget	2026-27 Request	2026-27 Recomm
Outcome	Increase in percent of marketplace enrollees in turquoise plans	New	0.0%	10.0%	Discont	
Outcome	Increase in percent of small group enrollees in a platinum plan	New	0.0%	10.0%	Discont	

Performance Measures:		2023-24 Actual	2024-25 Actual	2025-26 Budget	2026-27 Request	2026-27 Recomm
Outcome	Total dollars saved for consumers across all programs	New		0:00,000,000		Discont
Outcome	Total enrollment in the coverage expansion plan	New	0	7,700		Discont
Outcome	Percent of premium covered by small business premium relief initiative	New	0%	New		New
Outcome	Percent of state employee premium assistance-eligible population enrolled in marketplace coverage who are also enrolled in a turquoise plan	New	0	New		New
Explanatory	Average per member per month small business premium discount	New	0	N/A		N/A
Explanatory	Fund balance in the healthcare affordability fund at the end of the fiscal year	New	0	N/A		N/A
Explanatory	Number of businesses participating in the small business premium relief initiative	New	0	N/A		N/A
Explanatory	The average monthly marketplace affordability program out-of-pocket subsidy provided to eligible enrollees between zero and four hundred percent of the federal poverty level	New	0	N/A		N/A
Explanatory	The average monthly marketplace affordability program premium subsidy provided to eligible enrollees between zero and four hundred percent of the federal poverty level	New	0	N/A		N/A

P766 Medicaid Behavioral Health

Purpose: The purpose of the medicaid behavioral health program is to provide the necessary resources and information to enable low-income individuals to obtain either free or low-cost behavioral healthcare.

Performance Measures:		2023-24 Actual	2024-25 Actual	2025-26 Budget	2026-27 Request	2026-27 Recomm
Output	Number of individuals served annually in substance use or mental health programs administered through the medicaid and non-medicaid programs administered by the health care authority	207,259	207,020	210,000		210,000
Outcome	Percent of readmissions to same level of care or higher for children or youth discharged from residential treatment centers and inpatient care	12%	13%	5%		5%
Outcome	Percent of people with a diagnosis of alcohol or drug dependency who initiated treatment and received two or more additional services within thirty-four days of the initial visit	17%	18%	17%		15%

P767 Behavioral Health Services

Purpose: The purpose of the behavioral health services program is to lead and oversee the provision of an integrated and comprehensive behavioral health prevention and treatment system so the program fosters recovery and supports the health and resilience of all New Mexicans.

Performance Measures:		2023-24 Actual	2024-25 Actual	2025-26 Budget	2026-27 Request	2026-27 Recomm
Output	Number of unique medicaid managed care members receiving behavioral health services by a nonbehavioral health provider	188,579	131,154	100,000		100,000
Output	Number of unique medicaid managed care members receiving behavioral health services from a behavioral health provider	261,889	183,672	140,000		140,000
Output	Increase in number of crisis now connections during the report period	New	0	New		0
Outcome	Percent of individuals discharged from inpatient facilities who receive follow-up services at thirty days	56%	52%	60%		0%

Table 2

Health Care Authority Department Performance Measures Summary

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Performance Measures:		2023-24 Actual	2024-25 Actual	2025-26 Budget	2026-27 Request	2026-27 Recomm
Outcome	Percent of adults diagnosed with major depression who remained on an antidepressant medication for at least one hundred eighty days	45%	47%	42%	42%	
Outcome	Number of individuals served through telehealth and telephonic services in urban, rural and frontier communities for behavioral health	73,054	73,823	50,000	50,000	
Outcome	Percent of emergency department visits, for medicaid managed care members age thirteen years and older, with a principal diagnosis of alcohol or other drug dependence who had a follow-up visit for substance use within thirty days of emergency department visit	32.1%	33.8%	54.0%	54.0%	
Outcome	Percent of medicaid managed care members released from inpatient psychiatric hospitalization stays of four or more days who receive seven-day follow-up visits into community-based behavioral health	42%	31%	51%	51%	
Outcome	Number of individuals receiving telephone behavioral health services through medicaid and non-medicaid programs	73,054	44,267	Discont	Discont	
Outcome	Percent of emergency department visits for members age six years and older with a principal diagnosis of mental illness who had a follow-up visit for mental illness within thirty days of the emergency department visit	51.5%	49.8%	57.0%	54.0%	
Outcome	Percent of emergency department visits, for medicaid managed care members age thirteen years and older, with a principal diagnosis of alcohol or other drug dependence who had a follow-up visit for substance use within seven days of emergency department visit	21.2%	23.2%	54.0%	54.0%	
Explanatory	Number of suicides of youth served by state medicaid and non-medicaid programs in the prior fiscal year	2	0	N/A	N/A	
Explanatory	Number of medicaid managed care members with opioid abuse or dependence who initiated treatment within fourteen days of diagnosis	3,144	0	N/A	N/A	
Explanatory	Number of medicaid managed care members with alcohol abuse or dependence who initiated treatment within fourteen days of diagnosis	44	44	N/A	N/A	
Explanatory	Number of medicaid managed care members with opioid abuse or dependence who had two or more additional visits within thirty-four days	36	39	N/A	N/A	
Explanatory	Number of medicaid managed care members with alcohol abuse or dependence who had two or more additional visits within thirty-four days	15	16	N/A	N/A	
Explanatory	Number of certified community behavioral health clinics enrolled within the medicaid program	0	5	N/A	N/A	

HCA Strategic Plan (SFY26-SFY27)				
Administrative Supports Division (ASD)				
Strategy	Desired Outcome		Fiscal Year	HCA Goal
Stand-up the Training and Finance Development Bureau to provide training programs, workshops, and customized support to divisions ultimately helping the HCA maximize benefits for New Mexicans.	Divisions will be equipped with financial tools and training to help them manage fiscal responsibilities and increase the timely processing of documents, and a reduction in errors and prior year invoices. HCA will maintain a <2% reversion rate at each fiscal year-end, ensuring no deficits across its Divisions.		FY26	Build the best team in state government by supporting employees' continuous growth and wellness.
Smart Goals	Accountable	Responsible	Target	By when
1 Deliver trainings to program staff.	Carolee Graham	Tammy Soveranez	40 program staff	January 1, 2026
2 Deliver training across the divisions.	Carolee Graham	Tammy Soveranez	13 Divisions	June 30, 2026
Strategy	Desired Outcome		Fiscal Year	HCA Goal
Minimize prior year invoices and ensure timely, accurate use of budgeted funds.	A measurable reduction in prior year invoices that improves budget accuracy, preserves current year resources, and strengthens fiscal accountability across the agency.		FY26-FY27	Leverage purchasing power and partnerships to create innovative models of comprehensive health care coverage that improve health and well-being for New Mexicans and the workforce.
Smart Goals	Accountable	Responsible	Target	By when
1 Meet with HCA and division-level operations teams to clarify the importance of timely payment, review deadlines, and processes.	Carolee Graham	Richard Montoya	13 Divisions	June 30, 2026
2 Improved Monthly Process with potential Monday.com tracking	Carolee Graham	Richard Montoya	monthly	June 30, 2026
Strategy	Desired Outcome		Fiscal Year	HCA Goal
Ensure HCA's appropriations are utilized to maximize benefits for New Mexicans.	HCA will maintain a <2% reversion rate at each fiscal year-end, ensuring no deficits across its Divisions.		FY26-FY27	Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.
SMART Goals	Accountable	Responsible	Target	By when
1 Create clear and structured spend-down plan with each division above 2% reversion in FY projection model	Carolee Graham	Richard Montoya	Each division projected to be over 2%	June 30, 2026
2 ASD will monitor and follow-up with divisions through a check-in meeting monthly	Carolee Graham	Richard Montoya	Monthly Meeting	June 30, 2026
Behavioral Health Services Division (BHSD)				
Strategy	Desired Outcome		Fiscal Year	HCA Goal
Expand OUD overdose prevention efforts statewide	Increased Naloxone distribution.		FY26	Achieve health equity by addressing poverty, discrimination, and lack of resources—building a New Mexico where everyone thrives.
SMART Goals	Accountable	Responsible	Target	By when
1 Distribute Naloxone Kits and training statewide	Tami Spellbring	Michael Padilla	30,000	June 30, 2026
Strategy	Desired Outcome		Fiscal Year	HCA Goal

Leverage partnerships with Qualified Behavioral Health Providers to improve behavioral health wellbeing of New Mexicans.	Expanded crisis services including Certified Community Behavioral Health Clinics (CCBHCs) and Crisis Service Continuum; 3 new CCBHCs and 2 Mobile Crisis Teams.		FY26	Leverage purchasing power and partnerships to create innovative models of comprehensive health care coverage that improve health and well-being for New Mexicans and the workforce.
SMART Goals	Accountable	Responsible	Target	By when
1 Readiness training for provisional CCBHCs	Tami Spellbring	Scott Geyer	3 CCBHCs	June 30, 2026
2 Certification of Mobile Crisis Teams	Tami Spellbring	Scott Geyer	1 Mobile Crisis Team	June 30, 2026
Strategy	Desired Outcome		Fiscal Year	HCA Goal
Expansion of Certified Peer Support Worker (CPSW) training to include web based trainings.	Increased number of Certified Peer Support Workers with Specialty Training		FY26	Leverage purchasing power and partnerships to create innovative models of comprehensive health care coverage that improve health and well-being for New Mexicans and the workforce.
SMART Goals	Accountable	Responsible	Target	By when
1 Provide veteran specialty training	Annabelle Martinez	Mark Garnernd	2 endorsement trainings	June 30, 2026
2 Provide forensic specialty training	Annabelle Martinez	Mark Garnernd	2 endorsement trainings	June 30, 2026
Strategy	Desired Outcome		Fiscal Year	HCA Goal
Behavioral Health Reform: Leverage relationships with community partners to improve the behavioral health system	Develop the funding mechanism to appropriate funds.		FY26	Leverage purchasing power and partnerships to create innovative models of comprehensive health care coverage that improve health and well-being for New Mexicans and the workforce.
SMART Goals	Accountable	Responsible	Target	By when
1 Execute Regional Contracts	Kristie Brooks	vacant position	13 Regional Contracts	June 30, 2026
Child Support Services Division (CSSD)				
Strategy	Desired Outcome		Fiscal Year	HCA Goal
Increase parentage, child support, and medical support established for tribal children through participation in the Child Support Native American Initiative (NAI) program.	Increased number of NAI cases within the NM Child Support Program.		FY26	Achieve health equity by addressing poverty, discrimination, and lack of resources—building a New Mexico where everyone thrives.
SMART Goals	Accountable	Responsible	Target	By when
1 Reach out to 1 Tribe quarterly to pitch the NAI program.	Betina Gonzales McCracken	Betina Gonzales McCracken	4 pitches	June 30, 2026
2 Follow-up w/in 30 days of presentation.	Betina Gonzales McCracken	Betina Gonzales McCracken	4 follow-ups	June 30, 2026
Strategy	Desired Outcome		Fiscal Year	HCA Goal
Reduce Child Poverty	More money is provided to new Mexico's kids in the child support program by reducing the amount of undistributed collections.		FY26	Achieve health equity by addressing poverty, discrimination, and lack of resources—building a New Mexico where everyone thrives.
SMART Goals	Accountable	Responsible	Target	By when
1 Research and resolve money on hold due to bad addresses.	Betina Gonzales McCracken	Melanie Vigil & Central office Staff	100% of Associated Cases	Within 30 days of report receipt monthly
2 Research and resolve holds greater than \$5,000.	Betina Gonzales McCracken	Victoria Marquez & the County Directors - 14	100% of Associated Cases	Within 30 days of report receipt monthly
3 Research and resolve Stale Dated Warrants.	Betina Gonzales McCracken	Melanie Vigil & Central Office Staff	100% of Associated Cases	Within 30 days of report receipt monthly
4 Research and resolve monies on hold due to parties in dispute.	Betina Gonzales McCracken	Victoria Marquez & County Directors -14 & Supervising Attorneys - 5	100% of Associated Cases	Within 30 days of report receipt monthly

5	Revise the Uniform Unclaimed Property Act to include Child Support	Betina Gonzales McCracken	Betina Gonzales McCracken	100% - steps necessary to revise Act through legislation	January 1, 2026
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Modernize the Child Support Enforcement System (CSES) to replace the legacy platform with a more secure, efficient, and user-friendly system.		Families receive improved support through enhanced child support services enabled by new technology, while employees experience greater job satisfaction through tools		FY26-FY27	Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.
SMART Goals		Accountable	Responsible	Target	By when
1	Complete all steps necessary to obtain funding for new Phase II of system modernization	Betina Gonzales McCracken, Paula Morgan	Betina Gonzales McCracken	100% Steps Complete	January 1, 2026
Developmental Disabilities Supports Division (DDSD)					
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Increase provider capacity to insure choice and access for waiver recipients.		Each region of the state has an increased number of providers taking new clients.		FY26	Achieve health equity by addressing poverty, discrimination, and lack of resources—building a New Mexico where everyone thrives.
SMART Goals		Accountable	Responsible	Target	By when
1	Monthly communications campaign that highlight different waiver service types and need.	Jen Rodriguez	Tammy Barth	11 campaigns	June 30, 2026
2	Host recruitment events with provider agencies.	Jen Rodriguez	Jen Rodriguez	3 in FY26	June 30, 2026
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Improve stakeholder and community engagement.		HCA will receive meaningful input to inform systemic changes within waiver programs.		FY26	Leverage purchasing power and partnerships to create innovative models of comprehensive health care coverage that improve health and well-being for New Mexicans and the workforce.
SMART Goals		Accountable	Responsible	Target	By when
1	Provide stakeholder and community engagement opportunities for the DD Waiver Renewal and Medically Fragile Waiver Renewal (i.e. town halls, virtual meetings, and formal comment periods).	Jen Rodriguez	Jen Rodriguez, Melanie Buenviaje, Selina Leyba	20 opportunities	April 30, 2026
2	Provide stakeholder and community engagement opportunities for the FY26 Rate Study.	Jen Rodriguez	Joseph Tighe	4 opportunities	November 30, 2025
3	Provide stakeholder and community engagement opportunities for Mi Via Waiver Gross Receipts Tax process change.	Jen Rodriguez	Melanie Buenviaje	3 opportunities	January 1, 2026
Division of Health Improvement (DHI)					
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Improve timeliness of survey report submission to facilities so they can enact measures to keep New Mexicans safe.		85% of survey reports are sent within 10 days to allow facilities to work on corrective actions more quickly.		FY26	Achieve health equity by addressing poverty, discrimination, and lack of resources—building a New Mexico where everyone thrives.
SMART Goals		Accountable	Responsible	Target	By when
1	All survey reports are written by day 5	Nancy Laster	Maurella Sooh	85% of the time	June 30, 2026
2	Review team is completed by day 9	Nancy Laster	Maurella Sooh	85% of the time	June 30, 2026
3	Corrections are complete and sent to facilities by day 10	Nancy Laster	Maurella Sooh	85% of the time	June 30, 2026
4	Ready for review submitted by day 7	Nancy Laster	Maurella Sooh	85% of the time	June 30, 2026

Strategy		Desired Outcome		Fiscal Year	HCA Goal
Improvement in screening of all candidates related to new criteria in HB 131 (Caregiver Background Checks)		100% of candidates are screened using new criteria.		FY26	Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.
SMART Goals		Accountable	Responsible	Target	By when
1	95 % of the candidates that request reconsideration will be completed within 8 days of request for reconsideration upon submitting a complete packet.	Danny Maxwell	Michael Padilla	weekly	30-Jun-26
2	90% of all cases that require legal consult within any step of the process will have a legal decision back to CCHSP within 48 hours.	Danny Maxwell	Michael Padilla	monthly	June 30, 2026
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Increase of qualified Certified Nursing Assistants (CNA) in New Mexico.		An increase in the first time passing of Certified Nursing Assistant (CNA) candidates to 75%.		FY26	Achieve health equity by addressing poverty, discrimination, and lack of resources—building a New Mexico where everyone thrives.
SMART Goals		Accountable	Responsible	Target	By when
1	During FY26 each facility will be represented by an admin or instructor at least 90% of the time	Nancy Laster	Danny Maxwell	90 % meeting attendance	June 30, 2026
2	Overall no-call no-shows for classes will be less than 15% for FY 26	Nancy Laster	Danny Maxwell	less than 15 %	June 30, 2026
3	CNA Program coordinator will perform at a minimum 3 site visits a month during FY 26	Nancy Laster	Danny Maxwell	3 per month	June 30, 2026
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Reduce conditional-employment risk and tighten compliance.		All new caregivers are properly vetted and compliant within required timelines, ensuring providers who fail background checks are promptly removed, which reduces risk, improves safety, and strengthens accountability across the caregiving workforce.		FY26-FY27	Achieve health equity by addressing poverty, discrimination, and lack of resources—building a New Mexico where everyone thrives.
SMART Goals		Accountable	Responsible	Target	By when
1	Complete Caregiver Criminal History Screening Program (CCHSP) initial determinations	Nancy Laster	Danny Maxwell	Complete within 48 hours on ≥85% of cases	June 30, 2027
2	Complete remaining CCHSP initial determinations	Nancy Laster	Danny Maxwell	Within 5 business days at ≥95% of cases	June 30, 2027
3	After a final disqualification, HCA verifies provider removal.	Nancy Laster	Danny Maxwell	within 14 calendar days in 100% of cases. Reported monthly.	June 30, 2027
Health Care Affordability Fund (HCAF)					
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Increase percentage of State Out of Pocket Assistance (SOPA)-eligible individuals enrolled in Marketplace coverage who are also enrolled in a Turquoise Plan.		80% of BeWell enrollees who are eligible for SOPA are enrolled in a Turquoise plan.		FY26	Build the best team in state government by supporting employees' continuous growth and wellness.
SMART Goals		Accountable	Responsible	Target	By when
1	Work with BeWell Marketplace to ensure consumers are provided with information to help them enroll in appropriate coverage through their website.	Jessica Rosenthal, Colin Baillio	Deanna Stock, Cynthia C Cisneros	100% of relevant information has been added to the BeWell website.	November 1, 2025

2	Work with HCA Communications Team to produce and post social media related to SOPA benefits.	Jessica Rosenthal, Colin Baillio	Cynthia C Cisneros	1 monthly	November 1, 2025
3	Health Care Affordability Bureau staff will support testing of new system to ensure HCAF programs working are correctly.	Colin Baillio, Jessica Rosenthal	Deanna Stock	100% of steps completed for testing process.	November 1, 2025
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Increase percentage of small business employees covered by Gold and Platinum plans through the Small Business Premium Relief Initiative.		5% increase in Gold/Platinum enrollment		FY26	Achieve health equity by addressing poverty, discrimination, and lack of resources—building a New Mexico where everyone thrives.
SMART Goals		Accountable	Responsible	Target	By when
1	Meet with stakeholders to implement new process.	Jessica Rosenthal, Colin Baillio	Deanna Stock	6 meetings	September 15, 2025
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Mitigate coverage losses for those losing eligibility due to Federal HR 1.		Maintain or grow enrollment for 95 Deferred Action for Childhood Arrivals (DACA) recipients and ~1,000 lawfully-present non-citizens under 100% Federal Poverty Level (FPL) currently enrolled in Marketplace coverage.		FY26	Achieve health equity by addressing poverty, discrimination, and lack of resources—building a New Mexico where everyone thrives.
SMART Goals		Accountable	Responsible	Target	By when
1	Ensure DACA recipients who are currently enrolled in BeWell coverage maintain some type of coverage with subsidies through the end of the plan year.	Jessica Rosenthal, Colin Baillio	Deanna Stock, Erika Price	100% of relevant steps taken in project to ensure coverage.	October 1, 2025
2	Ensure the under 100% population that does not qualify for Medicaid due to immigration status has coverage with subsidies for Plan Year 2026.	Jessica Rosenthal, Colin Baillio	Deanna Stock, Erika Price	100% of relevant steps taken in project to ensure coverage.	December 31, 2025
3	Ensure the Health Care Authority, Office of Superintendent of Insurance, BeWell, and the New Mexico Medical Insurance Pool coordinate on coverage options for impacted populations.	Jessica Rosenthal	Jessica Rosenthal, Deanna Stock	1 monthly	March 31, 2026
Income Support Division (ISD)					
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Enhance customer service response by reducing the Payment Error Rate and ensure accurate benefits are being distributed to eligible households.		Achieved reduction in the Payment Error Rate (PER) quarterly, for the year, with the 1st reduction Dec 2025.		FY26	Achieve health equity by addressing poverty, discrimination, and lack of resources—building a New Mexico where everyone thrives.
SMART Goals		Accountable	Responsible	Target	By when
1	Create a strategic plan identifying 5-6 specific levers to be activated quarterly within the FY26 year.	Niki Kozlowski	Marisa Vigil, Stephanie Moore-Combs	Annually	September 30, 2025
2	Establish project stream that will meet quarterly to ensure all system changes related to HR1 are meeting deadlines	Stephanie Moore-Combs	Stephanie Moore-Combs	Quarterly	June 30, 2026
3	Review PER reporting as it relates to the PER strategic plan in ISD strategy call monthly	Niki Kozlowski	Marisa Vigil	Quarterly	June 30, 2026
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Build ISD culture through retaining and hiring staff.		Quarterly staffing and retention targets are met to meet timeliness and accuracy goals for New Mexicans.		FY26-FY27	Achieve health equity by addressing poverty, discrimination, and lack of resources—building a New Mexico where everyone thrives.
SMART Goals		Accountable	Responsible	Target	By when
1	Ensure hiring targets are met by region each month	Niki Kozlowski	Marisa Vigil, Stephanie Moore-Combs	100 new staff	June 30, 2026

1	Conduct Quarterly Leadership staff training to build coaching and development skills for leadership staff	Niki Kozlowski	Marisa Vigil, Stephanie Moore-Combs	100 new staff	June 30, 2026
Strategy		Desired Outcome		Fiscal Year	HCA Goal
1	Enhance knowledge in ISD employees to positively impact accuracy and timeliness.	Staff have increased understanding of case processing and policy through improved training curriculum and tools, resulting in fewer errors, lower staff turnover, and higher new		FY26-FY27	Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.
SMART Goals		Accountable	Responsible	Target	By when
1	Build new hire curriculum to flow with staff learning styles, reviewing cohort performance quarterly.	Stephanie Moore-Combs	Laurie Kraw	Quarterly	December 31, 2025
2	Build Knowledge Refreshers for Payment Error Rate Strategy improvement - identifying monthly series topics, quizzes via surveys of staff feedback	Stephanie Moore-Combs	Laurie Kraw	Monthly	June 30, 2026
Information Technology Division (ITD)					
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Position the IT workforce for success.		Increased employee rating of how well equipped they feel to effectively do their jobs.		FY26-FY27	Build the best team in state government by supporting employees' continuous growth and wellness.
SMART Goals		Accountable	Responsible	Target	By when
1	Provide annual equipment refresh plan.	Paula Morgan	Doug Otto	one plan each year	June 30, 2027
2	Provide quality IT Customer Service.	Paula Morgan	Doug Otto	85% tickets addressed within 3 days	June 30, 2026
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Create and standardize clear and agile IT processes.		Improved customer service, operational excellence, and employee experience and performance.		FY26-FY27	Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.
SMART Goals		Accountable	Responsible	Target	By when
1	Document Project Management Process	Paula Morgan	Chuck Boudreaux, Shanita Harrison	100% Documented	June 30, 2027
2	Create a process for Demand Management	Paula Morgan	Paula Morgan	100% Documented	June 30, 2027
3	Document Security Access Request form process	Paula Morgan	Doug Otto	100% Documented	June 30, 2026
4	Create and maintain an Application Portfolio	Paula Morgan	Tim Thackaberry	100% Documented	June 30, 2026
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Create and standardize clear and agile Information Technology processes.		Increased maturity level in the analytics maturity model.		FY26-FY27	Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.
SMART Goals		Accountable	Responsible	Target	By when
1	Work with divisions to establish data quality Key Performance Indicators	Paula Morgan	Patrick Schoen	13 Divisions	June 30, 2027
2	Conduct monthly Data Governance Council meetings	Paula Morgan	Patrick Schoen	100% Documented	June 30, 2027
3	Recruit and retain Office of Data Analytics Staff	Paula Morgan	Patrick Schoen	11 Staff	June 30, 2027
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Leverage and invest in new/emerging technology to drive agility of ITD services.		Increased agility and modernization of ITD systems and services, measured by scorecard indicators.		FY26-FY27	Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.
SMART Goals		Accountable	Responsible	Target	By when
1	Complete all deliverables for ASPEN Modernization Release 6.	Paula Morgan	Tim Thackaberry	100% Deliverables Complete	June 30, 2026

2	Complete all requirements to closeout MMISR Project and move to Maintenance and Operations	Paula Morgan	Paula Morgan, Shanita Harrison	100% Requirements Complete	June 30, 2026
3	Complete all steps necessary to obtain funding for new Project Unite to continue HHS2020 vision.	Paula Morgan	Paula Morgan	100% Steps Complete	September 30, 2026
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Improve HCA Cybersecurity Posture to ensure a safe and secure technology environment.		Reach a SecurinPlatform Risk Score of 650 by June 30, 2026.		FY26-FY27	Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.
SMART Goals		Accountable	Responsible	Target	By when
1	Update policies/directives to align with current standards	Paula Morgan	Demetrius Brandon	20 Policies and Directives	June 30, 2026
2	Complete ASPEN Modernization Release 6.	Paula Morgan	Demetrius Brandon	Improvement to 95%	June 30, 2027
3	Maintain compliance with federal, state, and other regulatory agencies.	Paula Morgan	Demetrius Brandon	Up to 7	June 30, 2026
Medical Assistance Division (MAD)					
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Implement Program Oversight and Accountability within Medicaid that improve health equity and access to care for New Mexicans.		Increase contacts from Managed Care Organizations (MCO) to members through active care coordination.		FY26-FY27	Achieve health equity by addressing poverty, discrimination, and lack of resources—building a New Mexico where everyone thrives.
SMART Goals		Accountable	Responsible	Target	By when
1	Monitor regular MCO reports for quality measure performance.	Dana Flannery	Kathy Leyba	Monthly	June 30, 2027
2	Improve timely access to Well Child Visits (WCV) for all children including Children in State Custody	Dana Flannery	Tallie Tolen	100% WCV within 30 days or health plan's locus of control	June 30, 2027
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Build Medicaid workforce capacity to better serve New Mexicans who rely on Medicaid; bring staffing level commensurate with national Medicaid programs with similar Fee for Service populations.		Funded vacancy rate will be less than 10% by end of FY25.		FY26-FY27	Build the best team in state government by supporting employees' continuous growth and wellness.
SMART Goals		Accountable	Responsible	Target	By when
1	Review funded vacancy report and work with bureaus to fill positions.	Dana Flannery	Michal Hayes	Monthly	June 30, 2027
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Incentivize and support the New Mexico healthcare provider workforce to increase participation in Medicaid and meet the needs of New Mexicans.		Increase Medicaid provider participation and reduce the number of days to enroll a provider.		FY26-FY27	Leverage purchasing power and partnerships to create innovative models of comprehensive health care coverage that improve health and well-being for New Mexicans and the workforce.
SMART Goals		Accountable	Responsible	Target	By when
1	Enhance provider support options through targeted initiatives (i.e. office hours, workshops, roadshows, etc.)	Dana Flannery	Michal Hayes	Monthly	June 30, 2027
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Protect Medicaid members from HR1 federal changes.		75% of current eligible members maintain coverage.		FY26	Achieve health equity by addressing poverty, discrimination, and lack of resources—building a New Mexico where everyone thrives.
SMART Goals		Accountable	Responsible	Target	By when

1	Provide member education	Dana Flannery	Heidi Capriotti	3 communications	June 30, 2026
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Ensure Medicaid operational excellence.		Standard operating procedures exist, leadership training is made available, and succession plans are in place.		FY26-FY27	Build the best team in state government by supporting employees' continuous growth and wellness.
SMART Goals		Accountable	Responsible	Target	By when
1	Develop and implement standardized operating procedures (SOPs) and succession plans for Medicaid functions at Bureau level.	Dana Flannery	Heidi Capriotti	90% of SOPs and succession plans completed	June 30, 2027
Office of Fair Hearings (OFH)					
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Minimize the number days a final decision is pending for a fair hearing.		Expeditious resolution to appeals to support the health and well being of New Mexicans.		FY26	Achieve health equity by addressing poverty, discrimination, and lack of resources—building a New Mexico where everyone thrives.
SMART Goals		Accountable	Responsible	Target	By when
1	Finalize and issue decision	William Foppert	William Foppert	By 15 days or due date if sooner	June 30, 2026
Office of Human Resources (OHR)					
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Create a set of tools and trainings that will help employees with their continuous growth.		Increased employee satisfaction and engagement in trainings.		FY26-FY27	Build the best team in state government by supporting employees' continuous growth and wellness.
SMART Goals		Accountable	Responsible	Target	By when
1	Deliver podcasts	Dustin Acklin	Vanessa Medina	Bi-Monthly	June 30, 2027
2	Develop short visual trainings	Dustin Acklin	Vanessa Medina	1	December 31, 2025
3	Develop and implement manager trainings	Dustin Acklin	Vanessa Medina	2	September 1, 2025
4	Create online resource page for staff	Dustin Acklin	Vanessa Medina	1	September 1, 2025
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Create a set of tools and trainings that will help employees with their continuous growth.		Satisfaction with employee training will improve.		FY26	Build the best team in state government by supporting employees' continuous growth and wellness.
SMART Goals		Accountable	Responsible	Target	By when
1	Update employee trainings	Dustin Acklin	Vanessa Medina	2	June 30, 2026
2	Survey staff related to trainings	Dustin Acklin	Vanessa Medina	70% of Staff Response	December 31, 2025
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Implement technology to facilitate and efficient and transparent recruitment process		Reduce average time to hire for HCA to less than 60 days.		FY26-FY27	Build the best team in state government by supporting employees' continuous growth and wellness.
SMART Goals		Accountable	Responsible	Target	By when
1	Implement Monday.com recruitment, compensation and classification, onboarding and offboard processes	Dustin Acklin	Leonore Baca	Full process implementation	October 21, 2025

2	Train HR staff, divisional HR liaisons, and hiring managers on Monday.com and new processes	Dustin Acklin	Leonore Baca	100% of Identified Staff	December 31, 2025
3	Digitize Personnel Records and Implement electronic record management system	Dustin Acklin	Leonore Baca, Karen Gil	7,000+ Files	December 31, 2025
Office of the Secretary (OOS)					
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Advance health equity through increasing the number of opportunities for customer awareness of our services and accessibility.		Achieve 20 positive and/or neutral media impressions monthly in FY26.		FY26-FY27	Achieve health equity by addressing poverty, discrimination, and lack of resources—building a New Mexico where everyone thrives.
SMART Goals		Accountable	Responsible	Target	By when
1	Send 4 Press Releases to the Media each month highlighting achievements and/or initiatives	Alex Castillo Smith	Marina Pina	4	June 30, 2026
2	Secure 4 TV or radio interviews each month.	Alex Castillo Smith	Marina Pina	4 TV or Radio Interviews per month	June 30, 2026
3	Respond to all media inquiries by deadline	Alex Castillo Smith	Marina Pina	100% of the time	June 30, 2026
4	"Coffee meetings" with reporters to build relationships	Alex Castillo Smith	Marina Pina	1 per month	June 30, 2026
5	Divisions report potential media issues to communications department	Marina Pina	All Divisions	100% of the time	June 30, 2026
6	Connect with Spanish language media to promote HCA programs and services.	Alex Castillo Smith	Marina Pina	100% of large impact media press releases sent in Spanish	June 30, 2026
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Ensure HCA communicates clearly and consistently to New Mexicans about benefit changes under HR1.		Eligible New Mexicans retain their benefits.		FY26	Achieve health equity by addressing poverty, discrimination, and lack of resources—building a New Mexico where everyone thrives.
SMART Goals		Accountable	Responsible	Target	By when
1	Division level in-person outreach.	Alex Castillo Smith	Marina Pina	12 public events	June 30, 2026
2	Deliver plain-language HR1 Supplemental Nutrition Assistance Program (SNAP) benefit change materials	Alex Castillo Smith	Marina Pina	100% HCA field offices	October 1, 2025
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Modernize and regularly update the HCA website to improve accessibility, usability, and accuracy of information for customers, providers, community partners, and staff.		A modernized website provides visitors and users with accurate, up-to-date, and user-friendly information, improving accessibility, and increasing meaningful engagement with the Health Care Authority.		FY26-FY27	Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.
SMART Goals		Accountable	Responsible	Target	By when
1	Build new website homepage and program pages	Alex Castillo Smith	Marina Pina	14+ pages	31-Dec-26

2	Establish a quarterly content review and update process to ensure all program pages remain accurate and current.	Alex Castillo Smith	Marina Pina	100% of program pages reviewed and updated quarterly	June 30, 2027
State Health Benefits (SHB)					
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Improve communication so members can make a more fully-informed choice about their health care coverage		Improved understanding of benefits offered by State Health Benefits and how to use them.		FY26-FY27	Build the best team in state government by supporting employees' continuous growth and wellness.
SMART Goals		Accountable	Responsible	Target	By when
1	Engage with 40% of members via open enrollment tools (e.g. plan comparison tool, enrollment guide, webinars) during 2026 open enrollment.	Colin Baillio	JoLou Trujillo-Ottino	40%	January 1, 2026
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Implement a more member-driven plan for health care coverage model for New Mexicans enrolled in a State of New Mexico health plan. Align available services and benefits with needs of members.		Established plans align with member feedback and best practices.		FY26	Leverage purchasing power and partnerships to create innovative models of comprehensive health care coverage that improve health and well-being for New Mexicans and the workforce.
SMART Goals		Accountable	Responsible	Target	By when
1	Complete all necessary deliverables for a successful procurement of State Health Benefits carriers, with contracts starting 1/1/2026.	Colin Baillio	JoLou Trujillo-Ottino	Estimated 100 deliverables (pending more information)	June 30, 2026
Strategy		Desired Outcome		Fiscal Year	HCA Goal
Develop and deliver significantly enhanced, affordable employee benefits that support improved health outcomes and long-term wellbeing for our workforce.		Starting July 1, 2025, employees will receive a reduced out of pocket cost for health insurance premiums.		FY26	Build the best team in state government by supporting employees' continuous growth and wellness.
SMART Goals		Accountable	Responsible	Target	By when
1	Carrier Selection through RFP for medical, pharmacy, dental, vision, life, and EAP is complete with signed	Colin Baillio	JoLou Trujillo-Ottino	6 completed contracts	June 30, 2026
2	Complete all SB 376 implementation tasks	Colin Baillio	JoLou Trujillo-Ottino	5 tasks	June 30, 2026
3	Hiring new staff	Colin Baillio	JoLou Trujillo-Ottino	4-7 staff	September 1, 2025
4	Cross training for staff	Colin Baillio	JoLou Trujillo-Ottino	100% of SHB Staff	March 31, 2026



HEALTH CARE
A U T H O R I T Y

Fiscal Year 2027
Health Care Authority
IT STRATEGIC PLAN
September 2, 2025

Paula N. Morgan
Chief Information Officer

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EXECUTIVE SUMMARY

This Information Technology Strategic Plan provides a framework to guide Information Technology (IT) efforts at the New Mexico Health Care Authority (HCA) for State Fiscal Year 2027. The plan confirms the critical role of Information Technology as an enabler of success in achieving the four strategic goals of the department to:

1. 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.
2. Achieve health equity by addressing poverty, discrimination, and lack of resources, building a New Mexico where everyone thrives.
3. Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.
4. Build the best team in state government by supporting employees' continuous growth and wellness.

IT is an essential piece of the department's ability to achieve its 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."***

Current and future IT investments are critical to achieving the department's strategic goals and mission.

In developing this plan, division leadership participated in a comprehensive department level strategic decision-making process that recognizes and honors the critical functions of the individual divisions and our customers. This plan is the product of both a collaborative group effort and a formal strategy formulation procedure enacted over a long period.

The Health Care Authority keeps a department strategic goal centered around IT. The goal, ***"Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information,"*** is the cornerstone for the IT strategic plan. This goal provides a practical guide and a scope within which the department will focus its IT planning, development, management, and support in State Fiscal Year 2027.

This plan includes initiatives that support the department's FY27 Strategic Plan which includes desired outcomes that are supported by IT such positioning our technology infrastructure to provide New Mexico residents and employees with a robust and seamless interface. providing data analytic competences for driving data driven decision making, and continuous improvement of the department's Cybersecurity Posture to ensure a safe and secure technology environment. The initiatives within this plan are described in terms that make clear the alignment with the mission and strategic goals of the department. This strategy will evolve and sharpen to improve

business value and services using information technology, **with a central focus on how HCA can develop and build IT to improve the experience of our customers and our workforce.**

I. AGENCY OVERVIEW

A. AGENCY PURPOSE AND MISSION

The mission of the department is “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.” The work of the IT division aligns with the mission of the department as technology provides the backbone by which innovative, high-quality health and human services are designed and delivered.

B. AGENCY BUSINESS GOALS

The department has four strategic goals that support the department’s mission.

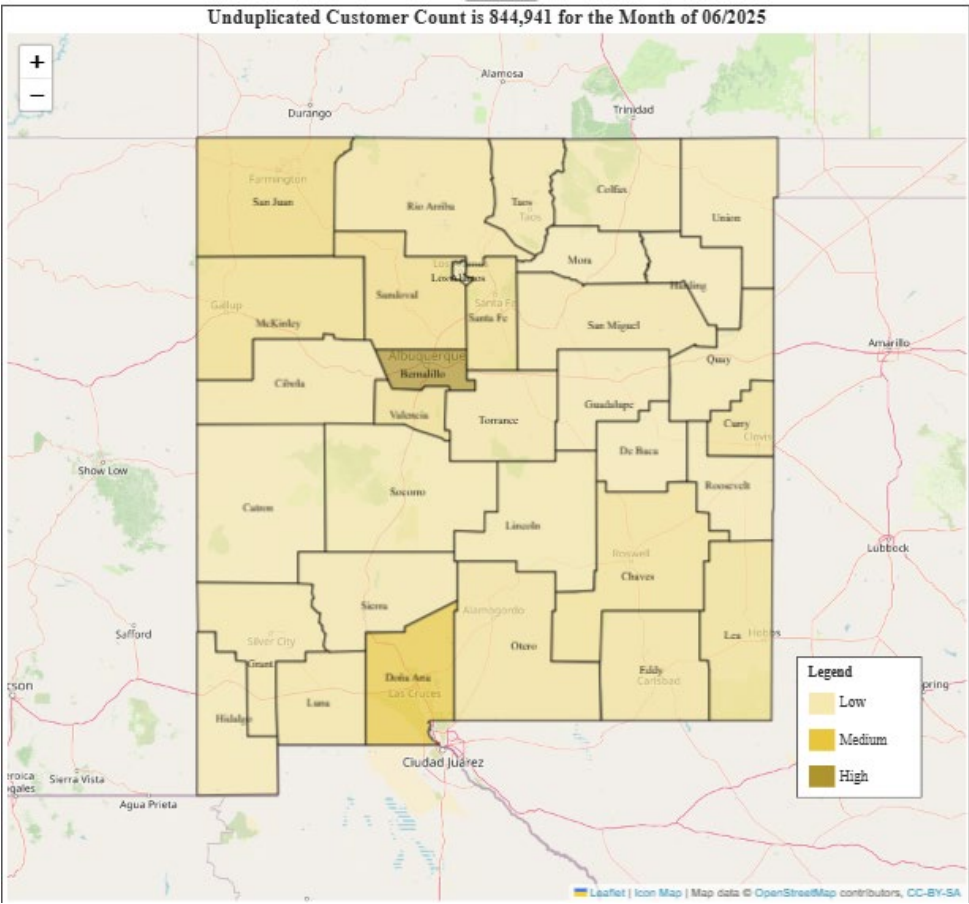
- Goal 1 – Leverage purchasing power and partnerships to create innovative policies and models of comprehensive health care coverage that improve the health and well-being of New Mexicans and the workforce.
- Goal 2 – Achieve health equity by addressing poverty, discrimination, and lack of resources, building a New Mexico where everyone thrives.
- Goal 3 – Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.
- Goal 4 – Build the best team in state government by supporting employees’ continuous growth and wellness.

While Goal 3 is directly supported by the IT division, technology can be found supporting all four goals of the department.

C. AGENCY VISION

The Department’s vision is: **Every New Mexican has access to affordable health care coverage through a coordinated and seamless health care system.**

The department is currently supporting over 844,941 New Mexicans who are enrolled in the public assistance programs administered by the department.



The impact of the department’s services can be seen in the figure below. Technology provides the backbone by which the department can positively impact the lives of New Mexicans.

D. AGENCY BUSINESS PRIORITIES AND PRIORITY CHANGES

HCA manages a budget of over twelve billion dollars of state and federal funds and administers services to over 844,941 low-income New Mexicans through programs such as:

- Behavioral Health Services (mental illness, substance abuse, and compulsive gambling)
- Child Support Establishment and Enforcement
- Community Services Block Grant (CSBG)
- General Assistance for low-income individuals with disabilities

- Low-Income Home Energy Assistance Program (LIHEAP)
- Meals for the Homeless People
- Medicaid and Children’s Health Insurance Program (CHIP)
- Refugee Resettlement Program (RRS)
- School Commodity Foods Program
- SNAP Education Program (SNAP-Ed)
- Supplemental Nutrition Assistance Program (SNAP)
- Temporary Assistance for Needy Families (TANF)
- The Emergency Food Assistance Program (TEFAP)

The programs are administered through Program Divisions:

1. [Medical Assistance Division \(MAD\)](#)
2. [Income Support Division \(ISD\)](#)
3. [Child Support Enforcement Division \(CSED\)](#)
4. [Behavioral Health Services Division \(BHSD\)](#)
5. [Development Disabilities Division \(DDSD\)](#)
6. [Division of Health Improvement \(DHI\)](#)
7. [State Health Benefits \(SHB\)](#)

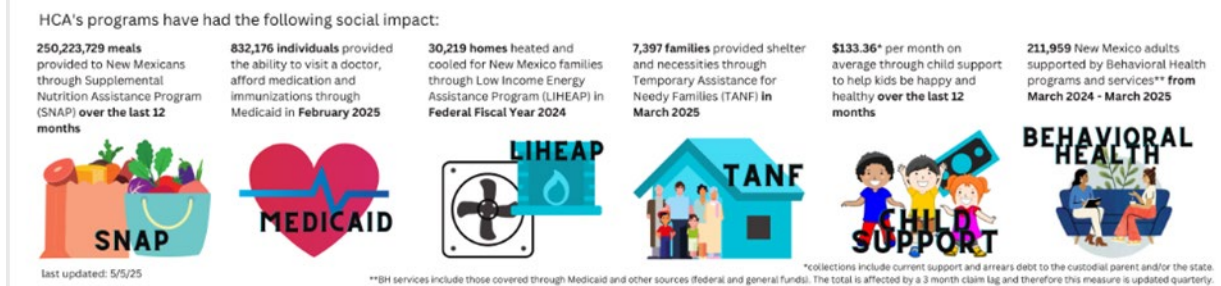
HCA is a key member of the [NM Behavioral Health Collaborative](#) and works across state agencies to collaborate on behavioral health issues.

HCA is a large organization with over 2400 Full-Time Equivalent (FTE). As such, the organizational charts for the department are too large to embed within this document.

A high-level organizational chart for the Health Care Authority (HCA) is provided at Appendix A-I. The organizational chart for the Information Technology Division (ITD) is available in Appendix A-II.

E. AGENCY ACCOMPLISHMENT, GOALS, AND CHALLENGES

The impact of the department's services can be seen in the figure below. Technology provides the backbone by which the department can positively impact the lives of New Mexicans.



II. IT ENVIRONMENT

1. Major Applications

ITD implements innovative technology and provides data-driven decision-making capabilities that enable convenient access to services and information. ITD is comprised of several specialist areas to facilitate this: systems services, software services, customer innovations, security, data analytics, and business operations. As part of this effort, ITD manages a wide array of applications:

Automated System Program and Eligibility Network (ASPEN): internal web-based application used by multiple divisions for eligibility determination for public assistance programs managed by HCA.

ASPEN Central Office: web-based application that functions as a public portal for individuals to access licensed facility survey reports. Also used in the collection and analysis of healthcare facility data.

BBS Activities: web-based application for Bureau of Behavioral Support (BBS) activities, including management of Behavior Support Consultants, Positive Approach Specialists, clients, and related technical assistance.

Behavioral Health STAR (BHSD STAR): non-Medicaid information system used by Behavioral Health Collaborative agencies and the Behavioral Health Services Division (BHSD) to process non-Medicaid claims, encounters, and workbooks which support behavioral health services funded through federal block grants and state funds.

Central Registry: web-based system used by DDSD to track incoming applicants for one or more of the services offered by the State.

Child Support Enforcement System (CSES): internal web-based application used by HCA's Child Support Enforcement Division (CSED) for the establishment and enforcement of child support obligations.

Claims: web-based application that houses older, pre-ASPEN claims that cannot be housed in ASPEN. Used by the Office of the Inspector General and Restitution to track overpayments of Medicaid benefits.

Client Tracking System (CTS): web-based application used to track communication between ISD staff and clients and to view historical information about actions taken.

Consolidated Customer Service Center (CCSC): web-based application that enables customers to interact with HCA through phone, email, text, or chat 24 hours a day, 7 days a week, 365 days a year, with automated support and to engage a live person during normal business hours.

Cost Allocation Reporting System (CARS): web-based application used to manage cost allocations across and within divisions.

Discharged (Foley): web-based application that tracks and manages information about clients discharged from healthcare facilities.

Electronic Coordination of Long-Term Services (eCOLTS): internal web-based application hosting legacy CSED data from the system preceding the CSES application. Used for lookup only.

Employee Management System (EMS): web-based application used to track position and employee performance information such as employee evaluations.

eReporting: web-based application that provides reporting functionality for the EWI system.

EWI: web-based application that supports the larger child support system environment.

Facility Electronic Licensing Information eXchange (FELIX): web-based application used for the issuance of licenses for healthcare facilities to operate. Interfaces with the Centers for Medicare and Medicaid Services (CMS) national database known as ASPEN Central Office. Functions as the public portal for individuals to access licensed facility survey reports.

Fixed Asset Management System (FAMS): internal web-based application that facilitates the management of state-owned fixed assets.

IMB Intake and Closure: web-based applications used by the Incident Management Bureau (IMB) to manage the intake and handling of allegations of ANE (abuse and neglect) at medical facilities and to facilitate conducting investigations into the allegations.

Incident Report (IR) Online: web-based application for submitting and managing abuse reports in health facilities. Interfaces with the DHI-HFLC Complaints team, allowing for efficient report submission, review, and complaint generation.

Income and Eligibility Verification System (IEVS): database application for managing the IRS data used for checking client's income for the purpose of determining benefits eligibility.

Integrated CSFP Operating System (ICOS): internal web-based application for managing the Commodity Supplemental Food Program (CSFP).

Internal Review Committee (IRC): internal web-based application used by DDS and DHI to review and manage cases of non-compliance or issues with provider agencies.

Jackson Clients: web-based application that manages detailed information related to clients involved in the Jackson litigation. While the litigation is over, the system continues to track the implementation of court-mandated improvements in care and services for individuals with developmental disabilities.

Jackson Notification Service: console application that acts as an automated background service that monitors the Jackson database for updates on open findings and sends timely email notifications to relevant stakeholders. Ensures prompt attention to ongoing issues related to the Jackson Litigation settlement.

MAD Tracker: web-based system used to maintain a waiting list for clients applying for a DD waiver. Includes tracking DD Waiver Applications, applicant eligibility status, and managing the waiver allocation process. Used to manage Medicaid Centennial Care for Aging and Long-Term Home and Community Based Services.

Medicaid Management Information System (MMIS): web-based application, also known as Omnicaid, used by the Medical Assistance Division as the principal system for claims processing, capitation payments, third party liability determinations, fraud detection, pharmacy benefit management, and other Medicaid functions.

Omnicaid Data Import: database application that acts as an automated system for importing and processing Medicaid-related data files received from Conduent. Ensures timely and accurate data integration for analysis and reporting.

Omnicaid Reports: database application that provides reporting for the Omnicaid system.

Provider Enrollment: web-based system that tracks current Provider Agency agreements and the services they provide to each county in New Mexico.

Pre-Admission Screening & Resident Review (PASRR): web-based application for tracking individuals being screened for mental illness, intellectual disability, or related

conditions which affect intellectual functioning, prior to admission to a Medicaid certified nursing facility.

Provider Enrollment (PE): web-based application used by the Provider Enrollment Unit (PEU) to manage all aspects of healthcare provider enrollment. Tracks healthcare provider information, services offered, service areas, contract details, and any restrictions on providers.

Provider Enrollment Reports: web-based application used in conjunction with the Provider Enrollment application to generate reports.

Provider Search: web-based application with public facing portal to search for Health Facility Licensing & Certification (HFLC) surveys. Links to ASPEN and FELIX to aggregate information on these surveys.

Query Interstate Cases for Kids (QUICK): web-based proxy application used for allowing queries of NM Child Support data from other states.

Regional Office Request for Assistance (RORA): web-based system to promote communication with external and internal partners and to provide a forum for raising concerns to DDS. Allows DDS to respond in a timely fashion and strategically employ assistance as necessary.

RORA Data Export Service: web-based application that extracts data from RORA and Provider systems, formatting it for use in Bureau of Systems Improvement (BSI) data models. Enables advanced analytics and reporting on regional assistance trends and provider performance.

RORA Notification Service: console application that acts as an automated notification system that keeps users informed about the status of current Regional Office Requests for Assistance.

Secondary Freedom of Choice (SFOC): web-based application that allows Case Management agencies to offer clients a list of desired services from providers based on client requirements.

Service Summary: web-based application that summarizes the services offered by selected agencies.

SunSystems: application used by the Administrative Services Division (ASD) to manage certain aspects of the accounts receivable (AR) process.

Your Eligibility System (YES) New Mexico: public facing web portal for New Mexicans to apply for benefits or services, to check the status of an application or case, and to report changes in their status.

yes.nm.gov: public facing web portal for New Mexicans to apply for child support services, to check the status of their child support cases, and to report changes in their status.

2. Infrastructure

HCA has over 60 offices across the state and utilizes the Department of Information Technology's (DoIT) backbone network to provide a wide area network and internet connectivity to all locations. The HCA network consists of Cisco routers, switches, firewalls, and load balancers, in addition to the main perimeter Palo Alto firewall and was refreshed in FY25 with new switches throughout the State.

HCA is also installing a Cisco Software Defined Wide Area Network (SDWAN) during FY26. This upgrade will give HCA field offices a significant network upgrade; increasing bandwidth, reducing congestion and improving fault tolerance.

HCA currently hosts production infrastructure at the Simms data center and in Amazon Web Services (AWS). AWS currently hosts two of HCA's most critical enterprise applications, ASPEN and CSES. AWS and associated services allow for greater scalability, resiliency, and disaster recovery capabilities.

HCA hosts the vast majority of its on-premises systems on aging Dell VxRack devices, which are housed at the Simms data center. As this converged infrastructure ages out, HCA is moving existing systems and workloads to the cloud as well as implementing new systems within the cloud. File storage and other server functions will continue to be migrated during FY26.

HCA's servers are nearly all virtual, utilizing the VMware platform and AWS native virtualization. Servers are running Windows Server and Linux operating systems. In support of the ASPEN and CSES applications, HCA has large Oracle database services with licenses to be renewed in FY26.

Critical HCA data is protected using Veeam, Exagrid, built-in Microsoft Technologies and AWS Backup Services. Additionally, HCA is currently working to standardize backup and retention policies across our entire hybrid cloud architecture; mirroring AWS policies with those used for on-premises systems.

3. Security

IT security is built into operations, software development, and project management activities within the department. The department conducts regular security, vulnerability,

and compliance scans utilizing various tools such as Nessus, Palo Alto, MS Defender, and Splunk. The department also contracts with third parties on an annual basis to conduct internal and external penetration testing, internal control assessments for compliance with federal security standards, and identification of security best practices. HCA achieved an Overall Risk Score of 727 on the Ivanti platform in FY 25.

The HCA security is driven by compliance requirements mandated by the Internal Revenue Service (IRS), the Center for Medicare and Medicaid Services (CMS), and the Social Security Administration (SSA) security specifications, which are derived from the National Institute of Standards and Technology (NIST) 800-53 information security controls. Security assessments are conducted annually as required for CMS and IRS compliance. Multiple independent assessments of technical, management, and operational controls, including penetration testing, were performed in FY 25. HCA staff and contractors complete security awareness training upon hire and annually thereafter, using Blackboard and KnowBe4 training platforms.

HCA will continue to work with the Office of Cybersecurity to improve its security posture. These improvements will be monitored through the new Securin platform and through tools and resources procured by the agency. HCA will also work with DoIT to continue to meet its obligations for annual assessments and penetration testing.

4. Agency IT Certified Projects

Delivering business value and enhancing services to our customers is provided through successful implementation of various IT projects within HCA. The department has three certified projects: the Medicaid Management Information System Replacement (MMISR) project, the Child Support Enforcement System Replacement (CSESR) project, and the Facility Electronic Licensing Information eXchange (Felix) project. Each project directly supports the department’s strategic goal to ***Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.***

PROJECT NAME: Medicaid Management Information System Replacement (MMISR)	
Project Description	The Health Care Authority (HCA) is executing the Medicaid Management Information System Replacement (MMISR) project which is a multi-year effort to replace the department’s existing Medicaid Management Information System (MMIS). NM Medicaid must comply with federal regulations (CFR433.122), which require states to implement modular systems for Medicaid claims processing. The current MMIS is a monolithic solution that will no longer be supported by the Centers for Medicare and Medicaid Services (CMS). CMS has mandated that states replace their monolithic solutions with modular solutions in order to continue federal funding support. CMS wants to be able to leverage the modular approach to optimize project design for agility, interoperability, and flexibility to allow for a “plug and play” approach to avoid vendor lock in for systems.

Technology types planned for the MMISR system include Software as a Service (SaaS) solutions, web/mobile applications, and electronic content management. The MMISR project will phase in delivery of services based upon implementation of multiple modules.

The MMISR's modules, and whether they are in production or in development, include:

System Integrator (SI) – a Service-Oriented Architecture (SOA) Integration Platform including an Enterprise Service Bus (ESB) to integrate the discrete modules and enable them to function as a single cohesive system.

- System Integrator (SI) was live with managed file transfer (MFT) service in June 2023.
- Full functionality of the platform went live in September 2024.
- Integration with BMS module was live in November 2024.
- Other MMISR module integration is actively in progress in SFY2026.

Data Services (DS) – Enterprise data warehouse, analytics capability, and business intelligence.

- Data Services (DS) was live with data exchanges through Platform in July 2024.
- Data Lake established September 2024
- Full module integration with SI platform in September 2024.
- Member Months data mart and dashboard live in October 2024
- Inpatient data mart and dashboards available June 2025
- 7 other data marts and dashboards in development in SFY2026

Quality Assurance (QA) – Third Party Liability (TPL), Recovery Audit Contract (RAC), Fraud and Abuse Detection, and Quality Reporting

- Quality Assurance (QA) live with legacy MMIS system data sources since 2020.
- QA module in testing phases with SI platform and FS module in SFY2026 for planned go live to coincide with FS module go live in December 2025.

Financial Services (FS) – the centralized engine to adjudicate and process claims and capitation payments, pharmacy benefit management, data exchange, and reporting.

- Module in DDI phase; go live is planned for December 2025

Provider Management (formerly Benefit Management Services) – streamlined solution for enrolling and managing providers.

- Module in production and integrated with the SI Platform November 2024
- Module formally moving to M&O within HCA ITD, and working towards CMS Certification

	<p>Unified Public Interface (UPI) – providing new web-based self-service tools and an enhanced, cross agency customer service center to act as a single point of entry for customers and providers, designated as the Consolidated Customer Service Center (CCSC) and Unified Portal (UP)</p> <ul style="list-style-type: none"> • CCSC has been in production since June 2020 and is CMS certified • Continuous enhancement releases are actively underway • UP has completed phased go lives for Behavioral health – June 2022; Child Support April 2023 and YesNM September 2024 • Continuous enhancement releases are actively underway • Development of mobile app is underway and planned for in SFY2026 <p>Children’s Behavioral Health (CBH) is made up of several Children Youth and Families Department (CYFD) functional modules which compromise the child welfare information systems (CCWIS) and children’s behavioral health programs. Funding for the module is requested by the CYFD.</p> <ul style="list-style-type: none"> • Integration with SI Platform began in June 2025 and is being aligned to CYFD’s NM IMPACT planned go live in February 2026.
Estimated Project Costs	\$419,480,929
Current Funding	\$419,480,929 has been appropriated to MMISR; state general fund amount is \$41,948,093; federal portion is \$377,532,836.
Certified Project Phase	Implementation
Estimated Completion	Core MMIS functions in 2026
Strategic Priority	1
Agency IT Strategic Plan Alignment	1
PROJECT NAME: Child Support Enforcement System Refactor (CSESR)	
Project Description	<p>The Child Support Enforcement System Modernization project is focused on incrementally modernizing New Mexico’s 27-year-old Child Support Enforcement System (CSES), which was originally refactored from COBOL to Java and transitioned to a FedRAMP-certified cloud environment in 2022. While the re-platformed system has delivered key operational benefits including reduced Maintenance & Operations (M&O) costs and increased flexibility, HCA recognizes the need for continued modernization to improve usability, integration, and long-term sustainability.</p> <p>In FY24, HCA submitted a streamlined feasibility study (SFS) proposing full replacement of the system. Based on feedback from the federal Office of Child Support Services (OCSS), the agency pivoted to an incremental modernization strategy, which aligns more closely with federal guidance and state enterprise IT architecture. This approach enables the phased rollout of new functionality, interfaces, and integrations while preserving continuity of services.</p>

	<p>As part of this transition:</p> <ul style="list-style-type: none"> • HCA is now working directly with its M&O team and contractor to plan and execute phased development and deployment activities. • Design and development work will focus on modernizing the user interface (UI), enabling improved user experience, and establishing seamless integrations with HHS enterprise systems such as MMISR, the Unified Portal, and other shared services. <p>The current multi-year roadmap outlines multiple releases, beginning with UI design and pilot rollouts to selected field offices. Future phases will expand system functionality and complete statewide deployment. HCA anticipates continued collaboration with OCSS on APD updates and future federal certification milestones.</p>
Estimated Project Costs	\$80,663.0
Current Funding	\$14,962,000 including \$5,087,080 in state general fund. The remainder is federally funded.
Certified Project Phase	Planning
Estimated Completion	June 2029
Strategic Priority	2
Agency IT Strategic Plan Alignment	2
PROJECT NAME: Electronic Licensing and Information eXchange (FELIX) Replacement Project	
Project Description	<p>The strategic transition of the Division of Health Improvement (DHI) and the Electronic Licensing and Information eXchange (FELIX) Replacement Project to the New Mexico Health Care Authority (HCA) is a pivotal development in the state's health care health landscape. FELIX will replace New Mexico's end-of-life health care facility licensing system in two phases. C2 funds were authorized for FELIX Phase 1 in fiscal year 2025. Phase I covers the acquisition and vendor-led implementation of the base software replacement. The subsequent Phase 2 aims to expand functionality by integrating FELIX with the HCA's System Integration Platform, which will connect the facility licensing system to HCA shared services and foster a more interconnected health and human services framework.</p> <p>This integration will not only improve license management, but also reporting and data sharing among health and human services stakeholders. Ultimately, this modernization effort is expected to facilitate better healthcare delivery, informed by real-time data, and contribute to the overarching goal of providing New Mexicans with accessible, high-quality, and cost-effective healthcare solutions.</p>

	<p>The FELIX software system is operationally critical for the issuance of licenses for healthcare facilities to operate. FELIX is used for licensing healthcare facilities and interfaces with the Centers for Medicare and Medicaid Services (CMS) national database known as Aspen Central Office. It also functions as the public portal for individuals to access licensed facility survey reports. It is a key tool used in the collection and analysis of healthcare facility data.</p> <p>The main objective of the project is to replace the current software which has reached end of life. The replacement software will meet the new CMS interface requirements for Aspen Central Office as it moves to a cloud-based environment in 2021-27 known as i-QIES.</p> <p>The replacement of FELIX will eliminate lost productivity due to frequent crashes and provide better access to healthcare facility data.</p> <p>FELIX supports HCA’s mission to ensure that New Mexicans attain their highest level of health by providing whole-person, cost-effective, accessible, and high-quality health care and safety-net services.</p>
Estimated Project Costs	\$1,400.0
Current Funding	\$1,400.0
Certified Project Phase	Initiation
Estimated Completion	June 2026
Strategic Priority	3
Strategic Priority	\$1,400.0
Agency IT Strategic Plan Alignment	

5. Workforce

A. Full Time IT Employees

The Information Technology Division is currently authorized for 105 full-time FTE. ITD is currently seeking budget authority to fill 100 positions in FY26. ITD currently has 80 FTE filled. The workforce of our division is made up of developers, IT architects, IT database administrators, IT project managers, IT business analysts, IT security analysts, IT end user support personnel, network and system administrators, data analytic specialists as well financial and business operations support positions.

Classification	Positions Filled	Positions Vacant
Mixture of Application Developers, System Administrators, Data	80	25

Analytics and End Users		
-------------------------	--	--

B. Percentage of IT Full-Time Employees Teleworking, In the Office, or a Hybrid Schedule

Teleworking (%)	Working in the Office (%)	Hybrid Schedule (%)
4	75	1

C. IT Professional Services Contractors

The Information Technology Division utilizes various vendors for staff augmentation purposes. These contractors provide the skills and efforts needed for projects hosted by HCA or can fill roles needed for daily operations such as developer support, project management and support for network, systems administration duties and application development/migration. In addition to staff augmentation, ITD utilized an IT managed services vendor for infrastructure support. Between IT managed services, Advisory services, fixed price deliverable contracts, and staff augmentation contracts, the division has several hundred additional contractors supporting the delivery of IT professional services.

Service Category	Contract Vendor Name	Number of Contract Personnel
Professional	Accenture	453
Professional/General	ANM	16
Professional	ATA Services	11
	Berry_Dunn	
Professional	Cambridge Technologies	1
Professional /General	Carahsoft	
	Clover_Leaf	
	Cogent	2
Professional	Cognosante	
Professional	Conduent	203
Professional	CSG	7
	CSRA State & Local Solutions	
Professional	DataBank	38
Professional	Dataman_USA	14
Professional	Deloitte	329
	First_Data_FISERV	1
Professional	GDIT	56
Professional	HealthTech Solutions	26

	Health Management Systems	7
General	Hyland	
	IBM	N/A
	Insight Public Sector	
Professional	LeapFrog	5
Professional	McKinsey	
Professional	Mythics	7
Professional	Netlogx	12
Professional	North Highland	10
Professional	NTT_Data	
Professional	Principle Consulting Services	4
Professional	RESPEC	2
Professional	Rose International	5
General	SHI	
Professional	McKinsey	
Professional	SPRUCE/KPMG	101
Professional	TEKsystems	178
	TurningPoint	N/A
	Other	735

6. Challenges

[Provide a list of your agency IT challenges including possible opportunities to address them.]

No.	Agency IT Challenge Description	Potential Opportunities to Address the IT Challenge Description
	Recruiting, hiring, and retaining IT talent. State pay bands and classifications are not aligned with changes occurring in the public and private sectors the past several years making these challenges more difficult.	The State Personnel Office recently implemented a new position classification and pay band structure that could assist in recruitment.
	Ensuring critical applications are flexible enough to adapt to changes in business processes quickly and cost effectively.	Leverage AWS when appropriate to take advantage of the inherent scaling capabilities of cloud providers.
	Maintaining staff morale when the demands for IT services are greater than the supply of resources to deliver the services.	Our department has stood up morale teams within offices to help with building of community.
	Ensuring security of IT assets and data in an evolving threat landscape with minimal staff and tools.	Continuous improvement in our cybersecurity toolsets and adding

		cybersecurity professionals to our staff.
	Increases in IT costs and migration of large applications into production.	ITD is currently working on an application portfolio.
	Increasing vendor and software licensing costs.	ITD has been working to improve vendor management and negotiating abilities.
	Significant level of technical debt requiring investments of time and funding to remediate.	With DOH to HCA application migrations complete, ITD can now focus on modernization and consolidation.
	Siloed application development and maintenance makes it difficult to enforce common standards and processes across all HCA systems.	ITD had been building a system integration platform that will serve as the mechanism for sharing information across systems.
	Lack of a mechanism for sponsoring H1B visas adds to the difficulty of hiring for many IT positions, most notably application developers and data scientists.	Provide the ability for State agencies to support HB1 visa candidates.

III. KEY ACCOMPLISHMENTS – PRIOR FISCAL YEAR

State fiscal year 2025 was the inaugural year for the Health Care Authority which included integrating staff, networks and applications from three different departments while ensuring continues operations of all programs and supporting emergency response functions for wildfires and flash flooding. The division is proud of the work our teams have done to support the mission and goals of the department, and those accomplishments are reflected in the table below.

A. STRATEGIC IT ACCOMPLISHMENTS

STRATEGIC PRIORITY 1 – Successfully implement technology to give customers and staff the best and most convenient access to services and information.	
HCA strives to continuously improve customer service, operational excellence, and employee experience and performance	
Strategy 1	Promote ideas and information to flow clearly and quickly among all team members and stakeholders
Accomplishments	IT participated in numerous Department HUDDLE and Great Expectations meetings to improve communication and to highlight the work IT does in support of the department’s mission, goals, and workforce.

Outcomes/Metrics	<p>For FY25, 90% of division respondents reported that they strongly agreed or agreed that they know what is expected of them at work.</p> <p>6.9% disagreed with this statement.</p>
Strategy 2	Position our workforce for success
Accomplishments	Continue to examine the effectiveness of IT processes with regard to the needs of the Department.
Outcomes/Metrics	<p>During FY25, the department saw an increase in the rating of how well-equipped employees felt to effectively do their jobs based on the IT equipment, technology, and services they have had over the past several years.</p> <p>In FY25, 65.36% of division respondents reported that they agreed or strongly agreed that the department provided the technological tools, training and resources needed to be effective while working.</p> <p>15.83% disagreed with this statement.</p>
Strategy 3	Empower a data driven organization
Accomplishments	<p>IT continues to the multi-agency Data Governance Council (DGC). The Council consists of members from all HSD divisions and sister HHS agencies such as ALTSD, CYFD, DOH, and ECECD.</p> <p>Data quality standards have been defined.</p>
Outcomes/Metrics	The DGC manages an enterprise memorandum of understanding (MOU) across HHS agencies.
Strategy 4	Leverage and invest in new and emerging technology to drive agility of IT services
Accomplishments	<p>MMISR System Integration Platform (SIP), Unified Portal (UP), Data Lake (DS), and Benefits Management/Provider Enrollment (BMS) went live in FY25.</p> <p>CCSC implemented the functionality of agent assist utilizing generative AI.</p> <p>Multiple significant upgrades and enhancements were done to ASPEN over the course of FY25 (see itemized listing in section B below). The major initiative for the fiscal year was the kickoff of the ASPEN Modernization effort, for which 1 of 6 planned releases was completed in FY25. The goal of this project is to enhance the user experience for our clients and to make it easier to gain access to needed benefits. The improved user experience extends to HCA staff, making it possible for them to determine client eligibility more efficiently.</p>

Outcomes/Metrics	<p>The SIP was managing file transfer (MFT) service with CCSC. This is the first production use-case for the MMISR project.</p> <p>CCSC average handle time has dropped from 8min 30 sec to 6 min 23 sec.</p> <p>The automation improvements implemented in the ASPEN system decreased the number of manual hours required by staff to handle the impacted processes.</p>

B. OTHER KEY IT ACCOMPLISHMENTS – PRIOR FISCAL YEAR

State fiscal year 2025 brought many other accomplishments for the division. The division is proud of the work our teams have done to support the mission and goals of the department, and those accomplishments are reflected in the table below.

APPLICATION	
Accomplishment	Migrated 16 applications from DoH environment to HCA environment as part of the HCA transition.
Value or Impact	Simplified workflow for DDSD and DHI employees makes it easier for them to serve their constituents and to provide needed services to New Mexicans.
Accomplishment	ASPEN - Summer EBT
Value or Impact	Provides grocery benefits to families with eligible children during the summer months when school is out
Accomplishment	ASPEN - SNAP E&T Workpath
Value or Impact	Helps SNAP participants gain skills and find work to increase their self-sufficiency
Accomplishment	Turquoise Care- Random Assignment, Notices, Disable max enrollment, open enrollment period
Value or Impact	Multiple changes to Turquoise Care to enable random case assignment, to stay current with changes in notices, and to implement changes related to enrollment
Accomplishment	ASPEN - CMS Rule Changes- auto enroll SSI Medicaid recipients into QMB
Value or Impact	Implement CMS rule changes to automatically enroll SSI Medicaid recipients into the Qualified Medicaid Beneficiary (QMB) program
Accomplishment	ASPEN - Notice Changes

Value or Impact	Keep ASPEN notices up to date with the most recent regulatory and procedural changes
Accomplishment	ASPEN - Non-MAGI Medicaid changes
Value or Impact	Allow eligibility determinations based on something other than Modified Adjusted Gross Income (MAGI), which in turn broadens the universe of eligible participants
Accomplishment	ASPEN - Medicaid reinstatement of children who were procedurally closed during unwinding
Value or Impact	Get more children back on Medicaid after they were erroneously closed during the unwinding project.
Accomplishment	ASPEN - D-SNAP
Value or Impact	More efficient disbursements of SNAP benefits during disasters
Accomplishment	ASPEN - ALTSD/SNAP Benefits/Supplement
Value or Impact	One-time increase to adults with disabilities and older adults (60+) that receive SNAP state supplement benefit.
Accomplishment	ASPEN - LIHEAP changes- automation, reporting, RTE, disaster supplemental payments
Value or Impact	Multiple changes to the Low Income Home Energy Assistance Program (LIHEAP) to provide better automation, more accurate reporting, real-time eligibility (RTE) enhancements, and more effective supplemental payments during disasters
Accomplishment	ASPEN - Extend LOC recertification dates for individuals with certain conditions
Value or Impact	For populations with certain conditions, an annual level of care will no longer be required. Reduced paperwork and processing for these groups.
Accomplishment	ASPEN - ABAWD Changes
Value or Impact	Stay current with regulatory and procedural changes related to able-bodied adults without dependents (ABAWDs)
Accomplishment	ASPEN - RTE Changes
Value or Impact	Stay current with regulatory and procedural changes related to real-time eligibility (RTE)
Accomplishment	ASPEN – Heat & Eat
	Maximize benefits for low-income households by leveraging utility allowances

Value or Impact	
Accomplishment	ASPEN - NAC- National Accuracy Clearinghouse to prevent duplicate SNAP participation
Value or Impact	Prevent people from obtaining SNAP benefits in multiple states
Accomplishment	ASPEN - HCBW/ICW Changes
Value or Impact	Stay current with regulatory and procedural changes related to Home & Community Based Waivers and Institutional Care Waivers.
Accomplishment	ASPEN - Justice Involved Changes
Value or Impact	Allow incarcerated individuals population to re-enroll back into Medicaid 30-90 days prior to their release.
Accomplishment	ASPEN - beWellNM vendor/Account Transfer changes
Value or Impact	Facilitate State Insurance Exchange transition from Optum to GetInsured. Also modified the account transfer interface process to send independent referrals to beWellNM on a nightly basis.
Accomplishment	ASPEN - Remove age restriction for Family Planning Medicaid
Value or Impact	Allow for more expansive family planning options under Medicaid
Accomplishment	ASPEN - Medicaid 12-month postpartum period for pregnant women
Value or Impact	Implement rule changes that allows states to extend Medicaid coverage for pregnant individuals from the standard 60 days postpartum to a full year
Accomplishment	ASPEN - ISD Workload Forecasting Tool
Value or Impact	Allow the Income Support Division (ISD) to put together more accurate workload forecasts for more efficient resource planning
Accomplishment	CSES - Double Envelope Report
Value or Impact	Built new report created to address an IRS requirement. This report is used by the Business Operations Center (BOC) so that they can identify the Warrants having Federal Tax Information (FTI) and in turn place them in double envelopes.
Accomplishment	CSES - Prorating Lottery Intercepts
Value or Impact	Improved process for intercepting the lottery winnings of non-custodial parents (NCPs) and pro-rating the money across all open cases

Accomplishment	CSES - Improved handling of large ASPEN files
Value or Impact	Automated the handling of very large ASPEN files so they did not have to be done manually. Removed benefits processing interruptions.
DATA	
Accomplishment	ITD continues to lead the multi-agency Data Governance Council (DGC). The Council consists of members from all HSD divisions and sister HHS agencies such as ALTSD, CYFD, DOH, and ECECD. Data quality standards have been defined.
Value or Impact	Continues the work of the department to become data driven.
Accomplishment	CCSC collaboration with Code for America developing processes and dashboards for customer feedback.
Value or Impact	Enables the department to illicit and categorize customer feedback for consistent improvement with systems and customer service.
PROCESS IMPROVEMENT	
Accomplishment	Unified Portal and ASPEN eligibility have worked together to eliminate failed applications, identifying fail over defects and addressing.
Value or Impact	Eliminate manual processes for application generations
WORKFORCE	
Accomplishment	During FY25, the agency transitioned into the Health Care Authority. Technology for staff from HSD, DOH, GSD, and HCAF was transitioned into the new Health Care Authority including email and network capabilities.
Value or Impact	This required efforts from all areas of the organization including staff joining HCA from the NM Department of Health (DOH). During FY25, the Department was able to work towards our vision of ‘ Every New Mexican has access to affordable health care coverage through a coordinated and seamless health care system.’
CUSTOMER SERVICE	
Accomplishments	ITD stood up an internal Call Center to assist with technology requests.
Value or Impact	The timeframe for IT ticket resolution has reduced from 3 days to <1 day.
Accomplishments	HCA had the new improved yes.nm.gov go live. Created a one stop shop for HCA programs and services.
Value or Impact	Customers have one place to apply for and manage HCA benefits and services. Abandoned applications have decreased creating more access to services for New Mexicans.

TELEWORK	
Accomplishments	HSD resumed full time in-office work in FY23.
Value or Impact	Staff now have the benefit of in-person collaboration with colleagues in addition to the use of online meeting applications such as Teams.
SECURITY	
Accomplishments	<p>Completed the annual security and penetration testing. Completed seven external audits with no critical adverse findings.</p> <p>Improved the Ivanti Overall Risk Score by 165 points to 727 points.</p> <p>Met all requirements necessary to maintain interconnections to all required federal systems.</p> <p>Upgraded to the Tenable Nessus vulnerability management platform to enhance capabilities improved asset coverage.</p> <p>Hired an IT Security Manger to improved risk management.</p> <p>Deployed Tanium to provide continuous threat exposure monitoring</p>
Value or Impact	Improves the IT security posture of the department.

IV. FY27 IT STRATEGIC GOALS AND STRATEGIES

For State Fiscal Year 2027, the division will continue focus on the Department’s goals which are in sync with IT strategies.

STRATEGIC PRIORITY 1 – Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.	
Goal Statement	
Strategy 1	Promote ideas and information to flow clearly and quickly among all team members and stakeholders
Outcomes/Metrics	Improved communication as measured by employee listening sessions and surveys conducted by the department
Strategy 2	Position our workforce for success
Outcomes/Metrics	Improved rating by department employees related to how well equipped they feel to effectively do their jobs.

Strategy 3	Create and standardize clear and agile IT processes
Outcomes/Metrics	Improved customer service, operational excellence, and employee experience and performance.
Strategy 4	Empower a data driven organization.
Outcomes/Metrics	Increased level of maturity within the analytics maturity model
Strategy 5	Leverage and invest in new and emerging technology to drive agility of ITD services
Outcomes/Metrics	Measured by several scorecard measures on the department's scorecard at https://sites.google.com/view/nmhsdscorecard/home
Strategy 7	Continue to improve the cybersecurity posture of the agency.
Outcomes/Metrics	Measured by improving the risk score by 250 points and monitoring 95% of IT assets through a centralized exposure assessment platform.

V. IT FISCAL AND BUDGET MANAGEMENT

Information Technology (IT) Operating Budget (C1)

(To update this table, please double click on the embedded spreadsheet and add the required information. Before exiting the spreadsheet, please make sure to scroll up. Otherwise, the entries of this table will not be fully previewed.)

Agency Name			Agency Code		
Health Care Authority			630		
Base Request Operational Support of IT. Check one of the options below:			Flat Budget	Expansion from previous year	
Yes/No				no	
Revenue IT Base Budget (dollars in thousands)					
Appropriation Funding Type	FY24 Actual	FY25 Actual	FY26 OpBud	FY27 Request	FY28 Estimate
General Fund	19,236.7	24,875.6	28,504.6	43,865.4	45,200.0
Other State Funds	2,300.0	2,300.0	2,300.0	2,300.0	2,300.0
Federal Funds	38,362.3	47,269.7	54,663.2	49,370.5	53,264.0
Internal Svc Funds/Interagency Transfer	0.0	0.0	0.0	0.0	0.0
Total	59,899.0	74,445.3	85,467.8	95,535.9	100,764.0
Expenditure Categories (dollars in thousands)					
Category or Account Description	FY24 Actual	FY25 Actual	FY26 OpBud	FY27 Request	FY28 Estimate
Personnel Services & Employee Benefits	6,681.7	7,417.4	12,719.7	13,407.9	14,000.0
Contractual & Professional Services	40,398.1	48,500.7	54,240.0	61,660.1	62,500.0
IT Other Services	12,819.2	18,528.1	18,508.1	20,467.9	24,264.0
Other Financing Uses	0.0	0.0	0.0	0.0	0.0
Total	59,899.0	74,446.3	85,467.8	95,535.9	100,764.0
	Print Name	Phone	Email Address	Date	
Agency Cabinet Secretary/ Director (Mandatory)					
Chief Information Officer or IT Lead(Mandatory)					
Chief Finance Officer (Mandatory)					

Agency Cabinet Secretary/Director Signature

Chief Information Officer/IT Lead Signature

Chief Financial Officer Signature

VI. SPECIAL FUNDING, SUPPLEMENTAL, COMPUTER SYSTEM ENHANCEMENT (C2) FUNDING AND REAUTHORIZATION OF C2 APPROPRIATIONS

A. Special Funding and Supplemental Request(s): The Information Technology Division (ITD) has no special appropriation requests.

B. Computer System Enhancement (C2) Funding: [Include a list of C2 funding request(s) with the name(s) of the proposed projects. Insert a C2 Information Technology Data Processing – Computer Enhancement Fund (CSEF) form for each request as Appendix-A-III and reference Appendix-A-III in this section. If none, note the agency has no requests.]

The Information Technology Division currently has two C2 funding requests:

- a. Project Unite (Unified New Mexico Health and Human Services Integrations). The CSEF form for the project can be found in Appendix A-III.
- b. Child Support Enforcement System Modernization. The CSEF form for the CSESR project can be found in Appendix A-III.

C. Reauthorization of C2 Appropriations: [Include requested reauthorizations of prior C2 appropriations or note the agency is not requesting reauthorization of prior C2 appropriations.]

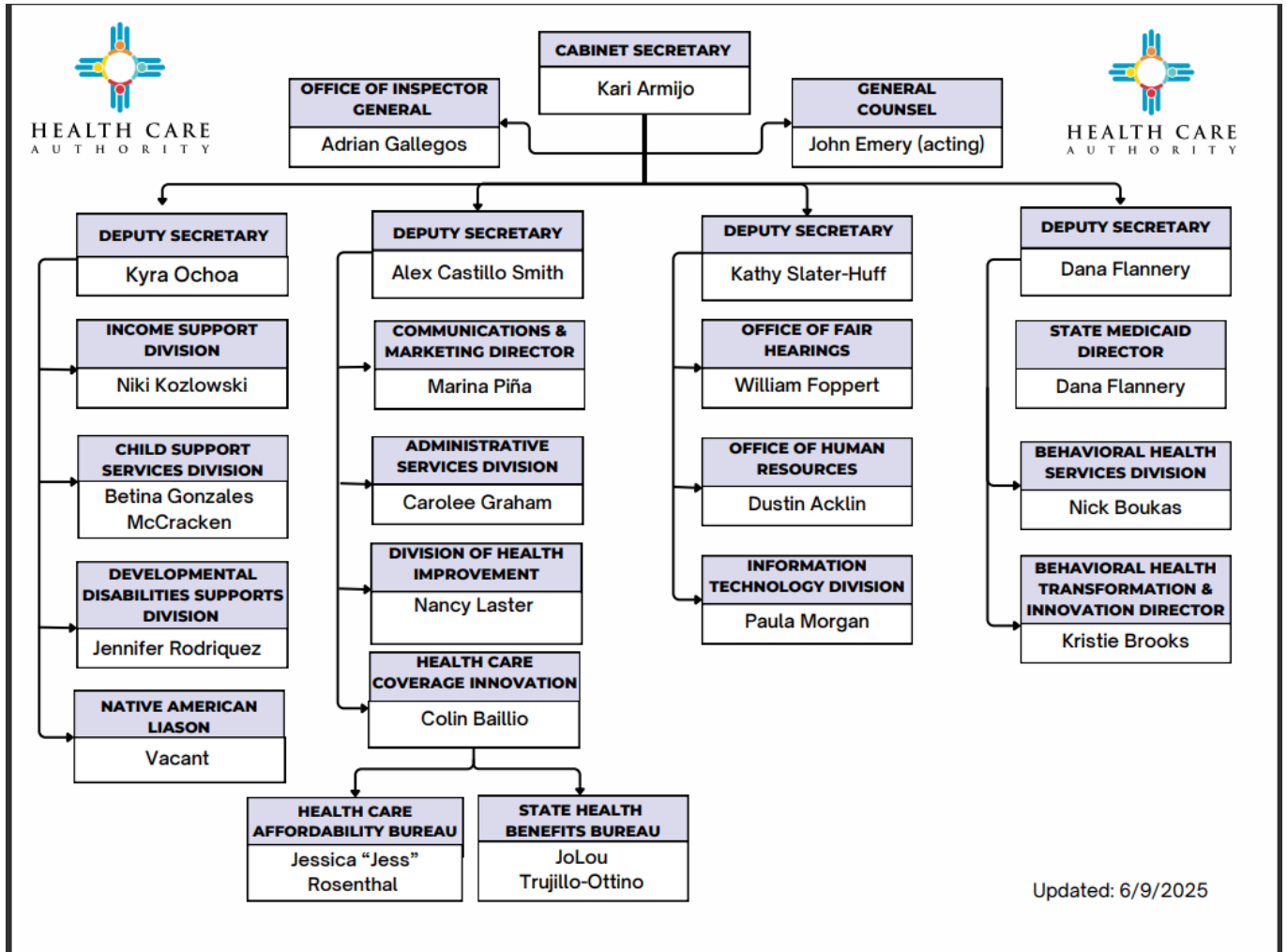
REQUEST FOR REAUTHORIZATION OF C2 APPROPRIATIONS

Information Technology Request for Reauthorization of C2 Appropriations			
Agency Name	Health Care Authority	Agency Code	630
Lead Agency Name Listed on Appropriation	Health Care Authority	Project Name	Child Support Enforcement System Modernization Project
Source of Authorization (e.g. Laws 2022, Chapter 54, Section 7 (12) or Grant/Federal Fund #)		Appropriation Amount (in thousands)	Remaining Balance (in thousands)
Laws 2022, Chapter 54, Section 7(22); General Fund		4,875.7	4,184.0
Laws 2022, Chapter 54, Section 7(22); Federal Participation Match		9,463.6	9,456.4
		0.0	0.0
		0.0	0.0

		0.0	0.0
		0.0	0.0
Total amount appropriated for project life (in thousands)	32,866.6	Will the project be completed within the next fiscal year?	No
Reason for Requesting Reauthorization	At the direction of the Office of Child Support Services, the agency shifted from a planned full system replacement to an incremental modernization approach. This change required schedule adjustments and new procurement activities, resulting in unspent funds that are still needed to complete the revised modernization plan.		

Information Technology Request for Reauthorization of C2 Appropriations			
Agency Name	Health Care Authority	Agency Code	630
Lead Agency Name Listed on Appropriation	Health Care Authority	Project Name	Electronic Licensing and Information eXchange (FELIX) Replacement Project
Source of Authorization (e.g. Laws 2022, Chapter 54, Section 7 (12) or Grant/Federal Fund #)		Appropriation Amount (in thousands)	Remaining Balance (in thousands)
Laws 2024, Section 7(16); General Fund		70.0	70.0
Laws 2024, Section 7(16); Federal Participation Match		630.0	630.0
		0.0	0.0
		0.0	0.0
		0.0	0.0
		0.0	0.0
Total amount appropriated for project life (in thousands)	\$1400.0	Will the project be completed within the next fiscal year?	Yes
Reason for Requesting Reauthorization	The contract negotiation and federal review that allows for beginning the work has been delayed.		

APPENDIX A-I: AGENCY ORGANIZATION CHART



APPENDIX A-III: C2 IT DATA PROCESSING CSEF

APPENDIX A-III: C2 IT Data Processing CSEF

C2: Information Technology

Data Processing - Computer Systems Enhancement Fund (CSEF)

Agency Name	Agency Code	Project Name		
Health Care Authority	630	Project Unite (Unified New Mexico Health and Human Services Integrations		
Multi-Agency Project	Participating Agencies		Priority	Projected/Actual Start Date
Yes	DOH, ALTSD, CYFD, ECECD		1	7/1/2026
				Projected End Date
				06/30/2028*

**a more accurate project end date can be defined after discovery of agency specific integration projects with NM HCA's shared services technologies and System Integration Platform is completed.*

Revenue Project Cost (dollars in thousands)				
Category or Account Description	FY25 & Prev Actual	FY26 Budget	FY27 Request	Total
General Fund (CSEF)	0.0	0.0	\$5,996.10	5,996.1
Other State Funds (<i>*specify funds below</i>)	0.0	0.0	0.0	0.0
Federal Funds	0.0	0.0	\$53,964.70	53,964.7
Internal Svc Funds/Interagency Transfer	0.0	0.0	0.0	0.0
Total	0.0	0.0	59,960.8	59,960.8
*If Other State Funds, Specify Funding Source/Fund Name				

Expenditure Categories (dollars in thousands)				
Category or Account Description	FY25 & Prev Actual	FY26 Budget	FY27 Request	Total
Personal Services & Employee Benefits	0.0	\$0.0	\$4,098.20	4,098.2
Professional Services	0.0	0.0	\$52,196.70	52,196.7
Travel/Lodging	0.0	0.0	\$53.90	53.9
IT Hardware	0.0	0.0	\$158.50	158.5
IT Software	0.0	0.0	\$3,453.50	3,453.5
Other	0.0	0.0	0	0.0
Total	0.0	0.0	59,960.8	59,960.8

	Print Name	Phone	Email Address	Date
Agency Cabinet Secretary/ Director (Mandatory)				
Chief information Officer or IT Lead(Mandatory)				
Chief Finance Officer / Budget Director (Mandatory)				

Agency Name	Agency Code	Project Name			
The Health Care Authority	630	Child Support Enforcement System Modernization			
Multi-Agency Project	Participating Agencies	Priority	Projected/Actual Start Date	Projected End Date	
No		2	12/18/2013	SFY 2029	

Revenue Project Cost (dollars in thousands)				
Category or Account Description	FY25 & Prev Actual	FY26 Budget	FY27 Request	Total
General Fund (CSEF)	13,418.6	0.0	16,091.0	29,509.6
Other State Funds (*specify funds below)	0.0	0.0	0.0	0.0
Federal Funds	19,448.0	0.0	31,234.0	50,682.0
Internal Svc Funds/Interagency Transfer	0.0	0.0	0.0	0.0
Total	32,866.6	0.0	47,325.0	80,191.6
*If Other State Funds, Specify Funding Source/Fund Name				

Expenditure Categories (dollars in thousands)				
	FY25 & Prev Actual	FY26 Budget	FY27 Request	Total
Personnel Services & Employee Benefits	666.0	500.0	1,500.0	2,666.0
Professional Services	14,867.0	7,950.0	45,800.0	68,617.0
Travel/Lodging	0.0	0.0	25.0	25.0
IT Hardware	957.0	0.0	0.0	957.0
IT Software	189.0	940.0	0.0	1,129.0
Other	34.0	0.0	0.0	34.0
Total	16,713.0	9,390.0	47,325.0	73,428.0

	Print Name	Phone	Email Address	Date
Agency Cabinet Secretary/ Director (Mandatory)				
Chief Information Officer or IT Lead(Mandatory)				
Chief Finance Officer / Budget Director (Mandatory)				



HEALTH CARE
AUTHORITY

**Fiscal Year 27
Information Technology Funding (C2) Request
Full Business Case**

Paula Morgan

Chief Information Officer

Release Date: September, 2025

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I. Executive Summary

1. Proposed Project Description: The Health Care Authority (HCA) is seeking funding to continue the modernization of a 27-year-old Child Support Enforcement System (CSES).
2. Business Need/Problem: New Mexico's current Child Support Enforcement System (CSES) is outdated, difficult to maintain, and increasingly unable to meet the evolving needs of families, staff, and partners.
3. Value and Benefits: Incremental modernization lowers risk while delivering compounding returns. Early improvements in system flexibility, user productivity, and service efficiency set the foundation for long-term savings across operations, training, support, and integration without the high risk and disruption of a full system replacement.
4. Project Objectives: To modernize and enhance the Child Support Enforcement System (CSES) through an incremental, phased approach that improves system performance, service delivery, and operational efficiency while aligning with HCA's enterprise architecture and meeting all state and federal compliance requirements. Success of the CSES modernization will be measured through improved customer and staff satisfaction, faster delivery of system enhancements, and increased operational efficiency. These outcomes reflect the system's ability to deliver better service, support program goals, and adapt more quickly to changing business needs.
5. Alignment with the IT Strategic Plan: Based on feedback from the federal Office of Child Support Services (OCSS), the agency pivoted to an incremental modernization strategy, which aligns more closely with federal guidance and state enterprise IT architecture. The project supports HCA's IT Strategic Plan by advancing digital service modernization, promoting system interoperability across health and human services programs, enabling data-driven decision-making, and aligning with statewide integration strategies. It contributes directly to strategic goals around operational efficiency, digital equity, and compliance.
6. Proposed Agency General Appropriation Act (GAA) Language: *For continued modernization of the Child Support Enforcement System, including platform and interface upgrades, system integration, and improved service delivery.*

II. Project Background

Project Description:

- Detailed Project Description: The Health Care Authority (HCA) is seeking funding to continue the modernization of a 27-year-old Child Support Enforcement System (CSES). The department has completed Phase I of a two-phased modernization via a CSES Re-platform effort that converted the legacy COBOL codebase to Java and moved the mainframe workload to a cloud hosting environment in compliance with Department of Information Technology (DoIT) requirements. Phase I was an infrastructure and code migration—no

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functional or user interface improvements were delivered—but it reduced annual net operating cost by approximately \$3.9 million and positioned the system for incremental functional modernization.

Phase II (this request) will incrementally modernize the re-platformed CSES, adding a modern web-based user interface, modular business services, improved data exchange capabilities, and interoperable APIs capable of integrating with HCA enterprise systems (e.g., ASPEN, the Medicaid Management Information System Replacement (MMISR), enterprise identity and notification services). The project will also rationalize business rules, improve reporting and analytics, strengthen compliance and security controls, and enhance customer-facing digital services for parents, employers, and field staff.

While CSES remains federally compliant, the system lacks flexibility, integration capacity, usability, and data accessibility expected of a modern platform. Incremental modernization allows HCA to preserve the value of the re-platform investment, reduce risk, and deliver prioritized capabilities sooner—improving service delivery, data sharing, and long-term maintainability while supporting New Mexico’s children and families.

- Type of Project: This is a system enhancement to a solution currently in production.

The request represents Phase II of a broader modernization initiative. Phase I re-platformed the legacy COBOL system to Java and migrated it to the Amazon Web Services cloud, with no changes to functionality or user experience. Phase II will enhance the re-platformed solution by introducing a modern user interface, modular business logic, system integration capabilities, and improved service delivery features—transforming the system into a fully modernized platform. In addition, this phase will incorporate workflow automation to streamline case processing, allowing cases to progress automatically until intervention is required, reducing manual touchpoints. AI-powered decision support will also be introduced, offering case workers intelligent guidance on the next best actions, improving both efficiency and consistency in service delivery.

- Technology Type: Adapted Transfer (UI) Solution

The modernization effort will continue in Phase II with an Adapted Transfer UI Solution, extending the re-platformed Child Support Enforcement System (CSES) with modernized functionality, user experience, and integration capabilities. The solution builds upon the existing Java-based architecture and will be implemented incrementally to minimize disruption and reduce risk.

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The system is already hosted on Amazon Web Services (AWS) in a FedRAMP-authorized cloud environment. The modernized solution will include:

- a. A redesigned, modern user interface
- b. Modular business services and APIs supporting federal IV-D requirements
- c. Integration with other HCA enterprise systems and shared services
- d. Cloud-native architecture for improved scalability, security, and automation

This approach allows HCA to modernize in place, preserve prior investments, and deliver prioritized capabilities over time while ensuring long-term flexibility and compliance.

- Mission Critical Application: Which strategic priority(ies) within Section IV. FY IT Strategic Goals and Strategies of the agency IT Strategic Plan does this project support?

The CSES modernization project directly supports the Health Care Authority’s FY27 IT Strategic Plan, particularly **Strategic Priority 1: Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.**

- Services Required (Non-Recurring Costs):

- a. Is the system being considered a hosted solution? Yes

Hosted Solution Description
The modernized CSES will continue to be cloud-hosted with Amazon Web Services (AWS). Hosting will include multi-environment (development, test, System Integration Testing (SIT), User Acceptance Testing (UAT), staging, production) support, managed backups, disaster recovery, and scaling aligned to caseload demand.

- b. Professional services:

Professional Services	Other Professional Services
Proposed Professional Services may include: <ul style="list-style-type: none"> • Design, Development, and Implementation Vendor • IV&V Vendor • Staff Augmentation 	

- c. Hardware Description: Will the Agency purchase hardware? No

Hardware Description

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N/A

d. Software Licenses Description: Will the Agency purchase Software Licenses? Yes

Software License Description

The primary software licensing costs associated with this project are for the Oracle Database platform, which underpins the modernized CSES. This includes licensing for the core Oracle Database as well as add-on components required for performance optimization, security, and integration, including:

- Oracle Database
- Oracle Partitioning
- Oracle Advanced Security
- Oracle Diagnostic and Tuning Packs

Licenses will be structured to ensure compliance with existing agreements and support multi-environment deployment (development, test, SIT, UAT, staging, production) within the AWS FedRAMP-authorized cloud environment. These licenses will support both modernization efforts and long-term system operations.

e. Training Description:

Training Description

Training for the modernized CSES will follow a phased, scalable approach aligned with the system's release schedule and statewide rollout strategy. The project will include four incremental releases initially targeted to two pilot offices, allowing HCA to test and refine training materials and delivery methods early in the process.

Pilot office staff will receive direct, instructor-led training to support system adoption and gather feedback. In parallel, HCA will implement a "Train-the-Trainer" model, preparing selected personnel to lead training during the broader statewide rollout.

Statewide training will combine internal trainers with vendor-supported sessions to ensure consistency, reach, and knowledge transfer across all program areas.

The training strategy will include a mix of:

- Instructor-led (in-person or virtual) training sessions
- eLearning modules and job aids
- Recorded demonstrations and workflow walkthroughs
- Quick reference guides tailored to user roles

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Details of full deployment training will be finalized during later project phases, but the approach ensures readiness, local support capacity, and sustainability after implementation.

f. Compliance and Security Description:

Compliance and Security Description

Proposed activities may include:

- Security architecture review and inherited controls mapping from cloud environment
- IRS Publication 1075 compliance (federal tax information handling)
- Federal IV-D child support program requirements verification
- Vulnerability scanning, penetration testing, and continuous monitoring enablement
- Data classification, encryption at rest/in flight, audit logging, and access recertification

g. Facilities Description:

Facilities Description

N/A

h. Personnel Services Description:

Personnel Services Description

Proposed Agency staffing costs not covered by vendor contracts:

- Dedicated Product Owner / Business Lead (state FTE allocation).
- Subject Matter Expert backfill (temporary staff or overtime to free SMEs).
- Data & policy analysts seconded from program operations.
- Technical liaison(s) to enterprise security, network, and data teams.
- Limited-term contractors for configuration and documentation surge work.

- Actual Start Date: 12/18/2013
- Estimate End Date: SFY 2029
- Project be Phased: If full funding is not available, can the project be phased? Yes, this project can be phased.

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- Project be Phased: If the project can be phased, what can be accomplished with partial funding?

The CSES modernization is structured as a multi-phase initiative that delivers measurable value at each stage. Phase I is fully funded and underway using previously appropriated dollars. This FY27 C2 request seeks funding for the remainder of the project to complete modernization and deliver a fully integrated, user-centered child support system.

The request reflects the full estimated need for the remaining work. However, HCA understands that funding may be appropriated incrementally over multiple fiscal years. To accommodate this, the project is designed to be delivered in discrete, value-generating phases that can scale with available resources.

Project Phase Overview

Phase I – User Interface Modernization and Integration Foundations (Utilizing Existing Funding)

- Modernize user interface with high-impact screens into the HCA Internal Portal
- Redesign 2–3 key modules (e.g., Case Initiation, Participant 360 View, Interfaces Hub)
- Implement real-time workflows for selected business processes
- Integrate with HHS 2020 shared services (e.g., ICAM, ECM, ASV, Notifications)
- Establish modern architectural baseline
- Deploy to two pilot offices with Train-the-Trainer support
- Lay groundwork for intelligent automation to assist case workers in routing case activities
- Prepare for AI-driven decision support to assist case worker actions and recommendations

Phase II – Core Case Management and Backend Transformation (New Funding)

- Modernize remaining CSES modules: Locate, Establishment, Enforcement, Intergovernmental, and Reporting
- Refactor or retire legacy backend logic
- Expand real-time transaction support and reduce batch processing
- Integrate with external stakeholders (e.g., courts, employers) via standard APIs
- Support statewide rollout and certification activities
- Connect CSES via API to the Electronic Content Management System (OnBase) to utilize CSSD forms

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- Implement an e-filing and workflow automation solution to streamline communications related to court orders and wage garnishment, including document generation, routing, and status tracking.

Phase III – Optimization and Advanced Functionality (New Funding)

- Implement self-service digital experiences through the Unified Portal
- Leverage analytics, AI/ML, and automation to improve outcomes and reduce manual effort
- Introduce tools for proactive case management and user guidance
- Refine training, documentation, and onboarding resources based on real-world feedback

Project History:

1. Project Funding Request Category:

- Continuation request for an existing project.

2. Is this funding request a repeat request for funding that has been previously denied? No. This is the first funding request for the remaining phases of the CSES modernization project. Phase I was previously funded and is underway. This FY27 request represents the initial request for remaining Phases.

3. Work To Be Performed with this Funding Request:

This funding request will support the remaining phases of the CSES modernization initiative, including:

- Redesign and modernization of case management modules (e.g., Financials, Enforcement, Establishment, Locate)
- Integration with shared HHS 2020 services and external partners (e.g., courts, employers)
- Migration of business rules, data services, and backend logic from legacy components
- User interface modernization for all core functionality
- Statewide rollout and training, including pilot feedback loops and phased deployment
- Implementation of enhanced analytics, automation, and customer self-service tools
- Support for system certification, compliance, and program performance tracking

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The funding will also cover necessary services for integration, testing, training, security, and change management activities aligned with HCA’s enterprise architecture and strategic priorities.

4. Is this funding a continuation request to complete an existing project? Yes

Existing Project’s Reauthorization Information:

Fiscal Year	Certification Phase (if any)	Appropriation Amount	Funding Source (Please include any reauthorizations if applicable)	Reauthorization (Yes/No)
FY15-FY16	Stage 1 – Planning	\$527,300	Laws 2014, Chapter 63, Section 7(17)	No
FY15-FY16	Stage 1 – Planning	\$1,023,700	Federal Appropriation, Approved June 1, 2024 (OCSS)	No
FY16-FY17	Stage 1 – Planning	\$3,400,000	Laws 2015, Chapter 101, Section 7(19)	No
FY20-FY21	Stage 1 – Implementation	\$1,783,600	Laws 2019, Chapter 217, Section 7(21);	No
FY20-FY21	Stage 1 – Implementation	\$3,462,200	Federal Financial Participation (OCSS)	No
FY21-FY22	Stage 1 – Implementation	\$2,832,500	Laws 2020, Chapter 83, Section 7(22); Reauthorized in Laws 2022, Chapter 54, Section 7(26); Reauthorized in Laws 2025, Chapter 160, Section 7(18)	Yes
FY21-FY22	Stage 1 – Implementation	\$5,498,400	Federal Financial Participation (OCSS)	No
FY22-FY23	Stage 2 – Initiation & Planning	\$4,875,300	Laws 2022, Chapter 54, Section 7(22); Reauthorized in Laws 2024, Chapter 69, Section 7(20); Reauthorized in Laws 2025, Chapter 160, Section 7(20)	Yes
FY22-FY23	Stage 2 – Initiation & Planning	\$9,436,700	Federal Financial Participation (OCSS)	No

5. Is this funding a continuation request to complete an existing project? Yes

Existing Project’s Appropriation History:

Appropriation History							
Include All Funding Sources, e.g. Federal, State, County, Municipal Laws or Grants.							
Fiscal Year	Funding Source Description	General Fund	Other State Funds	*Internal Serv Funds/ Inter Agency Transfer	Federal Funds	Other Funds	Total Amount
FY15-FY16	Laws 2014, Chapter 63, Section 7(17)	\$527,300					\$527,300

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FY15- FY16	Federal Appropriation Approved June 1, 2014				\$1,023,700		\$1,023,700
FY16- FY17	Laws 2015, Chapter 101, Section 7(19)	\$3,400,000					\$3,400,000
FY20- FY21	Laws 2019, Chapter 271, Section 7(21)	\$1,783,600					\$1,783,600
FY20- FY21	Federal Financial Participation (OCSS)				\$3,462,200		\$3,462,200
FY21- FY22	Laws 2020, Chapter 83, Section 7(22);	\$2,832,500					\$2,832,500
FY21- FY22	Federal Financial Participation (OCSS)				\$5,498,200		\$5,498,200
FY22- FY23	Laws 2022, Chapter 54, Section 7(22);	\$4,875,700					\$4,875,700
FY22- FY23	Federal Financial Participation (OCSS)				\$9,463,600		\$9,463,600
Total Appropriation:							\$32,866,600
Total Appropriation Amount Minus Total Certified Funds:							\$8,657,089

6. Is this funding a continuation request to complete an existing project? Yes

Existing Project's Certification History:

Certification History							
Date	Certification Phase	Amount	Funding Source Use specific citations matching preceding table.	Contingency	Contingency Due Date	Requirement	Requirement Due Date
12/18/2013	Initiation/Planning	\$0		No			
05/21/2014	Planning	\$527,300 \$1,023,700 \$1,551,000	Laws 2014, Chapter 63, Section 7(17) Federal Appropriation Approved June 1, 2014	No			
06/24/2015	Planning	\$3,400,000	Laws 2015, Chapter 101, Section 7(19)	No			
07/23/2020	Implementation	\$1,783,600 \$3,462,200 \$2,009,256 \$7,255,138	Laws 2019, Chapter 271, Section 7(21) Federal Financial Participation (OCSS) Laws 2020, Chapter 83, Section 7(22)	No			
11/22/2021	Implementation	\$2,127,807 \$4,130,450 \$6,258,257	Laws 2020, Chapter 83, Section 7 (22) Federal Financial Participation (OCSS)	Yes		Request certification of \$400,000 with the remaining	

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						amount of \$5,858,257 pending Technical Architecture Review Committee Approval	
04/24/2023	Initiation	NA	NA	No			
06/24/2024	Planning	\$1,953,369 \$3,792,029 \$5,745,498	Laws 2022, Chapter 54, Section 7(22) Federal Financial Participation (OCSS)	No			
Total Certified:		\$24,209,511					

7. Is this funding a continuation request to complete an existing project? Yes

Project Key Milestones and Contract Deliverables:

Project Key Milestones and Contract Deliverables			
Key Milestone and Contract Deliverable	Key Milestone and Contract Deliverable Due Date	Key Milestone and Contract Deliverable Completion Date	Project Phase
CSES Modernization Stage 2, Phase 1			
Project Certification Committee (PCC), Initiation Certification	04/24/2023	04/24/2023	Initiation
Project Certification Committee (PCC), Planning Certification	06/24/2024	06/24/2024	Planning
PMO Contact Executed	06/28/2024	06/28/2024	Planning
Deliverable 1: Project Management Plans	12/23/2024	12/23/2024	Planning
Deliverable 2: Streamlined Feasibility Study Completed	04/15/2024	04/15/2024	Planning
Deliverable 3: Implementation Advanced Planning Document (IAPD)	06/31/2024	06/31/2024	Planning
Deliverable 4: RFP and Contracts	10/31/2024	10/31/2024	Planning
Deliverable 5: Retainage	02/28/2025	02/28/2025	Planning
Deliverable 6: On-going Project Management Cancelled	-	-	Planning
PMO Contract Cancelled	03/31/2025	03/31/2025	Planning
IV&V Contract	9/30/2025	TBD	Planning
Deliverable 1: Initial IV&V Assessment & Report	10/31/2025	TBD	Planning

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Project Key Milestones and Contract Deliverables			
Deliverable 2: Monthly IV&V Assessment & Reporting (22 months)	11/31/2025	TBD	Planning
Deliverable 3: Closeout IV&V Assessment & Report	10/31/2027	TBD	Planning
Project Certification Committee (PCC) , Implementation Certification	9/24/2025	TBD	Implementation
Design, Development, and Implementation Contract	10/31/2025	TBD	Implementation
Deliverable 1: Project Management Plan	11/30/2025	TBD	Implementation
Deliverable 2: Hardware/Software Environment Setup	11/30/2025	TBD	Implementation
Deliverable 3: Framework & Architecture	11/30/2025	TBD	Implementation
Deliverable 4: Participant360 & Interfaces Hub This deliverable includes the end-to-end implementation of the Participant360 solution and Interfaces Hub, which includes: <ul style="list-style-type: none"> • Requirements, Discovery & Design, and Development • SIT and UAT • Production Release for Pilot Group • Hypercare Support • Work Documentation 	03/31/2026	TBD	Implementation
Deliverable 5: User Interface Upgrade for Module Set 1 This deliverable includes the end-to-end implementation of the User Interface Upgrade for Module Set 1 (Case Initiation), which includes: <ul style="list-style-type: none"> • Requirements, Discovery & Design, and Development • SIT and UAT • Production Release for Pilot Group • Hypercare Support • Work Documentation 	06/30/2026	TBD	Implementation
Deliverable 6: User Interface Upgrade for Module Set 2 This deliverable includes the end-to-end implementation of the User Interface Upgrade for Module Set 2 (Locate, Establishment, and Case Management), which includes:	10/31/2026	TBD	Implementation

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Project Key Milestones and Contract Deliverables			
<ul style="list-style-type: none"> • Requirements, Discovery & Design, and Development • SIT and UAT • Production Release for Pilot Group • Hypercare Support • Work Documentation 			
<p>Deliverable 7: User Interface Upgrade for Module Set 3</p> <p>This deliverable includes the end-to-end implementation of the User Interface Upgrade for Module Set 3 (Enforcement, Intergovernmental, Financials), which includes:</p> <ul style="list-style-type: none"> • Requirements, Discovery & Design, and Development • SIT and UAT • Production Release for Pilot Group • Hypercare Support • Work Documentation 	12/31/2026	TBD	Implementation
<p>Deliverable 8: Statewide Rollout</p> <p>This deliverable includes the end-to-end implementation of all releases to statewide field office locations, which includes:</p> <ul style="list-style-type: none"> • Statewide Rollout • Hypercare Support • Work Documentation 	01/31/2027	TBD	Implementation
<p>Deliverable 9: Automations & Improvements Capacity</p> <p>This deliverable includes a 2,500-hour capacity to prioritize work under this deliverable, which includes:</p> <ul style="list-style-type: none"> • Manual processing for IWOs • Manual Court Orders • IV-A/IV-E Referrals • Incorrect case type updates • Incorrect information inappropriately updating CSES cases 	01/31/2027	TBD	Implementation
Deliverable 10: Retainage	07/30/2026	TBD	Implementation
Post-Statewide Rollout Aftercare	03/30/2027	TBD	Implementation
Project Phase Closeout	05/30/2027	TBD	Closeout

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Project Key Milestones and Contract Deliverables			
Project Certification Committee (PCC), Phase Closeout Certification	06/30/2027	TBD	Closeout

8. Is this funding a continuation request to complete an existing project and Independent Verification and Validation waiver has been approved by the Department of Information Technology?

Yes. The CSESR project received IV&V waiver approval for the planning phase of this project on March 3, 2023. Upon successful completion of the planning phase, HCA anticipates procuring an IV&V vendor and will have them onboarded during the tail end of the planning phase and prior to the DDI kickoff.

III. Risks

The following table provides a quick risk assessment of the proposed project’s inherent risks. Provide a brief description of the risks and challenges faced by the agency in moving forward with the project, and the impact if the agency does not move forward with the project.

[Discuss how your agency plans to mitigate or reduce the impact of identified risks to the project. In the table that follows, read the categories and risk scores and enter the risk score that best describes your project.]

Risk Assessment for Proposed Solution

Criteria		Risk Score = 1	Risk Score = 2	Risk Score = 3	Score
1	Estimated project cost	Less than \$250K	\$250K - \$1M	Greater than \$1M	3
2	Estimated total calendar months before completion	6 or less	6 to 12	More than 12	3
3	Number of project team members	5 or less	6 to 10	More than 10	3
4	Number of subject matter experts required to execute the project	3 or less	4 or 5	6 or more	3
5	Project manager experience level	3 or more projects of similar scope	1 to 2 projects of similar scope	No prior projects of similar scope	3
6	Estimated total effort hours	Less than 500	500 - 1800	More than 1800	3
7	Number of sites/offices impacted by the project	1	2 to 5	More than 5	3
8	Uniqueness of project's technical requirements	Similar to others in the department	Similar to others, but complex	New and complex	2

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9	Impact of noncompliance with applicable laws and regulations	None or minimal	Moderate	Significant	3
10	Impact of 12-month project postponement on existing systems	Existing systems can compensate with minimal costs	Existing or new systems can compensate with substantial costs	Existing systems must be curtailed because of the lack of proposed project	2
11	Number of interfaces to existing systems affected	0	1 to 3	More than 3	3
12	User requirements definition	Clearly defined	Somewhat defined, but complex	Very vague and complex	2

Total Risk Score:	33
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IV. Scope and Constraints

The following are elements of the project which are in-scope and out-of-scope that are identified to manage trade-offs during execution.

Scope:

In Scope	Description
Project Phases	<p>This request supports all future phases of the Child Support Enforcement System (CSES) Modernization Initiative.</p> <p>Phase I includes design and delivery of a modern Child Support Worker Interface within the HCA Internal Portal, a human-centered redesign of high-impact modules (e.g., Case Initiation, Financials, and Customer Service), early integration with HHS 2020 shared services, and deployment to two pilot offices.</p> <p>Phase II focuses on the full modernization of all remaining system modules such as Establishment, Enforcement, Locate, Intergovernmental, and Reporting, along with statewide rollout, staff training, and backend system refactoring.</p> <p>Phase III includes optimization of user experience, implementation of advanced analytics and automation, expansion of customer self-service capabilities, and completion of federal certification and operational transition.</p>
Project Timeline	<p>The full CSES Modernization effort is expected to be completed by October 31, 2029, inclusive of implementation, integration, statewide rollout, testing, certification, and project closeout.</p>

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Modernization Activities	The scope includes the complete redesign of legacy child support system modules and development of a modern, web-based user interface. Business rules and logic will be refactored into a modular, service-oriented architecture. The project will enable real-time processing, reduce reliance on legacy batch processes, and improve user productivity.
System Architecture	The modernized CSES will be a custom-developed solution hosted in a FedRAMP-authorized Amazon Web Services (AWS) cloud environment. The solution will follow modern design principles including API-first development, cloud-native scalability, and continuous integration and deployment (CI/CD) support.
Integration Points	The system will integrate with key HCA enterprise systems including ASPEN and MMISR, as well as HHS 2020 shared services such as the Enterprise Service Bus (ESB), Identity and Access Management (IAM), Electronic Content Management (ECM), Master Data Management (MDM), Address Standardization and Verification (ASVV), and Notification Services (SMS/email).
Customer Experience Enhancements	Customers and employers will benefit from web and mobile-accessible self-service tools, including secure messaging, case status tracking, and digital correspondence. These tools will be delivered through the Unified Portal and supported by CRM functionality.
Testing and Quality Assurance	The scope includes comprehensive System Integration Testing (SIT) to validate technical interoperability and User Acceptance Testing (UAT) to ensure business readiness. Testing will be structured around release cycles and aligned with each deployment phase.
Organizational Change Management (OCM)	Organizational Change Management activities are in scope to ensure successful user adoption, stakeholder alignment, and sustained system usage across all regions. OCM will include communication planning, stakeholder engagement, readiness assessments, and development of user support resources such as quick reference guides, FAQs, and ongoing communications. A core objective is to build awareness and buy-in from child support staff, leadership, and partners by addressing both the technical and human sides of change. The OCM approach will be integrated into training, deployment, and feedback cycles throughout the modernization effort.
Training and Deployment	The project will use a phased deployment model starting with pilot offices, supported by a Train-the-Trainer approach. Full-scale training will occur during

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	statewide rollout. Training materials, reference guides, and vendor-supported training sessions will be part of the contract deliverables.
Compliance and Certification	The system will meet the Federal Office of Child Support Services (OCSS) certification requirements. It will also comply with IRS Pub 1075, and state IT security policies. Compliance will be verified throughout development and during final federal certification.

Out of Scope	Description	Reason Why
Hardware Purchases	No IT hardware will be purchased as part of the project	The modernized CES is hosted in a FedRAMP-certified cloud (AWS); no on-premises infrastructure is required.
Support for Non-Core Child Support Programs	Programs such as employment services or outreach initiatives are not included	The project is focused solely on modernizing core IV-D child support enforcement functions.

Constraints:

Constraints	
Category	Description
State Readiness & Engagement	The project requires sustained coordination between state staff and the selected Design, Development, and Implementation (DDI) vendor. While the DDI vendor will lead most of the technical development and configuration activities, the success of each phase depends on timely participation from state personnel in validating requirements, testing deliverables, and approving system functionality. State teams, particularly Subject Matter Experts (SMEs), project team(s), and IT leadership are responsible for reviewing, testing, and ultimately authorizing changes across multiple releases. This collaboration must be carefully managed to ensure alignment of expectations, quality control, and compliance with state and federal standards.
Regulatory Requirements	The project is subject to federal oversight, including the Office of Child Support Services (OCSS) approval of annual Advance Planning Document (APD) updates. Final system certification is also required for ongoing federal funding and compliance. Delays in federal review or approval could impact project timelines.
Subject Matter Expert Availability	Business SMEs, including CSSD caseworkers and managers, have full-time operational responsibilities and limited availability for project

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	work. Their involvement is essential for accurate requirements gathering, testing, and training. HCA may need to hire backfill staff to temporarily relieve these resources for project support.
MMISR Dependencies	The CSES Modernization is dependent on timely completion of MMISR modules for integration points such as identity management, notifications, and data sharing. Although MMISR is nearing completion, any delays in final implementation could impact CSES integration and downstream testing.
Phased Funding Approach	Although this FY27 C2 request reflects the full cost of completing the project, actual appropriations may be awarded incrementally. Partial funding may require re-sequencing of activities or extension of timelines to match available resources. This introduces planning complexity and potential delays between project phases.
User Adoption and Organizational Change	The project’s success depends on broad adoption across a statewide user base. Resistance to change, lack of training, or insufficient support could limit early value realization. A strong Organizational Change Management (OCM) strategy is in place but must be sustained across multiple releases and regions.
Concurrent Statewide Initiatives	Other large-scale IT and human services projects are occurring in parallel (e.g., MMISR, ASPEN enhancements, HHS 2020 service expansions), which may compete for agency leadership attention, SME availability, and shared IT services. Coordination across programs is essential to avoid resource bottlenecks.

V. Alternative Approach Analysis

JUSTIFICATION FOR PROJECT SELECTION:

Preferred Approach: Incremental Modernization (Phased Redesign & Integration)

The selected approach involves a phased, modular modernization strategy that incrementally replaces and enhances the existing Child Support Enforcement System. The effort begins with user interface redesign and key module updates, followed by broader rollout and final optimization.

Initially, the State submitted a streamlined feasibility study proposing a different path; however, based on feedback from the Office of Child Support Services (OCSS) and in alignment with their modernization guidance, the State adapted its strategy to prioritize incremental modernization. This redirection supported a lower-risk, more flexible approach that allows the project to deliver value earlier and ensure compliance with federal expectations.

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Rationale for Selection:

- Reduces operational risk by rolling out functionality in stages
- Ensures continuity of services during transformation
- Builds on enterprise investments (e.g., MMISR, HHS 2020 shared services)
- Aligns with OCSS’s direction on modular certification and funding
- Enables stronger stakeholder engagement and feedback throughout
- Supports the state’s staffing, training, and resource capacity
- Offers flexibility in aligning project scope with phased or full funding

This approach reflects both strategic alignment and practical adaptability, balancing technical modernization with program continuity and long-term sustainability.

The following table includes viable alternatives, including preliminary research and analysis, that were eliminated in favor of the proposed project:

Alternative Description (e.g. Status Quo, Enhancements, Replacement)	Reason Eliminated	Cost	Preliminary research and analysis conducted (Yes/No)
Status Quo – Maintain Re-platformed CSES	The system continues to use an outdated interface that impedes user productivity and makes it difficult to attract or retain technical and caseworker staff. It also lacks flexibility to respond quickly to policy and operational changes.	\$0.00	Yes
Monolithic System Replacement	This approach would require acquiring or building a comprehensive, standalone CSES product. While used in other states, monolithic systems tend to be costly, difficult to customize, and poorly suited for integration with HCA’s enterprise platforms (MMISR, ASPEN, etc.). It also includes functionality the State does not need, and would conflict with NM’s shared services IT direction.	\$150 M+	Yes
Modular System Replacement (Single Implementation)	A modular replacement strategy was evaluated as part of a streamlined feasibility study, but the proposed	\$100 M+	Yes

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	implementation method was not approved by OCSS. Feedback from federal partners led to a refinement of the strategy toward phased, incremental modernization. A single large-scale modular replacement would still carry significant risk and require more capacity than the State can currently support in one cycle.		
Transfer System from Another State	This approach was considered but ultimately not viable. Most transferable CSES platforms currently in production were federally certified 10 to 15 years ago and are based on outdated technology stacks. There are currently no modern, federally certified systems available for transfer that align with New Mexico’s enterprise integration and modernization goals.	Unknown	Yes
Incremental Modernization of Re-platformed System (Enhancement Approach)	Chosen. This approach aligns with OCSS guidance and enables phased design, testing, and rollout of new functionality with minimal disruption to ongoing operations. It leverages the existing re-platformed system, integrates with HHS 2020 shared services, and supports a smooth pathway to federal certification.	\$73.5 M	Yes

VI. Method(s) Used To Develop Accurate Cost Estimate

The following method(s) were used to gather information and develop the C2 funding request by providing the information below:

No.	METHOD USED	PURPOSE	COST ESTIMATE AMOUNT (\$)
1	Request for Information (RFI)	Collected detailed input from qualified vendors on system architecture, phased implementation timelines, and pricing structures. The RFI provided	Informed Total: \$78M

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No.	METHOD USED	PURPOSE	COST ESTIMATE AMOUNT (\$)
		early insight into the feasibility and cost of an incremental modernization approach.	
2	Request for Quote (RFQ)	Used to validate assumptions and obtain updated pricing models for each project phase. Helped refine estimates for licensing, services, cloud hosting, and training.	Included in Total
3	Market Surveys	Engaged industry providers to gather benchmark pricing for child support system modernization components including CRM tools, document management, and user portals.	Included in Total
4	Historical Cost Data Analysis	Reviewed prior costs associated with the re-platforming effort, MMISR integration, and other large-scale modernization efforts in New Mexico to forecast staff time, federal match ratios, and contingency needs.	Included in Total
5	State Specific Agencies	Consulted with peer agencies in New Mexico and other states to understand actual costs, implementation pitfalls, and lessons learned from similar CSES modernization initiatives. This informed project phasing and vendor oversight plans.	Included in Total

VII. Key Stakeholders

The following table identifies internal and external stakeholders, their project responsibilities and their expected impact on the project's success.

Project Impact Scale: 1 = Low Impact; 2 = Medium Impact; 3 = High Impact

Internal Stakeholders	Department or Agency	Project Responsibilities	Project Impact
Executive Sponsor	HCA	<ul style="list-style-type: none"> • Champion CSESR vision among internal stakeholders, other State of New Mexico stakeholders, and federal partners • Help address risks and potential/actual issues with federal partners and with State of New Mexico stakeholders 	3

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		<ul style="list-style-type: none"> Support assignment of needed resources (financial, human, other) to deliver projects 	
Executive Steering Committee	HCA	<ul style="list-style-type: none"> Champion CSESR vision among internal stakeholders, other State of New Mexico stakeholders, and federal partners Help address risks and potential/actual issues with federal partners and with State of New Mexico stakeholders Support assignment of needed resources (financial, human, other) to deliver projects 	3
HCA Chief Information Officer	HCA	<ul style="list-style-type: none"> Understands and champions CSESR vision Approves project plans and deliverables Participates on Executive Steering Committee Meetings Works in close collaboration with Executive Sponsor to ensure business needs are met Provides direction for project technology decisions Helps resolve issues and risks associated with CSESR 	3
HCA IT Project Director	HCA	<ul style="list-style-type: none"> Participates in and approves project plans and deliverables Provides status and progress reviews to Executive Sponsor and Executive Steering Committee Works in close collaboration with Business Lead to ensure Business needs are met Provide leadership and oversight for integrated delivery management of vendor activities Manages project resources Collaborates with project managers to resolve issues within the project Recommends resource and policy changes to the Executive Steering Committee Identifies required project team members and constructs project teams 	3
HCA IT Project Manager	HCA, ITD	<ul style="list-style-type: none"> Participates in and approves project plans and deliverables 	3

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		<ul style="list-style-type: none"> • Provides status and progress reviews to Executive Sponsor and Executive Steering Committee • Works in close collaboration with Business Lead to ensure Business needs are met • Provide leadership and oversight for integrated delivery management of vendor activities • Manages project resources • Manages and collaborates with PMO, DDI & IV&V Contractors. 	
HCA IT Staff and Contractors	HCA, ITD	<ul style="list-style-type: none"> • Provide Technical Subject Matter Expertise to the CSESR project • Provide project management and technical leadership to the CSESR project • Provide testing expertise to the CSESR project 	3
CSSD Business Sponsor	HCA, CSSD	<ul style="list-style-type: none"> • Understands and champions CSESR vision • Participates on Executive Steering Committee Meetings • Works in close collaboration with Executive Sponsor to ensure business needs are met 	3
CSSD Project Director	HCA, CSSD	<ul style="list-style-type: none"> • Participates on Executive Steering Committee Meetings • Works in close collaboration with Executive Sponsor to ensure business needs are met • Collaborates with project managers to resolve issues within the project • Recommends resource and policy changes to the Executive Steering Committee 	3
CSSD Staff and Contractors	HCA, CSSD	<ul style="list-style-type: none"> • Provide Functional Subject Matter Expertise to the CSESR project • Provide detailed requirements for CSSD to the DDI Contractor • Provide project management and functional leadership to the CSSD project • Provide testing expertise to the CSESR project 	3
ITD Release Manager	HCA, ITD	<ul style="list-style-type: none"> • Coordinate and manage release schedule • Oversee release and process governance 	3

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		<ul style="list-style-type: none"> Facilitate communication and issue resolution 	
ITD CSES Manager & IT Product Owner	HCA, ITD	<ul style="list-style-type: none"> Oversee system stability and ongoing support Act as a SME for the existing and modernized CSES systems 	3

External Stakeholders	Company or Organization	Project Responsibilities	Project Impact
System Implementation Vendor	TBD	<ul style="list-style-type: none"> Design, develop, and implement the solution based on requirements QA test the solution Provide training to end users Work with project teams, Project Director and other stakeholders to address risks, issues and actions 	3
Independent Verification and Validation	TBD	<ul style="list-style-type: none"> Provide IV&V services to the CSESR project, through CSESR certification, in accordance with OCSS and NM DoIT IV&V standards. Provide independent, objective guidance and expertise to help ensure CSESR project success and decrease implementation risks Evaluate and provide feedback on meetings, work products and deliverables with all CSESR project procurements and contracts. 	3
Customers	External	<ul style="list-style-type: none"> Representatives will be engaged on the project for requirements and testing. Ultimately, customer of the solution. 	3
Regulatory/Oversight Agencies (e.g., OCSS)	External	<ul style="list-style-type: none"> Responsible for Oversight for Compliance. 	3
Federal and State Partners	External	<ul style="list-style-type: none"> Responsible for Oversight for Compliance. 	3
Tribal Relations	External	<ul style="list-style-type: none"> Representatives will be engaged on the project for requirements and testing. Ultimately, customer of the solution. 	3
NM State Legislature	External	<ul style="list-style-type: none"> Responsible for Oversight and Funding. 	3
Legislative Finance Committee	External	<ul style="list-style-type: none"> Responsible for Oversight and Funding. 	3
Additional State Agencies	External	<ul style="list-style-type: none"> Responsible for Oversight. 	3
Press/Media/News Agencies	External	<ul style="list-style-type: none"> Responsible to be a communication vehicle to 	3

	announce key milestones met and changes impacting New Mexicans.	
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VIII. Objectives, Outcomes, Key Performance Indicators

The following are key project objectives with related deliverable outcomes and quantifiable Key Performance Indicators (KPIs).

Objectives	Outcomes/Deliverables	Benefits/KPIs (as applicable)
Modernize core CSES functionality through an incremental, phased approach	Modernized system that delivers scalable improvements while maintaining operational continuity	<ul style="list-style-type: none"> Percentage of legacy modules successfully modernized and deployed Percentage reduction in system effects post-deployment On-time delivery of project phases
Improve customer and staff experiences through redesigned UI and portal functionality	Increased satisfaction, efficiency, and engagement among internal users and external stakeholders	<ul style="list-style-type: none"> Pre- and post-rollout user satisfaction survey results Percentage of cases processed through redesigned UI Reduction in CCSC call volume and handling time
Enhance system integration and data sharing across HHS enterprise platforms	Seamless interoperability with MMISR, ASPEN, and shared services to support real-time operations	<ul style="list-style-type: none"> Number of services integrated (e.g., ICAM, ECM, ASVV) Percentage of real-time transactions vs. batch processes Reduction in cross-system data mismatches
Support system integration and federal compliance, including OCSS certification	Full adherence to OCSS, IRS Pub 1075, and state cybersecurity and accessibility standards	<ul style="list-style-type: none"> OCSS APD approvals and system certification milestones met Audit and security compliance pass rates WCAG 2.1 AA accessibility compliance rate
Ensure sustainable operations, strong project governances, and smooth transition to the modernized systems	Long-term maintainability, clear governance, and high user readiness	<ul style="list-style-type: none"> Percentage of staff trained before each release Number of open support tickets 90 days post-deployment

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		<ul style="list-style-type: none"> Stakeholder satisfaction with project transparency and support
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IX. Benefits

The following is a list of tangible and intangible benefits anticipated from the project. Please describe the gain in efficiency and/or effectiveness for the agency and/or constituents served as a result of this project.

Tangible Benefits	Amount
Reduced operating cost due to cloud-hosting and modern system architecture	\$3.9 million (already realized from re-platforming). Further reductions expected in ongoing M&O costs
Decreased call volume to the Consolidated Customer Support Center through self-service tools and modern communication features	Estimated 10-15% call volume reduction
Reduced staff onboarding time and fast proficiency due to modern UI and improved business processes	45-50% reduction in onboarding/training time per new hire to become proficient
Improved performance for workers (reduced clicks, clearer navigation, and automated decision support)	Not yet monetized; expected increase in productivity and reduced task time
Reduced time and effort to implement policy and system changes	30-50% reduction in time to implement legal or operational changes
Lower technical maintenance and integration costs via modern APIs and shared enterprise services	Estimated long-term savings through reuse of shared platforms (ESB, ICAM, MDM, etc.)

Intangible Benefits	Metrics
Improved user experience for parents, employers, and staff	A modern, web-based system increases satisfaction and ease of use for all stakeholders
Greater transparency and responsiveness	Faster, more accurate communication and data sharing improves trust and case resolution speed
Enhanced cross-agency collaboration	Better integration with MMISR, ASPEN, and other HHS systems supports holistic service delivery

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Increased adaptability to policy and program changes	Modular structure and configuration improve system responsiveness and agility
Higher morale and staff retention	Reduced frustration with system usability contributes to workforce stability
Stronger analytics and decision-making capabilities	Improved data quality and availability supports performance management and compliance

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X. Total Cost of Ownership

The following table lists the total potential cost to develop or acquire, implement, operate and maintain the proposed project for its entire life cycle.

IX. Total Cost of Ownership

Child Support Enforcement System Modernization

[The Total Cost of Ownership (TCO) is designed to capture the system lifecycle and should include costs to acquire or develop, implement and support and maintain operations. Work with your budget team to complete this form.]

Category		Previous Actuals ¹	FY26	FY27	FY28	FY29	FY30	Total
Non-Recurring Cost - Development &		(in thousands)						
200	Personnel Services and Employee Benefits	\$666.0	\$500.0	\$1,500.0	\$0.0			\$2,666.0
300	Contractual Services							\$0.0
	IT Professional Services: Project Management	\$4,144.0	\$0.0	\$0.0	\$0.0			\$4,144.0
	IT Professional Services: IV&V Vendor	\$231.0	\$143.0	\$572.0	\$0.0			\$946.0
	IT Professional Services: DDI Vendor	\$9,494.0	\$7,000.0	\$42,000.0	\$0.0			\$58,494.0
	Training	\$34.0	\$0.0	\$0.0	\$0.0			\$34.0
	Other Professional Services	\$998.0	\$807.0	\$3,228.0	\$0.0			\$5,033.0
400	Other	\$0.0	\$0.0	\$0.0	\$0.0			\$0.0
	Travel/Lodging	\$0.0	\$0.0	\$25.0	\$0.0			\$25.0
	Hardware	\$957.0	\$0.0	\$0.0	\$0.0			\$957.0
	Software Licenses	\$189.0	\$940.0	\$0.0	\$0.0			\$1,129.0
	Facilities	\$0.0	\$0.0	\$0.0	\$0.0			\$0.0
Subtotal Non-Recurring Cost		\$16,713.0	\$9,390.0	\$47,325.0	\$0.0			\$73,428.0
Recurring Maintenance and Operations (M&O) Cost		(in thousands)						
200	Personnel Services and Employee Benefits	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0
300	Contractual Services							
	IT Professional Services	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$3,400.0	\$3,400.0
	Training	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0
400	Other	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0
	Hardware	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0
	Software Licenses	\$0.0	\$0.0	\$940.0	\$940.0	\$940.0	\$940.0	\$3,760.0
	Facilities	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0
	Compliance and Security	\$0.0	\$0.0	\$0.0	\$0.0	\$75.0	\$0.0	\$75.0
Subtotal Recurring M&O Cost		\$0.0	\$0.0	\$940.0	\$940.0	\$1,015.0	\$4,340.0	\$7,235.0
<i>¹ Applicable for on-going or existing project.</i>								
Total Cost		\$16,713.0	\$9,390.0	\$48,265.0	\$940.0	\$1,015.0	\$4,340.0	\$80,663.0

XI. C2 Form – Computer System Enhancement Fund (CSEF)

**C2: Information Technology
Data Processing - Computer Systems Enhancement Fund (CSEF)**

Agency Name	Agency Code	Project Name		
The Health Care Authority	630	Child Support Enforcement System Modernization		
Multi-Agency Project	Participating Agencies	Priority	Projected/Actual Start Date	Projected End Date
No		2	12/18/2013	SFY 2029

Revenue Project Cost (dollars in thousands)				
Category or Account Description	FY25 & Prev Actual	FY26 Budget	FY27 Request	Total
General Fund (CSEF)	13,418.6	0.0	16,091.0	29,509.6
Other State Funds (*specify funds below)	0.0	0.0	0.0	0.0
Federal Funds	19,448.0	0.0	31,234.0	50,682.0
Internal Svc Funds/Interagency Transfer	0.0	0.0	0.0	0.0
Total	32,866.6	0.0	47,325.0	80,191.6
*If Other State Funds, Specify Funding Source/Fund Name				

Expenditure Categories (dollars in thousands)				
Category or Account Description	FY25 & Prev Actual	FY26 Budget	FY27 Request	Total
Personnel Services & Employee Benefits	666.0	500.0	1,500.0	2,666.0
Professional Services	14,867.0	7,950.0	45,800.0	68,617.0
Travel/Lodging	0.0	0.0	25.0	25.0
IT Hardware	957.0	0.0	0.0	957.0
IT Software	189.0	940.0	0.0	1,129.0
Other	34.0	0.0	0.0	34.0
Total	16,713.0	9,390.0	47,325.0	73,428.0

	Print Name	Phone	Email Address	Date
Agency Cabinet Secretary/ Director (Mandatory)				
Chief Information Officer or IT Lead (Mandatory)				

Agency Cabinet Secretary/Director Signature _____

Chief Information Officer/IT Lead Signature _____

Chief Finance Officer/Budget Director Signature _____



**Fiscal Year 27
Information Technology Funding (C2) Request
Project UNITE
(Unified NM HHS Integrations for New Mexico)
Full Business Case**

Paula Morgan

Chief Information Officer

Draft Date: July 29, 2025

Release Date: September 2, 2025

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I. Executive Summary

NM HCA – on behalf of our partner, health and human services agencies -- is proposing a new, cross-agency collaboration project called Project Unite (Unified NM HHS Integration for New Mexico) to achieve the original vision of what has long been referred to as the “HHS 2020 initiative.”

The HHS 2020 initiative was a vision for program integration that expanded of the scope to NM HCA’s original MMIS replacement project. The vision of this initiative has always been to *create a highly responsive and effective health and human services system to improve the health and well-being of all New Mexicans*. Core goals of the initiative remain the same:

- Share information across agencies
- Transform business processes
- Create Customer-centered systems
- Generate Outcomes-focused results
- Enable data-driven decision-making

Through establishing the technology platform, NM HCA is intending to deliver the remaining functionality for an MMIS replacement system that meets all CMS standards for a Medicaid Enterprise System (MES) within SFY26 and then close out the MMIS replacement project.

The next logical evolution for the technologies delivered and in operations today will be to bring the wider agency integrated, customer-focused vision to a conclusion and begin integrations and data sharing among all New Mexico health and human service agency programs.

The thirteen (13) public assistance programs operating across all of New Mexico’s health and human agencies are separate, siloed and limited in their capabilities and in many cases, in the very early stages of systems modernization. The agency integration projects will exchange program data, take advantage of the technologies implemented at NM HCA and extend them to their own agencies and programs resulting in more streamlined support, better interagency data sharing , customized referrals, and better program access for New Mexicans. Having the infrastructure in place makes 21st century technology solutions available and extensible to all health and human services agencies in the State without having to the build the underlying infrastructure “from scratch”.

Project Unite aligns to the NM HCA’s agency goal of using 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 by leveraging the System Integration Platform and shared services technologies, making them available to the other health and human services agencies. Secondly, Project Unite realizes NM HCA’s agency goal implementing innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.

NM HCA is requesting \$5,996,080 in state general funds, with an associated federal funding match request of \$53,964,727 for a total of \$59,960,808 -- in state general funds, on behalf of the combined New Mexico health and human services agencies – Aging & Long-Term Services

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Department (ALTSD), Children, Youth & Families Department (CYFD), Department of Health (DOH), Early Childhood, Education & Care Department (ECECD) and the HCA Divisions – to support individualized integration projects using the core technologies established and in operations under the MMIS replacement project.

II. Project Background

Project Description:

1. Detailed Project Description: NM HCA – on behalf of our partner, health and human services agencies -- is proposing a new, cross-agency collaboration project called Project Unite (Unified New Mexico Health and Human Services Integrations) to achieve the original vision of what has long been referred to as the “HHS 2020 initiative.”

The HHS 2020 initiative was a vision for program integration that expanded of the scope to NM HCA’s original MMIS replacement project. The vision of this initiative has always been *to create a highly responsive and effective health and human services system to improve the health and well-being of all New Mexicans*. Core goals of the initiative remain the same:

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Project Unite aligns to the NM HCA's agency goal of using 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 by leveraging the System Integration Platform and shared services technologies, making them available to the other health and human services agencies. Secondly, Project Unite realizes NM HCA's agency goal implementing innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.

NM HCA is requesting \$5,996,080 in state general funds, with an associated federal funding match request of \$53,964,727 for a total of \$59,960,808 -- on behalf of the combined New Mexico health and human services agencies – Aging & Long-Term Services Department (ALTSD), Children, Youth & Families Department (CYFD), Department of Health (DOH), Early Childhood, Education & Care Department (ECECD) and the HCA Divisions – to support individualized integration projects using the core technologies established and in operations under the MMIS replacement project.

2. Type of Project: NM HCA is requesting funds to plan, design, develop, and configure the integrations of ALTSD, CYFD, DOH, ECECD agencies' program data through the System Integration Platform, to modernize the data sharing technology and support 21st century data exchange. In addition, each agency has technology specific initiatives that they may undertake as a result of the modernized solutions available to them. All of these agency integrations would be new solutions to each agency taking advantage of the NM HCA MMISR technology platform infrastructure.
3. Technology Type: Technology types available for agency integration include Software as a Service (SaaS) solutions, web/mobile applications, and electronic content management. The following shared services technologies are available to any agency via the exposure of application programming interfaces (APIs):
 - Identity, Credential, and Access Management (ICAM): Serves as the SIP Identity Provider that integrates with DoIT ME-ID for Internal/Employee User access.
 - Master Data Management (MDM): Integrates multiple sources of data to create unique individual identities and maintains crosswalk among those IDs.
 - Enterprise Content Management (ECM): Captures, activates, analyzes, and automates business content.
 - Customer Communications Management (CCM): Stores documents, including common policy documents across agencies in a centralized document repository.
 - Inbound Mailroom Scanning and Digitization: Receives and scans incoming paper/fax mail. Also, it can provide digitizing capability.
 - Outbound Mailroom: handles all outgoing paper mail from HCA, Modules, and Integration Partners.

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- Address Standardization and Validation (ASV): Updates addresses to adhere to the United States Postal Service (USPS) standards.
 - Data Services / Analytics: a reporting platform that provides access to a single, authoritative resource about participants in Medicaid and other public assistance programs, enabling a transformation to a data-driven organization
4. Mission Critical Application: Which strategic priority(ies) within Section IV. FY IT Strategic Goals and Strategies of the agency IT Strategic Plan does this project support? Project Unite (Unified New Mexico Health and Human Services Integrations) fulfills the NM HCA’s strategic goals to:
- 1) 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.
 - 2) Achieve health equity by addressing poverty, discrimination, and lack of resources, building a New Mexico where everyone thrives
 - 3) Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.
5. Services Required (Non-Recurring Costs):

a. Is the system being considered a hosted solution? **YES**

Hosted Solution Description
Each agency may have specific program applications that are hosted and this project will integrate the program data sharing through the System Integration Platform, which is hosted in AWS cloud

b. Professional services:

Professional Services	Other Professional Services
System Integration	Enterprise Project Management Office (EPMO)
Specific systems development vendor (as identified and procured by agency specific projects)	Staff augmentation vendors and/or contracted technical resources

c. Hardware Description: Will the Agency purchase hardware? [If yes, describe the hardware purchase]

Hardware Description
No hardware purchases are identified at this time. The shared services technologies are primarily cloud-hosted or have cloud hosting capabilities. If specific hardware purchases are

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needed as a part of this project, each agency will define appropriate hardware as applicable for their programs and business needs.

- d. Software Licenses Description: Will the Agency purchase Software Licenses? [If yes, describe the software license purchase]

Software License Description
Kris-Connected Integration Platform (cloud-hosted SI Platform);
Snowflake (cloud-hosted data platform for business intelligence and analysis)
Salesforce licenses
Other specific software licenses will be identified through the integration project work

- e. Training Description: [Describe the training, if applicable]

Training Description
No specific training is known at this time. As the agency-specific program integrations are defined, and new technologies introduced to business users, training will be identified at that time.

- f. Compliance and Security Description: [Describe the Compliance and Security, if applicable]

Compliance and Security Description
All programs that contain New Mexico constituent data will be required to adhere to, and comply with, all provisions of safeguarding data in compliance with Health Insurance Portability and Accountability Act (HIPAA) privacy and security rules for agencies and business associates. Further, all programs that contain NM constituent data will have to comply with federal tax information (FTI) which may contain sensitive personally identifiable information (PII), requiring strict handling according to the confidentiality protections of the Internal Revenue Code (IRC). This also applies to background checks for those handling such information, such as employees, volunteers, agents, and contractors within relevant agencies.
Any other state or federal regulations unique to an agency's program will also be included as compliance provisions may vary from program to program.

- g. Facilities Description : [Describe the Facilities, if applicable]

Facilities Description
Not known at this time. If facilities are needed as a part of this project, each agency will define appropriate facilities as applicable for their programs and business needs.

- h. Personnel Services Description: [Describe the Personnel Services, if applicable]

Personnel Services Description
State agency staff and contracted staff augmentation or vendor contracted staff

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6. Estimated Start Date: 07/01/2026
7. Estimate End Date: 06/30/2028* **a more accurate project end date can be defined after discovery of agency specific integration projects with NM HCA's shared services technologies and System Integration Platform is completed.*
8. Project be Phased: If full funding is not available, can the project be phased? Yes, the various health and human services projects are naturally phased due to each agency's readiness for integration and use of the NM HCA's shared services technologies. To date, CYFD is actively in discussions with NM HCA and the System Integrator and has identified specific files and data types needed to support the NM Impact program needs. ALTSD is in the beginning stages of procurement and once they are farther along with that phase, they will be ready to consult with NM HCA on the system integration needs. ECECD has identified that they will be ready to begin discussions with NM HCA and the System Integrator in Q4 of SFY26, so the work is naturally being sequenced already.
9. Project be Phased: If the project can be phased, what can be accomplished with partial funding? NM HCA and each of the HHS agencies can define their plans for integration and timelines and begin initial integrations of program data and shared services technologies. As the work progresses, more refined and developed integration roadmaps will be realized and can be shared at that time. Please see Appendix C: Project Unite (Unified NM HHS Integration for New Mexico) 2026-2028 for an initial roadmap view which we expect to refine over this first year of project.

Project History:

1. Project Funding Request Category: Project Unite will integrate program data from each of the health and human services agencies, which is why this is a new project request for system enhancements to integrate program data and use shared services technologies that are in production today at NM HCA, but not yet extended or available to each specific agency. This request is a new project request for a system enhancement to a system that is in production
2. Is this funding request a repeat request for funding that has been previously denied? **No.**
3. Work To Be Performed with this Funding Request: Initial CYFD integration with the SI Platform as CYFD is actively in discussions with NM HCA and the System Integrator and has identified specific files and data types needed to support the NM Impact program needs. ALTSD is in the beginning stages of procurement and once they are farther along with that phase, they will be ready to consult with NM HCA on the system integration needs. ECECD has identified that they will be ready to begin discussions with NM HCA and the System

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Integrator in Q4 of SFY26, so the work is naturally being sequenced already. Remaining discovery sessions for DOH.

4. Is this funding a continuation request to complete an existing project? **No**

Project Key Milestones and Contract Deliverables: To Be Defined with each HHS Agency

Project Key Milestones and Contract Deliverables			
Key Milestone and Contract Deliverable	Key Milestone and Contract Deliverable Due Date	Key Milestone and Contract Deliverable Completion Date	Project Phase
To Be Defined with each HHS Agency			

5. Is this funding a continuation request to complete an existing project and Independent Verification and Validation waiver has been approved by the Department of Information Technology? [Yes or No] **No**

III. Risks

NM HCA has risk management plans and practices that have been refined over the years through the use of several systems development projects. All plans and practices retain a focus on achieving *outcomes* and ensuring strategies are in place to mitigate risks and this risk mitigation focus is always “front of mind” for personnel at NM HCA. Risk and issue dashboards have been developed through use of PowerBI and we expect to leverage these for the Project Unite project as well. Risk or issue lists are accessible through the NM HCA SharePoint. The risks and issues are reported upon at least monthly Project Unite Executive Steering Committee (ESC) to ensure awareness and escalation of appropriate risks or issues as needed.

The following table provides a quick risk assessment of the proposed project’s inherent risks.

Risk Assessment for Proposed Solution

Criteria		Risk Score = 1	Risk Score = 2	Risk Score = 3	Score
1	Estimated project cost	Less than \$250K	\$250K - \$1M	Greater than \$1M	3
2	Estimated total calendar months before completion	6 or less	6 to 12	More than 12	3
3	Number of project team members	5 or less	6 to 10	More than 10	3

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4	Number of subject matter experts required to execute the project	3 or less	4 or 5	6 or more	3
5	Project managers experience level	3 or more projects of similar scope	1 to 2 projects of similar scope	No prior projects of similar scope	3
6	Estimated total effort hours	Less than 500	500 - 1800	More than 1800	3
7	Number of sites/offices impacted by the project	1	2 to 5	More than 5	3
8	Uniqueness of project's technical requirements	Similar to others in the department	Similar to others, but complex	New and complex	3
9	Impact of noncompliance with applicable laws and regulations	None or minimal	Moderate	Significant	3
10	Impact of 12-month project postponement on existing systems	Existing systems can compensate with minimal costs	Existing or new systems can compensate with substantial costs	Existing systems must be curtailed because of the lack of proposed project	2
11	Number of interfaces to existing systems affected	0	1 to 3	More than 3	2
12	User requirements definition	Clearly defined	Somewhat defined, but complex	Very vague and complex	2

Total Risk Score:

IV. Scope and Constraints

The following are elements of the project which are in-scope and out-of-scope that are identified to manage trade-offs during execution.

Scope:

In Scope	Description
ALTSD integration projects	<ol style="list-style-type: none"> 1) Modules and technologies required to support ALTSD programs identified 2) ALTSD aligning resources to support beginning efforts for agency integration 3) Replacement of agency legacy case management system, Wellsky and integration with System Integration Platform 4) Use of full System Integration Platform and shared services technologies available for additional Department programs is planned for discussions in Q3-Q4 in SFY26 for actual design, development and configuration work completion in SFY27

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<p>CYFD integration projects</p>	<ol style="list-style-type: none"> 1) Integration of data exchanges, and file interfaces identified and initial discussions with NM HCA and SI completed in SFY25 2) Full discovery with the System Integrator for integration of data and file interfaces for the CCWIS system began in June 2025 and continued program data sharing to support enhancements planned for future with NM IMPACT and other agency systems
<p>DOH integration projects</p>	<ol style="list-style-type: none"> 1) Integration of the Children’s Medical Services (CMS) program data with the SI Platform and the Financial Services module, including updating existing file interfaces to application programming interfaces (APIs) for data exchange – <i>Testing of the API file exchanges is planned in summer/fall and deployment to production will be coordinated with HCA</i> 2) Use of full System Integration Platform and shared services technologies available for additional Department programs is planned for discussions in Q3-Q4 in SFY26 for actual design, development and configuration work completion in SFY27
<p>ECECD integration projects</p>	<ol style="list-style-type: none"> 1) Use of Consolidated Customer Service Center (CCSC) for Agency customer communications – <i>in Maintenance & Operations Phase</i> 2) Adoption of Hyland OnBase Electronic Content Management (ECM) software for program and Department operations – <i>Maintenance & Operation phase for Child Care Assistance program and design/development & implementation (DDI) phase for the HR/Background Check unit, and scanning of regulatory oversight documents for Department</i> 3) Integration of FITKIDS program data with the SI Platform and the Financial Services module for data exchange – <i>FITKIDS claims file from vendor SIVIC has passed testing with the Financial Services module team, awaiting final testing</i> 4) <i>Use of full System Integration Platform and shared services technologies available for additional Department programs is planned for Q4 in SFY26</i>
<p>HCA</p>	<ol style="list-style-type: none"> 1) Use of full System Integration Platform and shared services technologies available for additional Department programs (i.e., BHSD, DHI., DDSD, etc.) is planned for discussions

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	within HCA Divisions in Q3-Q4 in SFY26 for actual design, development and configuration work completion to occur in SFY27
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Out of Scope	Description	Reason Why
Other New Mexico state agencies not listed above	At this time, NM HCA is making this request on behalf of the other Health & Human Services agencies within NM and has not planned to integrate in SFY27 with any other state agency besides the 4 others listed above.	After integrations with the health and human services agencies are completed, NM HCA can evaluate extending shared services technologies to other state agencies

Constraints:

Constraints	
Category	Description
Federal funding	A possible constraint is always federal funding approvals. This constraint is addressed by frequent (i.e., at least monthly) communications with the representatives from the federal partner agencies and annual and as needed funding updates. As of July 2025, the four (4) Federal funding agencies are currently reviewing the federal funding request for integrations to be available within FFY2026 and one quarter of SFY27.
Other agencies' readiness for integration	Each agency has to be ready to integrate their program data and align their department resources (either state personnel or contractor resources) to work with the System Integration vendor through the discovery, design, configuration and implementation phases

V. Alternative Approach Analysis

JUSTIFICATION FOR PROJECT SELECTION: [Explain why you chose this alternative approach over other available options for this project. Include research and analysis conducted. Consider factors such as cost, urgency, payback period, and return on investment (ROI).]

The following table includes viable alternatives, including preliminary research and analysis, that were eliminated in favor of the proposed project:

Alternative Description (e.g. Status Quo, Enhancements, Replacement)	Reason Eliminated	Cost	Preliminary research and analysis conducted (Yes/No)

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<p>Each New Mexico health and human services state agency has existing legacy systems that will require modernization and upgrade to enhance and maintain in the future. NM HCA has, or will have, a suite of shared service technologies in production that are extensible to other agencies for use with their programs. The agency-specific modernization efforts are intended to leverage the technology infrastructure built by NM HCA under the MMISR project.</p>	<p>Each agency could invest in developing a technical infrastructure to support their own programs; however, New Mexico loses the opportunity to take advantage of the infrastructure already built by NM HCA through the federal funding received already. Further, each agency developing their own infrastructure would undermine the shared goals and limit the partnerships already established.</p>	<p>\$0.00</p>	
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VI. Method(s) Used To Develop Accurate Cost Estimate

The following method(s) were used to gather information and develop the C2 funding request by providing the information below:

No.	METHOD USED	PURPOSE	COST ESTIMATE AMOUNT (\$)
1	Request for Information (RFI)	Gather preliminary information from potential vendors on capabilities, pricing models, and feasibility	
2	Request for Proposal (RFP)	To solicit comprehensive proposals that include technical solutions, cost breakdowns, and delivery schedules	
3	Market Surveys	Engage vendors through surveys to understand pricing capabilities	
4	Historical Cost Data Analysis	Review past expenditures on similar projects to predict future costs	
5	Interstate Collaboration and Networking	Contact other organizations such as National Association of State Procurement Officials (NASPO), the National Governors Association (NGA), and other industry specific organizations to gather cost data and procurement information. Attend conferences and webinars where states share project outcomes and cost data.	
6	State Specific Agencies	Contact counterparts in other states (e.g. Department of Health, Department of Transportation) to	

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No.	METHOD USED	PURPOSE	COST ESTIMATE AMOUNT (\$)
		obtain data on similar project initiatives	
7	Other Method: [Entered by Agency the specific method used to capture information if those above do not apply]	Purpose Description: Each agency-specific modernization project may have its own method for use (RFI, RFP, RFQ, or leverage vendors already listed on the NM Statewide pricing agreement which will be defined by what systems specifically each agency will be integrating or using the shared service technologies. [Purpose description to be entered by the Agency]	

VII. Key Stakeholders

The following table identifies internal and external stakeholders, their project responsibilities and their expected impact on the project’s success.

Project Impact Scale:
1 = Low Impact; 2 = Medium Impact; 3 = High Impact

Internal Stakeholders	Department or Agency	Project Responsibilities	Project Impact
Executive Sponsor	<ul style="list-style-type: none"> ▪ ALTSD ▪ CYFD ▪ DOH ▪ Department of Information Technology (DoIT) ▪ ECECD ▪ Governor’s Office ▪ HCA 	<ul style="list-style-type: none"> ▪ Champion the original HHS 2020 vision among internal stakeholders, other State of New Mexico stakeholders, and federal partners and extend it to the new Project Unite ▪ Help address risks and potential/actual issues with federal partners and with State of New Mexico stakeholders ▪ Work with the Executive Management Team as needed to review program status and direction and to resolve any risks, issues or actions escalated to this level ▪ Support assignment of needed resources (financial, human, other) to deliver projects 	3
Executive Steering Committee	<ul style="list-style-type: none"> ▪ ALTSD ▪ CYFD ▪ DOH ▪ DoIT 	<ul style="list-style-type: none"> ▪ Champion the original HHS 2020 vision among internal stakeholders, other State of New Mexico 	3

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	<ul style="list-style-type: none"> ▪ ECECD ▪ Governor’s Office ▪ HCA 	<p>stakeholders, and federal partners and extend it to the new Project Unite</p> <ul style="list-style-type: none"> ▪ Help address risks and potential/actual issues with federal partners and with State of New Mexico stakeholders ▪ Work with the Executive Management Team as needed to review program status and direction and to resolve any risks, issues or actions escalated to this level ▪ Support assignment of needed resources (financial, human, other) to deliver projects 	
HCA Chief Information Officer	<ul style="list-style-type: none"> ▪ HCA 	<ul style="list-style-type: none"> ▪ Understands and champions original HHS 2020 vision and extend it to the new Project Unite ▪ Provides direct support to Project Unite initiatives ▪ Approves project plans and deliverables ▪ Participates in Executive Steering Committee Meetings ▪ Works in close collaboration with Executive Sponsor to ensure business needs are met ▪ Provides direction for project technology decisions ▪ Helps resolve issues and risks associated with Project Unite 	3
Other HHS 2020 Agency Chief Information Officers	<p>ALTSD CYFD DOH ECECD</p>	<ul style="list-style-type: none"> ▪ Understands and champions original HHS 2020 vision and extend it to the new Project Unite ▪ Provides direct support to Project Unite and approves project plans and deliverables ▪ Participates in Executive Steering Committee Meetings ▪ Works in close collaboration with Executive Sponsor to ensure business needs are met ▪ Provides direction for project technology decisions ▪ Helps resolve issues and risks associated with Project Unite 	
HCA IT staff and contractors	HCA ITD	<ul style="list-style-type: none"> ▪ Provide Technical Subject Matter Expertise for the HHS Integration projects 	3

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		<ul style="list-style-type: none"> ▪ Provide project management and technical leadership to the use of shared services technologies ▪ Provide testing expertise for the HHS Integration projects 	
EPMO	HCA	<ul style="list-style-type: none"> ▪ Provide oversight and coordination for the HHS Integration projects, working collaboratively with the HHS agency CIOs ▪ Evaluate and escalate resource needs as identified ▪ Provide leadership and oversight for Project Management standards and practices ▪ Track and manage Project Unite Health and Human Service integration project schedules, as supplied by the agencies and project teams ▪ Work with project teams and other stakeholders to address risks, issues, and actions ▪ Support the budgeting, federal funding request, and interagency funding logistics necessary for a multi-agency collaborative project 	3
System Integrator contracted staff	HCA	<ul style="list-style-type: none"> ▪ Collaborate with the individual agency project and vendor teams for specific requirements necessary for their divisions and departments' integration projects ▪ Initiate the design, development, configuration and integration work necessary to bring agency-specific data into the SI Platform and make it available for program data sharing ▪ Support configuration and testing of interagency program data exchange ▪ Consult with agencies on achieving desired technical architecture standards 	3
Business experts from all HCA divisions and other Health and Human Services agencies	<ul style="list-style-type: none"> ▪ Administrative Services Division (ASD) ▪ HCA Child Support Enforcement Division (CSED) 	<ul style="list-style-type: none"> ▪ Collaborate with the individual project teams for specific requirements necessary for their divisions and departments ▪ Participate in testing phases when necessary 	3

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	<ul style="list-style-type: none"> ▪ HCA Income Support Division (ISD) ▪ ALTSD ▪ CYFD ▪ DOH ▪ ECECD 	<ul style="list-style-type: none"> ▪ Project oversight on Enterprise-Wide impacts 	
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External Stakeholders	Company or Organization	Project Responsibilities	Project Impact
New Mexico constituents and Agency program users	NM Citizens	<ul style="list-style-type: none"> ▪ Participate in pilot testing of integration projects ▪ Provider feedback on user needs and the usability of delivered technology solutions 	3
Federal Funding agencies	Any of the federal funding agencies under Department of Health and Human Services	<ul style="list-style-type: none"> ▪ Provide directions on federal funding for identified projects ▪ Review funding requests for agency integration projects ▪ Collaborate with State agency representatives 	3
NM Legislative Finance Committee	NM LFC	<ul style="list-style-type: none"> ▪ Collaborate with health and human service agency key leadership on integrated project ▪ Support legislative funding requests 	3
NM Agency advisory boards or constituent groups	Various	<ul style="list-style-type: none"> ▪ Collaborate with health and human service agency key leadership on integrated project ▪ Support legislative funding requests ▪ Provide feedback on program design and data sharing for program effectiveness 	3

VIII. Objectives, Outcomes, Key Performance Indicators

The following are key project objectives with related deliverable outcomes and quantifiable Key Performance Indicators (KPIs). Each of the shared services technologies and the use of the System Integrator Platform has benefits for program and business operations. Depending on which shared services technologies each health and human service agency elects to use for their agency-specific integrations, the corresponding benefits will be available or are expected to be realized. We have listed each HCA strategic goal as the Objective, then Project Unite shared service technologies goals, and the technology-specific benefits that are available in the below table.

Objectives	Outcomes/Deliverables	Benefits/KPIs (as applicable)
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<p>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.</p>	<p>improve customer outcomes and reduce costs for our partners using data and tools within the HHS 2020 ecosystem</p>	<p>Use of technologies established are available and extendable to other health and human services agencies without requiring each agency to build the technical infrastructure for their agency, but rather “plug in” to the infrastructure that NM HCA has already built.</p>
<p>Achieve health equity by addressing poverty, discrimination, and lack of resources, building a New Mexico where everyone thrives</p>	<p>Help provide a 360-degree customer view via the use of Mastered Data Management tool</p>	<p>MDM integrates data from multiple sources to single identity record for customers. Partner agencies use MDM match/merge process to integrate data and add own IDs.</p> <p>Benefits:</p> <ul style="list-style-type: none"> ▪ Provides access to a golden record for a customer. ▪ Helps an agency find their customers in other agencies’ systems.
<p>Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.</p>	<p>Use of the shared services technologies that NM HCA and MMISR project have implemented to other health and human services agencies.</p>	<p>See below for the specific technologies’ benefits listed by tool</p>
	<p>Specific technologies are listed below with a description:</p> <p>ICAM is a Shared Service serving as the SIP Identity Provider for internal/ employee access to SIP applications, module vendor applications, and the Internal Portal, includes enterprise role mapping capabilities</p>	<p>ICAM Benefits:</p> <ul style="list-style-type: none"> ▪ Single sign-on capabilities across all the HHS 2020 participating web applications ▪ Centralized application access (roles) request process for all participating applications
	<p>ECM solutions capture, store, activate, analyze, and automate business content, providing new value from data that was previously unstructured and unavailable</p>	<p>ECM Benefits:</p> <ul style="list-style-type: none"> ▪ A centralized document repository to store their documents, including common policy documents across agencies. This helps agencies and partners reduce or remove the use of paper.

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		<ul style="list-style-type: none"> ▪ Can build a unified case file of all of a customer's documents. ▪ Helps provide 360-degree view to employee or customer.
	CCM solutions enable organizations to manage customer communications across a wide range of media. This can include printed documents, archived digital documents, email, and web pages, among other sources.	<p>CCM Benefits:</p> <ul style="list-style-type: none"> ▪ Standard communication templates can be established and used through CCM to generate program-specific letters, notices, and outreach notifications.
	Inbound Mailroom receives and scans incoming paper/fax mail for HHS 2020.	<p>Inbound Mailroom Benefits:</p> <ul style="list-style-type: none"> ▪ Provides a route for receiving high volume paper mail. ▪ Routes scanned documents for storage in partner-accessible ECM service. ▪ Also provides Intelligent Document Processing (IDP) for use on incoming mail or other images. ▪ Recommend usage of (dynamic) barcodes.
	Outbound Mailroom handles all outgoing paper mail from HCA, Modules, and Integration Partners.	<p>Outbound Mailroom Benefits:</p> <ul style="list-style-type: none"> ▪ Ability to bulk print digital files and mail these out to defined addresses. ▪ Access to bulk mailing rates. ▪ Access to standardized returned mail processes via Inbound Mailroom
	Address Standardization and Validation checks and modifies addresses to adhere to USPS standards	<p>Address Standardization and Validation Benefits:</p> <ul style="list-style-type: none"> ▪ Real-time service to standardize and validate addresses during the intake business process to improve address data quality. ▪ Help minimize delivery failures and improve customer verification.
	Data Services (DS) module is a reporting platform that provides access to a single,	<p>Data Services/Analytics Benefits:</p> <ul style="list-style-type: none"> ▪ Allows a partner to leverage the DS reporting

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	authoritative resource about participants in Medicaid and other public assistance programs, enabling a transformation to a data-driven organization.	and dashboarding capabilities including enterprise spanning analytics.
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IX. Benefits

The following is a list of tangible and intangible benefits anticipated from the project. Please describe the gain in efficiency and/or effectiveness for the agency and/or constituents served as a result of this project.

[Potential benefits may include:

People – Improve workforce efficiency, enable digital accessibility WCAG 2.1 AA (Web Content Accessibility Guidelines), and enhance the delivery of services to constituents

Process – Reduce transaction processing time and improve response time

Technology – Increase system reliability, stability, security, and data quality

Business – Increase revenue, improve customer satisfaction

Return on Investment (ROI) – Evaluate the efficiency of an investment or compare the efficiency of several different investments

Example: Formula: ROI = (Amount of Financial Gain – Cost of Investment)/ (Cost of Investment)]

Tangible Benefits	Amount
Federal funding agencies offer a federal match rate of between 50% to 90%, depending upon which agency and which New Mexico constituents participate in each specific program. The combined federal match rate has historically ranged from 84-88% allowing for all state agencies to leverage the purchasing power of the federal funds and supplement them with state general funds, thereby ensuring that the state general funds can go farther.	\$0.00

Intangible Benefits	Metrics
N/A	

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X. Total Cost of Ownership

The following table lists the total potential cost to develop or acquire, implement, operate and maintain the proposed project for its entire life cycle.

**IX. Total Cost of Ownership
Project UNITE
(Unified New Mexico Health
and Human Services Integrations)**

[The Total Cost of Ownership (TCO) is designed to capture the system lifecycle and should include costs to acquire or develop, implement and support and maintain operations. Work with your budget team to complete this form.]

Category	Previous Actuals	FY26	FY27	FY28	FY29	FY30	Total	
Non-Recurring Cost - Development & Implementation		(in thousands)						
200	Personnel Services and Employee Benefits	\$0.0	\$0.0	\$4,098.20	\$0.0	\$0.0	\$4,098.2	
300	Contractual Services	\$0.0	\$0.0		\$0.0	\$0.0		
	IT Professional Services: Project Management	\$0.0	\$0.0	\$4,735.90	\$0.0	\$0.0	\$4,735.9	
	IT Professional Services: IV&V	\$0.0	\$0.0	\$3,779.70	\$0.0	\$0.0	\$3,779.7	
	IT Professional Services: Business Analysis	\$0.0	\$0.0	\$4,850.50	\$0.0	\$0.0	\$4,850.5	
	IT Professional Services: Dev./Imp./Training/UAT	\$0.0	\$0.0	\$38,830.70	\$0.0	\$0.0	\$38,830.7	
	Other Professional Services	\$0.0	\$0.0	\$0.00	\$0.0	\$0.0	\$0.0	
400	Other	\$0.0	\$0.0	\$0.00	\$0.0	\$0.0	\$0.0	
	Travel/Lodging	\$0.0	\$0.0	\$53.90	\$0.0	\$0.0	\$53.9	
	Hardware	\$0.0	\$0.0	\$158.50	\$0.0	\$0.0	\$158.5	
	Software Licenses	\$0.0	\$0.0	\$3,453.50	\$0.0	\$0.0	\$3,453.5	
	Facilities	\$0.0	\$0.0	\$0.00	\$0.0	\$0.0	\$0.0	
Subtotal Non-Recurring Cost		\$0.0	\$0.0	\$59,960.9	\$0.0	\$0.0	\$59,960.9	
Recurring Maintenance and Operations (M&O) Cost		(in thousands)						
200	Personnel Services and Employee Benefits	\$0.0	\$0.0	\$3,491.8	\$606.3	\$0.0	\$4,098.2	
300	Contractual Services	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0		
	IT Professional Services	\$0.0	\$0.0	\$93,289.6	\$25,317.9	\$563.0	\$119,170.6	
	Training	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	
400	Other	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	
	Hardware	\$0.0	\$0.0	\$3.0	\$6.0	\$0.0	\$9.0	
	Software Licenses	\$0.0	\$0.0	\$10,883.3	\$8,277.8	\$0.0	\$19,161.1	
	Facilities	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	
	Compliance and Security	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	
Subtotal Recurring M&O Cost		\$0.0	\$0.0	\$107,667.8	\$34,208.1	\$563.0	\$142,438.9	
<i>* Applicable for on-going or existing project.</i>								
Total Cost		\$0.0	\$0.0	\$167,628.7	\$34,208.1	\$563.0	\$202,399.8	

XI. C2 Form – Computer System Enhancement Fund (CSEF)

[Form available at [Agency IT Special Appropriation Guidance - New Mexico Department of Information Technology \(nm.gov\)](#) or Click the image to open and complete the Excel Spreadsheet for the CSEF form.]

C2: Information Technology Data Processing - Computer Systems Enhancement Fund (CSEF)

Agency Name	Agency Code	Project Name			
Health Care Authority	630	Project Unite (Unified New Mexico Health and Human Services Integrations)			
Multi-Agency Project Agencies	Participating	Priority	Projected/Actual Start Date	Projected End Date	
Yes CYFD, ECECD	DOH, ALTSD,	1	7/1/2026	06/30/2028*	

**a more accurate project end date can be defined after discovery of agency specific integration projects with NM HCA's shared services technologies and System Integration Platform is completed.*

Revenue Project Cost (dollars in thousands)				
Category or Account Description	FY25 & Prev Actual	FY26 Budget	FY27 Request	Total
General Fund (CSEF)	0.0	0.0	\$5,996.10	5,996.1
Other State Funds (<i>*specify funds below</i>)	0.0	0.0	0.0	0.0
Federal Funds	0.0	0.0	\$53,964.70	53,964.7
Internal Svc Funds/Interagency Transfer	0.0	0.0	0.0	0.0
Total	0.0	0.0	59,960.8	59,960.8
*If Other State Funds, Specify Funding Source/Fund Name				

Expenditure Categories (dollars in thousands)				
	FY25 & Prev Actual	FY26 Budget	FY27 Request	Total
Personal Services & Employee Benefits	0.0	\$0.0	\$4,098.20	4,098.2
Professional Services	0.0	0.0	\$52,196.70	52,196.7

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Travel/Lodging	0.0	0.0	\$53.90	53.9
IT Hardware	0.0	0.0	\$158.50	158.5
IT Software	0.0	0.0	\$3,453.50	3,453.5
Other	0.0	0.0	0	0.0
Total	0.0	0.0	59,960.8	59,960.8

	Print Name	Phone	Email Address	Date
Agency Cabinet Secretary/ Director (Mandatory)				
Chief information Officer or IT Lead(Mandatory)				
Chief Finance Officer / Budget Director (Mandatory)				

XII. Appendices

Appendix A: List of Acronyms

A list of project-specific acronyms is included for reference.

Appendix Table 1 - Acronyms

Acronym	Definition
ALTSD	Aging and Long-Term Services Department
APD	Advance Planning Document
ASD	Administrative Services Division
ASVV	Address Standardization Verification & Validation
BHSD	Behavioral Health Services Division
BMS	Benefit Management System
BPO	Business Process Outsourcing
CBH	Children’s Behavioral Health
C/CM	Care/Case Management
CMS	Centers for Medicare and Medicaid Services
COTS	Commercial-off-the-Shelf
CRM	Customer Relationship Management
CSED	Child Support Enforcement Division
CSEF	Computer System Enhancement Fund
CYFD	Children, Youth, and Families Department
DDI	Design, Development, and Implementation
DOH	Department of Health
DoIT	Department of Information Technology
DS	Data Services
ECECD	Early Childhood Education and Care Department
ECM	Electronic Content Management
EDM	Electronic Document Management
EPMO	Enterprise Project Management Office
ESB	Enterprise Service Bus
FADS	Fraud and Abuse Detection
FFP	Federal Financial Participation
FFS	Fee-for-Service
FHB	Fair Hearings Bureau
FS	Financial Services
HCA	Health Services Department
IdAM	Identity and Access Management

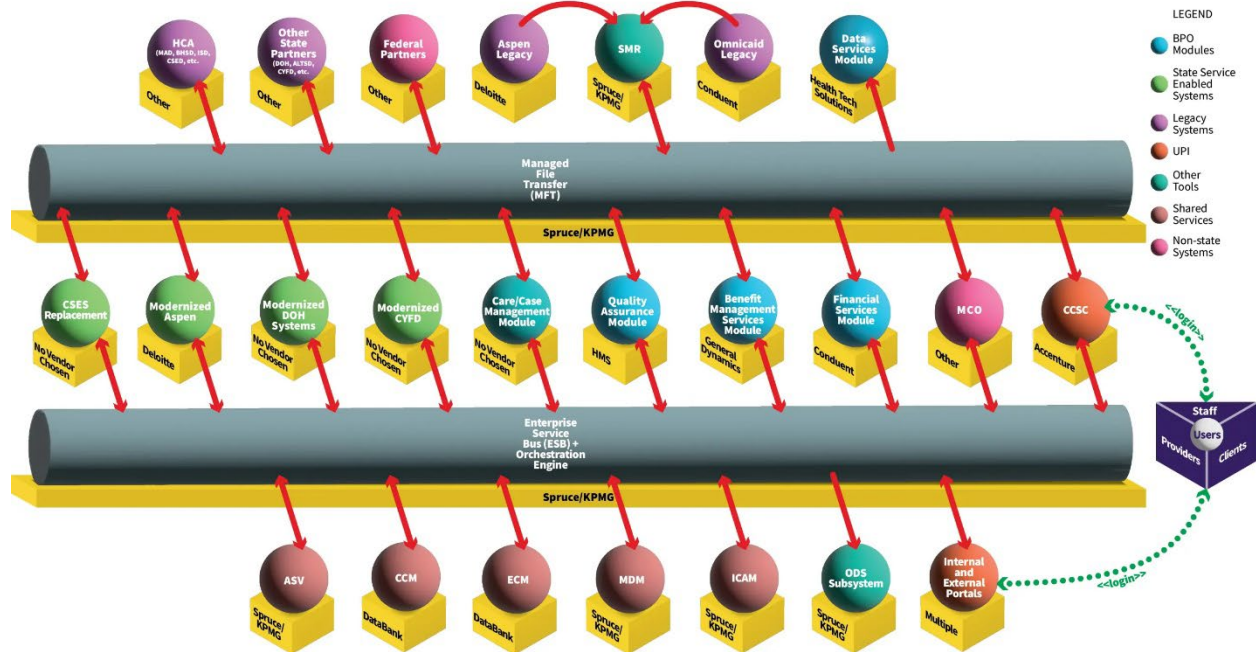
FY27 Information Technology Funding (C2) Request – Full Business Case

Acronym	Definition
ISD	Income Support Division
ITD	Information Technology Department
IV&V	Independent Verification and Validate
KPI	Key Performance Indicator
MAD	Medical Assistance Division
MARS-E	Minimum Acceptable Risk Standards for Exchange
MCO	Managed Care Organization
MDM	Master Data Management
MES	Medicaid Enterprise System
MITA	Medicaid Information Technology Architecture
MMIS	Medicaid Management Information System
MMISR	Medicaid Management Information System Replacement
OFMW	Oracle Fusion Middleware
OIG	Office of Inspector General
PBM	Pharmacy Benefits Management
RAC	Recovery Audit Contract
ROI	Return on Investment
SaaS	Software as a Service
SFY	State Fiscal Year
SI	System Integrator
SNAP	Supplemental Nutrition Assistance Program
SOA	Service-Oriented Architecture
SSO	Single Sign-On
TANF	Temporary Assistance for Needy Families
TPL	Third-Party Liability
UM/UR	Utilization Management/Utilization Review
UP	Unified Portal
UPI	Unified Portal Interface

Appendix B: HHS 2020 IT Enterprise System Diagram

The NM HCA's HHS Enterprise Project's system footprint diagram included below has been developed to depict the technical view of the Enterprise solution.

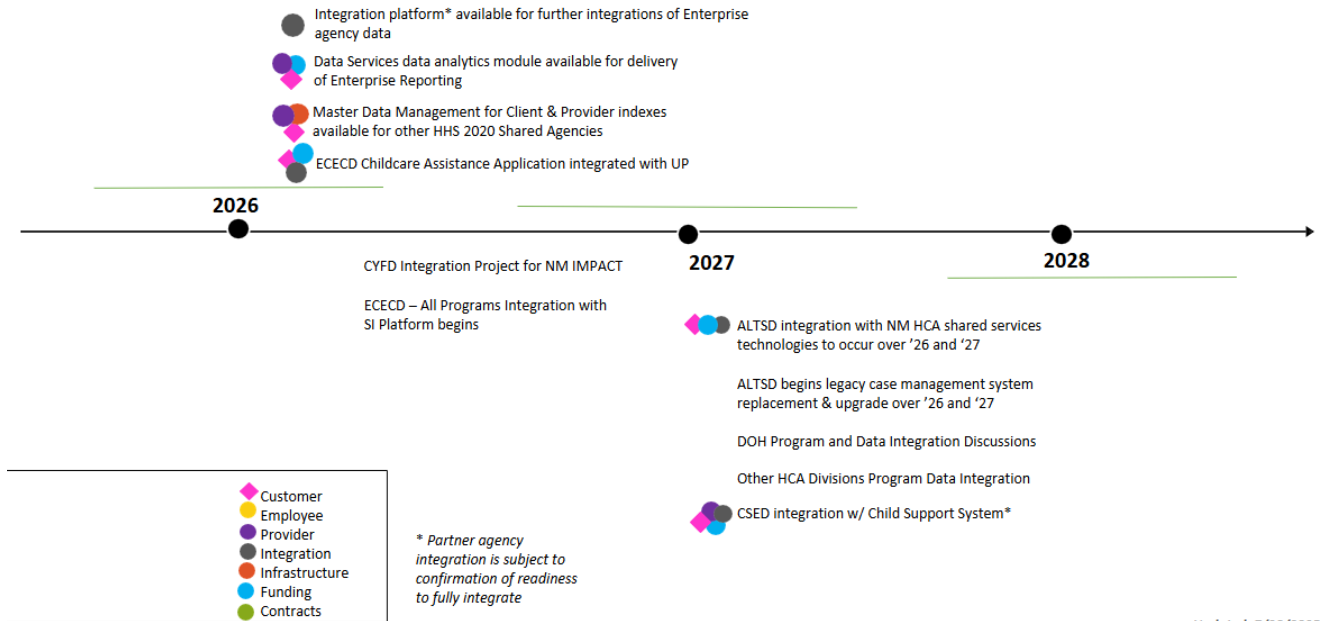
Appendix Table 2 - HHS IT Enterprise System Diagram



Appendix C: Project Unite (Unified NM HHS Integrations for New Mexico) Roadmap 2026-2028

Appendix Table 3 – Project Unite Roadmap 2026-2028

Project Unite (Unified NM HHS Integration for New Mexico) Roadmap 2026-2028



Updated: 7/28/2025

**FY26 APPROPRIATION REQUEST
FORM E-6B LEASED PASSENGER-RELATED VEHICLES**

Account code 542800

LEASED VEHICLE INFORMATION @ 7/1/25

Agency Name: HCA
Program Name: DHI

Business Unit: 63000
Program Code:

Item No.	LONG TERM LEASES ONLY						Lease Type Operational (O) or Standard (S)	Long Term Only			SHORT TERM ONLY			Put (x) if Fed \$
	Year	Make/Model	Vehicle Type	A** R C	License Plate Number	Mileage As of 7/1/25		A	B	A x B = C	D	E	D x E = F	
								FY27 Monthly Rate S= Rate Schedule	Number of months to lease	Total cost Rate FY27	Daily Rate Based On Vehicle Type	No. of Days	Total Lease Rate	
Example	2011	Ford/Taurus	02B	C	00000SG	5,000	Standard (S)	350.00	12	4,200.00	15.90	2	31.80	
1	2011	Ford/Fusion	02B	C	001897SG	89,835	Operational (O)	266.72	12	3,200.64			-	
2	2011	Ford/Fusion	02B	C	001899SG	69,598	Operational (O)	266.72	12	3,200.64			-	
3	2019	Dodge/Journey	05A	C	007432SG	32,701	Operational (O)	266.72	12	3,200.64			-	
4	2019	Dodge/Caravan	05A	C	007433SG	36,382	Operational (O)	266.72	12	3,200.64			-	
5	2019	Dodge/Journey	05A	C	007787SG	13,730	Operational (O)	266.72	12	3,200.64			-	
6	2021	Nissan/Altima	02BA	C	007518SG	23,804	Standard (S)	485.00	12	5,820.00			-	
7	2020	Nissan/Altima	02BA	C	007903SG	12,858	Standard (S)	485.00	12	5,820.00			-	
8	2021	Nissan/Altima	02BA	C	008464SG	25,439	Standard (S)	485.00	12	5,820.00			-	
9	2021	Nissan/Altima	02BA	C	008472SG	22,860	Standard (S)	485.00	12	5,820.00			-	
10	2021	Nissan/Altima	02BA	C	008495SG	21,822	Standard (S)	485.00	12	5,820.00			-	
11	2021	Nissan/Altima	02BA	C	008744SG	26,364	Standard (S)	485.00	12	5,820.00			-	
12	2021	Nissan/Altima	02BA	C	008789SG	28,119	Standard (S)	485.00	12	5,820.00			-	
13	2021	Nissan/Altima	02BA	C	008801SG	26,123	Standard (S)	485.00	12	5,820.00	-		-	
14	2021	Nissan/Altima	02BA	C	008847SG	27,726	Standard (S)	485.00	12	5,820.00			-	
15	2021	Nissan/Altima	02BA	C	008854SG	26,223	Standard (S)	485.00	12	5,820.00			-	
16	2021	Nissan/Altima	02BA	C	008903SG	20,316	Standard (S)	485.00	12	5,820.00			-	
17	2021	Nissan/Altima	02BA	C	008904SG	26,368	Standard (S)	485.00	12	5,820.00			-	
18	2021	Nissan/Altima	02BA	C	008933SG	17,670	Standard (S)	485.00	12	5,820.00			-	
19	2021	Nissan/Altima	02BA	C	008941SG	18,817	Standard (S)	485.00	12	5,820.00			-	
20	2006	Dodge/Caravan	05A	C	G61453	136,598	Operational (O)	266.72	12	3,200.64			-	
21	2021	Nissan/Altima	02BA	C	008716SG	29,827	Standard (S)	485.00	12	5,820.00			-	
22	2021	Nissan/Altima	02BA	C	008819SG	35,091	Standard (S)	485.00	12	5,820.00			-	
23	2022	Nissan/Altima	02BA	C	009225SG	918	Standard (S)	485.00	12	5,820.00			-	
24	2011	Ford/Fusion	02B	C	001896SG	147,300	Operational (O)	266.72	12	3,200.64			-	
25	2019	Dodge/Journey	05A	C	007430SG	74,663	Operational (O)	266.72	12	3,200.64			-	
27	2019	Dodge/Caravan	05A	C	007431SG	61,125	Operational (O)	266.72	12	3,200.64			-	
28	2006	Dodge/Caravan	05A	C	G61478	135,798	Operational (O)	266.72	12	3,200.64			-	
29	2021	Nissan/Altima	02BA	C	008470SG	54,076	Standard (S)	485.00	12	5,820.00			-	
30	2021	Chrysler/Pacifica	05A	C	008897SG	52,585	Standard (S)	811.00	12	9,732.00			-	
31	2011	Ford/Fusion	02B	C	001895SG	104,549	Operational (O)	266.72	12	3,200.64			-	

32	2006	Dodge/Caravan	05A	C	G64560	110,378	Operational (O)	266.72	12	3,200.64				
33	2006	Dodge/Caravan	05A	C	G64562	94,518	Operational (O)	266.72	12	3,200.64				
34	2021	Nissan/Altima	02BA	C	008795SG	30,952	Standard (S)	485.00	12	5,820.00			-	
35	2024	Nissan/Rouge	06AM	C	010806SG	511	Standard (S)	747.00	12	8,964.00			-	
										-			-	
										-			-	
										TOTAL LONG TERM:	170,884.32	TOTAL SHORT TERM:	-	

Operational(O) rate for FY27 will be

** Code A = additional leased vehicle request C = vehicle currently leased R = request to replace previously purchased vehicle

**FY26 APPROPRIATION REQUEST
FORM E-6B LEASED PASSENGER-RELATED VEHICLES**

Account code 542800

LEASED VEHICLE INFORMATION @ 7/1/25

Agency Name: HCA
Program Name: DDSD

Business Unit: 63000
Program Code:

Item No.	LONG TERM LEASES ONLY						Lease Type Operational (O) or Standard (S)	Long Term Only			SHORT TERM ONLY			Put (x) if Fed \$
	Year	Make/Model	Vehicle Type	A** R C	License Plate Number	Mileage As of 7/1/25		A	B	A x B = C	D	E	D x E = F	
								FY27 Monthly Rate S= Rate Schedule	Number of months to lease	Total cost Rate FY27	Daily Rate Based On Vehicle Type	No. of Days	Total Lease Rate	
Example	2011	Ford/Taurus	02B	C	00000SG	5,000	Standard (S)	350.00	12	4,200.00	15.90	2	31.80	
1	2009	Dodge/Caravan	05A	C	001393SG	62,419	Operational (O)	266.72	12	3,200.64			-	
2	2015	Ford/Explorer	06A	C	004644SG	62,834	Operational (O)	266.72	12	3,200.64			-	
3	2015	Ford/Explorer	06A	C	004649SG	75,061	Operational (O)	266.72	12	3,200.64			-	
4	2021	Dodge/Ram	04C	C	010138SG	10,248	Standard (S)	459.00	12	5,508.00			-	
5	2021	Dodge/Ram	04C	C	010139SG	10,744	Standard (S)	459.00	12	5,508.00			-	
6	2021	Nissan/Altima	02BA	C	008669SG	31,909	Standard (S)	485.00	12	5,820.00			-	
7	2021	Nissan/Altima	02BA	C	008458SG	30,255	Standard (S)	485.00	12	5,820.00			-	
8	2021	Nissan/Altima	02BA	C	008490SG	22,049	Standard (S)	485.00	12	5,820.00			-	
9	2021	Nissan/Altima	02BA	C	008496SG	17,136	Standard (S)	485.00	12	5,820.00			-	
10	2021	Nissan/Altima	02BA	C	008713SG	15,812	Standard (S)	485.00	12	5,820.00			-	
11	2021	Nissan/Altima	02BA	C	008723SG	21,122	Standard (S)	485.00	12	5,820.00			-	
12	2021	Nissan/Altima	02BA	C	008725SG	20,722	Standard (S)	485.00	12	5,820.00			-	
13	2021	Nissan/Altima	02BA	C	008831SG	20,362	Standard (S)	485.00	12	5,820.00	-		-	
14	2021	Nissan/Altima	02BA	C	008840SG	21,049	Standard (S)	485.00	12	5,820.00			-	
15	2021	Nissan/Altima	02BA	C	008874SG	15,066	Standard (S)	485.00	12	5,820.00			-	
16	2021	Nissan/Altima	02BA	C	008907SG	22,484	Standard (S)	485.00	12	5,820.00			-	
17	2021	Nissan/Altima	02BA	C	008916SG	23,095	Standard (S)	485.00	12	5,820.00			-	
18	2021	Nissan/Altima	02BA	C	008929SG	23,986	Standard (S)	485.00	12	5,820.00			-	
19	2021	Nissan/Altima	02BA	C	008930SG	15,278	Standard (S)	485.00	12	5,820.00			-	
20	2021	Nissan/Altima	02BA	C	008936SG	26,400	Standard (S)	485.00	12	5,820.00			-	
21	2021	Nissan/Altima	02BA	C	008940SG	27,294	Standard (S)	485.00	12	5,820.00			-	
22	2021	Nissan/Altima	02BA	C	008954SG	21,053	Standard (S)	485.00	12	5,820.00			-	
23	2021	Nissan/Altima	02BA	C	008992SG	22,056	Standard (S)	485.00	12	5,820.00			-	
24	2021	Nissan/Altima	02BA	C	009107SG	25,612	Standard (S)	485.00	12	5,820.00			-	
25	2021	Nissan/Altima	02BA	C	009113SG	26,846	Standard (S)	485.00	12	5,820.00			-	
26	2021	Nissan/Altima	02BA	C	009115SG	28,812	Standard (S)	485.00	12	5,820.00			-	
27	2021	Toyota/Rav4	06A	C	008305SG	29,858	Standard (S)	681.00	12	8,172.00			-	
28	2021	Toyota/Rav4	06A	C	008307SG	28,422	Standard (S)	681.00	12	8,172.00			-	
29	2021	Toyota/Rav4	06A	C	008405SG	38,170	Standard (S)	681.00	12	8,172.00			-	
30	2022	Dodge/Durango	05A	C	009623SG	28,982	Standard (S)	681.00	12	8,172.00			-	

31	2021	Dodge/Durango	05A	C	010089SG	12,713	Standard (S)	681.00	12	8,172.00			-	
32	2021	Dodge/Durango	05A	C	010690SG	14,047	Standard (S)	681.00	12	8,172.00			-	
									12	-			-	
								TOTAL LONG TERM:		191,869.92	TOTAL SHORT TERM:		-	

Operational(O) rate for FY27 will be

** Code A = additional leased vehicle request C = vehicle currently leased R = request to replace previously purchased vehicle

**FY26 APPROPRIATION REQUEST
FORM E-6B LEASED PASSENGER-RELATED VEHICLES**

Account code 542800

LEASED VEHICLE INFORMATION @ 7/1/25

Agency Name: HCA
Program Name: ITD

Business Unit: 63000
Program Code: _____

Item No.	LONG TERM LEASES ONLY						Lease Type Operational (O) or Standard (S)	Long Term Only			SHORT TERM ONLY			Put (x) if Fed \$
	Year	Make/Model	Vehicle Type	A** R C	License Plate Number	Mileage As of 7/1/25		A	B	A x B = C	D	E	D x E = F	
								FY27 Monthly Rate S= Rate Schedule	Number of months to lease	Total cost Rate FY27	Daily Rate Based On Vehicle Type	No. of Days	Total Lease Rate	
Example	2011	Ford/Taurus	02B	C	00000SG	5,000	Standard (S)	350	12	4,200.0	15.90	2	31.80	
1	2024	Nissan/Altima	02BA	C	010431SG	2,183	Standard (S)	678	12	8,136.00			-	
2										-			-	
3										-			-	
4										-			-	
5										-			-	
6										-			-	
7										-			-	
8										-			-	
9										-			-	
10										-			-	
11										-			-	
12										-			-	
13										-	-		-	
14										-			-	
15										-			-	
16										-			-	
17										-			-	
18										-			-	
19										-			-	
								TOTAL LONG TERM:	8,136.00	TOTAL SHORT TERM:	-			

Operational(O) rate for FY27 will be

** Code A = additional leased vehicle request C = vehicle currently leased R = request to replace previously purchased vehicle

**FY26 APPROPRIATION REQUEST
FORM E-6B LEASED PASSENGER-RELATED VEHICLES**

Account code 542800

LEASED VEHICLE INFORMATION @ 7/1/25

Agency Name: HCA
Program Name: PS

Business Unit: 63000
Program Code: _____

Item No.	LONG TERM LEASES ONLY						Lease Type Operational (O) or Standard (S)	Long Term Only			SHORT TERM ONLY			Put (x) if Fed \$
	Year	Make/Model	Vehicle Type	A** R C	License Plate Number	Mileage As of 7/1/25		A	B	A x B = C	D	E	D x E = F	
								FY27 Monthly Rate S= Rate Schedule	Number of months to lease	Total cost Rate FY27	Daily Rate Based On Vehicle Type	No. of Days	Total Lease Rate	
Example	2011	Ford/Taurus	02B	C	00000SG	5000	Standard (S)	350.00	12	4,200.00	15.90	2	31.80	
1	2009	Ford/Ecoline	02B	C	001293SG	50268	Standard (S)	266.72	12	3,200.64			-	
2	2009	Chevy/Van	05B	C	002009SG	82572	Standard (S)	266.72	12	3,200.64			-	
3	2015	Chevy/Silverad	04C	C	005427SG	110025	Standard (S)	266.72	12	3,200.64			-	
4	2021	Nissan/Altima	02BA	C	008687SG	7477	Operational (O)	485.00	12	5,820.00			-	
5	2005	Ford/Focus	02B	C	G59094	106314	Standard (S)	266.72	12	3,200.64			-	
6	2007	Ford/F-150	04C	C	G71424	78349	Standard (S)	266.72	12	3,200.64			-	
7	2021	Nissan/Altima	02BA	C	008677SG	9566	Operational (O)	485.00	12	5,820.00			-	
8	2021	Nissan/Altima	02BA	C	008752SG	12944	Operational (O)	485.00	12	5,820.00			-	
9	2021	Nissan/Altima	02BA	C	008776SG	15281	Operational (O)	485.00	12	5,820.00			-	
10	2021	Nissan/Altima	02BA	C	008779SG	1890	Operational (O)	485.00	12	5,820.00			-	
11										-			-	
12										-			-	
13										-			-	
14										-			-	
15										-			-	
16										-			-	
17										-			-	
18										-			-	
19										-			-	
TOTAL LONG TERM:										45,103.20	TOTAL SHORT TERM:		-	

Operational(O) rate for FY27 will be

** Code A = additional leased vehicle request C = vehicle currently leased R = request to replace previously purchased vehicle

**FY26 APPROPRIATION REQUEST
FORM E-6B LEASED PASSENGER-RELATED VEHICLES**

Account code 542800

LEASED VEHICLE INFORMATION @ 7/1/25

Agency Name: HCA
Program Name: CSSD

Business Unit: 63000
Program Code: _____

Item No.	LONG TERM LEASES ONLY						Lease Type Operational (O) or Standard (S)	Long Term Only			SHORT TERM ONLY			Put (x) if Fed \$
	Year	Make/Model	Vehicle Type	A** R C	License Plate Number	Mileage As of 7/1/25		A	B	A x B = C	D	E	D x E = F	
								FY27 Monthly Rate S= Rate Schedule	Number of months to lease	Total cost Rate FY27	Daily Rate Based On Vehicle Type	No. of Days	Total Lease Rate	
Example	2011	Ford/Taurus	02B	C	00000SG	5,000	Standard (S)	350.00	12	4,200.00	15.90	2	31.80	
1	2008	Chevy/Impala	02B	C	000278SG	155494	Operational (O)	266.72	12	3,200.64			-	
2	2008	Dodge/Durango	06A	C	000427SG	121429	Operational (O)	266.72	12	3,200.64			-	
3	2008	Dodge/Durango	06A	C	000442SG	141330	Operational (O)	266.72	12	3,200.64			-	
4	2009	Chevy/Malibu	02B	C	001276SG	106020	Operational (O)	266.72	12	3,200.64			-	
5	2009	Chevy/HHR	02B	C	001301SG	120818	Operational (O)	266.72	12	3,200.64			-	
6	2009	Chevy/Malibu	02B	C	001304SG	85303	Operational (O)	266.72	12	3,200.64			-	
7	2009	Chevy/Malibu	02B	C	001307SG	82204	Operational (O)	266.72	12	3,200.64			-	
8	2010	Ford/Fusion	02B	C	001342SG	93162	Operational (O)	266.72	12	3,200.64			-	
9	2010	Ford/Fusion	02B	C	001343SG	62419	Operational (O)	266.72	12	3,200.64			-	
10	2014	Ford/Fusion	02B	C	003297SG	89917	Operational (O)	266.72	12	3,200.64			-	
11	2014	Ford/Fusion	02B	C	003298SG	86988	Operational (O)	266.72	12	3,200.64			-	
12	2005	Dodge/Caravan	05B	C	007021SG	8220	Operational (O)	266.72	12	3,200.64			-	
13	2021	Nissan/Altima	02BA	C	008438SG	11566	Standard (S)	485.00	12	5,820.00	-		-	
14	2021	Nissan/Altima	02BA	C	008441SG	6965	Standard (S)	485.00	12	5,820.00			-	
15	2021	Nissan/Altima	02BA	C	008445SG	2490	Standard (S)	485.00	12	5,820.00			-	
16	2021	Nissan/Altima	02BA	C	008614SG	12094	Standard (S)	485.00	12	5,820.00			-	
17	2021	Nissan/Altima	02BA	C	008708SG	8594	Standard (S)	485.00	12	5,820.00			-	
18	2021	Nissan/Altima	02BA	C	008750SG	12388	Standard (S)	485.00	12	5,820.00			-	
19	2021	Nissan/Altima	02BA	C	008775SG	12717	Standard (S)	485.00	12	5,820.00			-	
20	2021	Nissan/Altima	02BA	C	008778SG	19576	Standard (S)	485.00	12	5,820.00			-	
21										-			-	
22										-			-	
TOTAL LONG TERM:								84,967.68	TOTAL SHORT TERM:			-		

Operational(O) rate for FY27 will be

** Code A = additional leased vehicle request C = vehicle currently leased R = request to replace previously purchased vehicle

**FY26 APPROPRIATION REQUEST
FORM E-6B LEASED PASSENGER-RELATED VEHICLES**

Account code 542800

LEASED VEHICLE INFORMATION @ 7/1/25

Agency Name: HCA
Program Name: MAD

Business Unit: 63000
Program Code:

Item No.	LONG TERM LEASES ONLY						Lease Type Operational (O) or Standard (S)	Long Term Only			SHORT TERM ONLY			Put (x) if Fed \$
	Year	Make/Model	Vehicle Type	A** R C	License Plate Number	Mileage As of 7/1/25		A	B	A x B = C	D	E	D x E = F	
								FY27 Monthly Rate S= Rate Schedule	Number of months to lease	Total cost Rate FY27	Daily Rate Based On Vehicle Type	No. of Days	Total Lease Rate	
Example	2011	Ford/Taurus	02B	C	00000SG	5000	Standard (S)	350.00	12	4,200.00	15.90	2	31.80	
1	2008	Chevy/Impala	02B	C	000260SG	106188	Operational (O)	266.72	12	3,200.64			-	
2	2021	Nissan/Altima	02BA	C	009202SG	21845	Standard (S)	485.00	12	5,820.00			-	
3				A						-			-	
4										-			-	
5										-			-	
6										-			-	
7										-			-	
8										-			-	
9										-			-	
10										-			-	
11										-			-	
12										-			-	
13										-	-		-	
14										-			-	
15										-			-	
16										-			-	
17										-			-	
18										-			-	
19										-			-	
								TOTAL LONG TERM:	9,020.64	TOTAL SHORT TERM:			-	

Operational(O) rate for FY27 will be

** Code A = additional leased vehicle request C = vehicle currently leased R = request to replace previously purchased vehicle

**FY26 APPROPRIATION REQUEST
FORM E-6B LEASED PASSENGER-RELATED VEHICLES**

Account code 542800

LEASED VEHICLE INFORMATION @ 7/1/25

Agency Name: HCA
Program Name: ISD

Business Unit: 63000
Program Code:

Item No.	LONG TERM LEASES ONLY						Lease Type Operational (O) or Standard (S)	Long Term Only			SHORT TERM ONLY			Put (x) if Fed \$
	Year	Make/Model	Vehicle Type	A** R C	License Plate Number	Mileage As of 7/1/25		A	B	A x B = C	D	E	D x E = F	
								FY27 Monthly Rate S= Rate Schedule	Number of months to lease	Total cost Rate FY27	Daily Rate Based On Vehicle Type	No. of Days	Total Lease Rate	
Example	2011	Ford/Taurus	02B	C	00000SG	5,000	Standard (S)	350.00	12	4,200.00	15.90	2	31.80	
1	2008	Chevy/Colorado	04C		000298SG	88,538	Operational (O)	266.72	12	3,200.64			-	
2	2003	Ford/F150	04C		G54469	64,836	Operational (O)	266.72	12	3,200.64			-	
3	2006	Dodge/Caravan	05A		G64518	71,529	Operational (O)	266.72	12	3,200.64			-	
4	2020	Nisan/Altima	02BA		007844SG	6,177	Standard (S)	485.00	12	5,820.00			-	
5	2020	Chevy/Malibu	02B		007503SG	37,604	Operational (O)	266.72	12	3,200.64			-	
6	2020	Nisan/Altima	02BA		007851SG	27,944	Standard (S)	485.00	12	5,820.00			-	
7	2020	Nisan/Altima	02BA		007852SG	13,783	Standard (S)	485.00	12	5,820.00			-	
8	2020	Nissan/Sentra	02B		007857SG	4,238	Standard (S)	485.00	12	5,820.00			-	
9	2021	Nisan/Altima	02BA		008434SG	32,181	Standard (S)	485.00	12	5,820.00			-	
10	2021	Nisan/Altima	02BA		008444SG	32,129	Standard (S)	485.00	12	5,820.00			-	
11	2020	Nisan/Altima	02BA		008491SG	21,822	Standard (S)	485.00	12	5,820.00			-	
12	2021	Nisan/Altima	02BA		008706SG	21,126	Standard (S)	485.00	12	5,820.00			-	
13	2021	Nisan/Altima	02BA		008760SG	16,959	Standard (S)	485.00	12	5,820.00	-		-	
14	2021	Nisan/Altima	02BA		008765SG	20,129	Standard (S)	485.00	12	5,820.00			-	
15	2021	Nisan/Altima	02BA		008766SG	18,896	Standard (S)	485.00	12	5,820.00			-	
16	2021	Nisan/Altima	02BA		008767SG	6,212	Standard (S)	485.00	12	5,820.00			-	
17	2021	Nisan/Altima	02BA		008771SG	7,626	Standard (S)	485.00	12	5,820.00			-	
18	2021	Nisan/Altima	02BA		008784SG	23,652	Standard (S)	485.00	12	5,820.00			-	
19	2021	Nisan/Altima	02BA		009206SG	26,258	Standard (S)	485.00	12	5,820.00			-	
20	2021	Nisan/Altima	02BA		009287SG	22,487	Standard (S)	485.00	12	5,820.00			-	
21	2021	Nisan/Altima	02BA		009292SG	24,597	Standard (S)	485.00	12	5,820.00			-	
22	2021	Nisan/Altima	02BA		010456SG	7,297	Standard (S)	678.00	12	8,136.00			-	
23	2021	Nisan/Altima	02BA		008447SG	14,693	Standard (S)	485.00	12	5,820.00			-	
										-			-	
TOTAL LONG TERM:										125,698.56	TOTAL SHORT TERM:		-	

Operational(O) rate for FY27 will be

** Code A = additional leased vehicle request C = vehicle currently leased R = request to replace previously purchased vehicle

**FY26 APPROPRIATION REQUEST
FORM E-6B LEASED PASSENGER-RELATED VEHICLES**

Account code 542800

LEASED VEHICLE INFORMATION @ 7/1/25

Agency Name: HCA
Program Name: BHSD

Business Unit: 63000
Program Code: _____

Item No.	LONG TERM LEASES ONLY						Lease Type Operational (O) or Standard (S)	Long Term Only			SHORT TERM ONLY			Put (x) if Fed \$	
	Year	Make/Model	Vehicle Type	A** R C	License Plate Number	Mileage As of 7/1/25		A	B	A x B = C	D	E	D x E = F		
								FY27 Monthly Rate S= Rate Schedule	Number of months to lease	Total cost Rate FY27	Daily Rate Based On Vehicle Type	No. of Days	Total Lease Rate		
Example	2011	Ford/Taurus	02B	C	00000SG	5,000	Standard (S)	350	12	4,200.0	15.90	2	31.80		
1	2021	Nissan/Altma	02BA	C	008448SG	35,396	Standard (S)	485	12	5,820.0			-		
2	2021	Nissan/Altma	02BA	C	008749SG	15,667	Standard (S)	485	12	5,820.0			-		
3										-			-		
4										-			-		
5										-			-		
6										-			-		
7										-			-		
8										-			-		
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12										-			-		
13										-	-		-		
14										-			-		
15										-			-		
16										-			-		
17										-			-		
18										-			-		
19										-			-		
								TOTAL LONG TERM: 11,640.00			TOTAL SHORT TERM:			-	

Operational(O) rate for FY27 will be

** Code A = additional leased vehicle request C = vehicle currently leased R = request to replace previously purchased vehicle