
2026
New Mexico
Legislative Session
Recap

&

Legislative
Advocacy



NMHCA/NMCAL

Government Relations Team

Charlie Marquez, Broad Spectrum Government Affairs & Consulting

NMHCA/NMCAL

- Vicente Vargas, Executive Director
- Tracy Alter, Senior Director
- Pat Whitacre, Clinical Director
- Peggy Martinez, Office Manager

NMHCA/NMCAL Board of Directors

NMHCA/NMCAL Members (MOST IMPORTANT)

NMHCA/NMCAL Political Action Committee

Current PAC Funds: \$97,691.29

Funded: \$17 per-bed from Nursing Facility Dues

2025 Contributions: \$39,609

Board Authorized

2026 Legislative Session Dates

January 20 – February 19: 30-Day Session

February 4: Deadline for introduction of legislation

March 11: Deadline for Governor to act on legislation (sign or veto)

May 20: Effective date of legislation

- Not a general appropriation bill
- No emergency clause
- No other specific date

July 1: Effective date of general appropriation bill (Fiscal Year 2027)

2026 Legislative Session Political Composition

Senate

- 42 Total
- 26 Democrats
- 16 Republicans

House of Representatives

- 70 Total
 - 44 Democrats
 - 26 Republicans
-

Target Committees

House of Representatives

- Appropriations and Finance
- Health and Human Services
- Judiciary
- Taxation and Revenue

Senate

- Finance
 - Health and Public Affairs
 - Judiciary
 - Tax, Business and Transportation
-

2026 Legislation & Legislative Priorities

Total Bills: 691

House: 378

Senate: 313

NMHCA/NMCAL Tracked: 52

Gov. Signed: 71 of 74 bills

- 44 House
- 30 Senate

NMHCA/NMCAL Legislative Priorities

- \$9M Recurring General Fund Appropriation: Rate Increase
- \$1M Non-Recurring General Fund Appropriation: BH support
- Monitor Medical Malpractice legislation: HB99

House Bill 284: Use Of Cannabis In Health Care Facilities

Purpose: allow qualified patient to beneficially use medical cannabis in health care facilities to alleviate symptoms for debilitating medical conditions and their medical treatments.

Qualified Patient: Pursuant to Lynn and Erin Compassionate Use Act, a New Mexican diagnosed by a practitioner as having a debilitating medical condition.

Health Care Facility: hospital, outpatient facility, diagnostic and treatment center, rehabilitation center, freestanding hospice or other similar facility at which medical care is provided.

House Bill 284: Use Of Cannabis In Health Care Facilities

Qualified patient prohibited from smoking or vaping cannabis within the health care facility; and health care facility shall reasonably restrict uses the medical cannabis to allow for the safe operation of the health care facility.

Facility shall develop guidelines for use and storage of medical cannabis. Reasonable restrictions shall include requiring medical cannabis to be stored in a locked container.

Compliance may be suspended if Federal Government

- Enforces action against a facility for compliance with medical cannabis program
 - Administratively prohibits use of medical cannabis a health care facility
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Interstate Provider Licensure Compacts Legislation

12 bills introduced

- Compact signed by Governor
 - SB1: Interstate Medical Licensure
 - HB50: Social Work Licensure Interstate Compact
 - 10 Compacts died in committee
 - PA Interstate Compact (2), Audiology & Speech-language Pathology Compact, PT & OT Licensure Compact, Dentist & Dental Hygienist Compact (2), EMS Personnel Licensure Interstate Compact, Counseling Licensure Compact, & Psychology Interjurisdictional Compact
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SB1: Interstate Medical Licensure Compact Act

Enables New Mexico to join Interstate Medical Licensure Compact

- Commits New Mexico to join with other states in the compact
 - Intended to increase allopathic (MD) or osteopathic physicians' (DO) ability to achieve expedited license to practice in New Mexico if they are already licensed in another compact state
 - Alternative way for achieve medical licensure alongside, but not replacing, the current New Mexico licensing methodology
-

SB1: Interstate Medical Licensure Compact Act

Includes standard compact language used by compact states and related to:

- Testing, training, and residency requirements
 - Requiring a HOME state license from a state board among the compact states
 - Mandated use of a common data system
 - State investigatory and disciplinary oversight
 - Impact of State regulatory enforcement
 - Interstate Medical Licensure Compact Commission will administrator
 - Commission membership and oversight
-

HB50: Social Work Licensure Interstate Compact

Enables New Mexico to join Social Work licensure Interstate Compact

- Commits New Mexico to join with other states in the compact
 - Makes it easier for social workers to work across state lines in other compact by increasing ability to achieve expedited license
 - Preserves regulatory authority of compact states not inconsistent w/compact
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HB50: Social Work Licensure Interstate Compact

Compact language related to:

- Testing, training, and academic requirements
 - Requiring license from designated HOME state
 - State investigatory and disciplinary oversight
 - Exchange of licensure and disciplinary information between states
 - Establishes Interstate Medical Licensure Compact Commission as administrator
 - Deviations from model language identified that could jeopardize compact participation
-

House Bill 99: Med/Mal Act Qualified Health Care Provider

What is it is Med/Mal Act

Qualified health care provider (QHP): doctor, hospital, outpatient health care facility, doctor of osteopathy, chiropractor, podiatrist, NA,PA, CNP, Midwife

QHP Qualification Criteria

- QHP except indep. health care facility): \$250,000 med/mal insurance policy
 - Indep. health care facility: \$500,000 med/mal insurance policy
 - Pay surcharge assessed by the Superintendent of Insurance
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House Bill 99: Med/Mal Act Recovery Limits (Caps)

Non-Punitive Non-Hospital QHP Recovery Limits

- Prior 2022: \$600,000 all QHCP
- 2023 & thereafter: \$750K* indep. Provider
- 2022 & 2023: 750K indep OP facility
- 2024 & thereafter: \$1M** indep OP facility

Non-Punitive Hospital Recovery Limits

- 2022: \$1 Million
 - 2023: \$4.5 Million
 - 2024: \$5.5 Million
 - 2026: \$6 Million
 - 2027 & there after: \$6 Million + adjusted annually by consumer price index for urban consumers
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House Bill 99: Med/Mal Act

Some 2026 Amendments

“Occurrence” clarified

Patient Compensation Fund (PCF) changes

Punitive damages added

House Bill 99: Med/Mal Act “Occurrence” Amended

Definition of “Occurrence” clarified:

- costs recoverable by plaintiff limited to costs actually incurred for the patient’s treatment
 - “occurrence” when a provider or providers’ acts or omissions combine to create an injury or injuries
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House Bill 99: Med/Mal Act Patient Compensation Fund

What is the PCF

QHP Personal Liability Limits (compensatory damages)

- QHP (except independent health care facility): \$250,000
- Independent health care facility: \$500,000

Changes

- No lump sum payments for future medical expenses
 - Can't negotiate future medical care
 - Hospitals can participate indefinitely
 - Personal Liability: hospitals/hospital controlled outpatient facilities pay compensatory damages over \$750K
-

House Bill 99: Med/Mal Act Punitive Damages (New Section)

Steps for Punitive Damage Claim

- File medical malpractice claim without punitive damages
 - Discovery determines if medical malpractice claim is triable
 - Plaintiff then amends pleading for punitive damages, court determines inclusion
 - Requires clear and convincing evidence that QHP was malicious, willful, wonton, reckless, fraudulent, or in bad faith
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House Bill 99: Med/Mal Act Punitive Damages Recovery Limits

Less than or Equal to Compensatory Damage Award

- Independent Provider
- Independent outpatient health care facility
- Hospital operated by a NM resident or domestic corporation not part of a hospital system

Not Greater than Two Times 2X Compensatory Damage Award

- Hospital or hospital-controlled outpatient health care facility
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HB2: 2026 General Appropriations Act

\$9M General Fund Recurring Appropriation

- Medicaid Rate Increase
- Matched with FMAP funds

\$1M General Fund Non-Recurring Appropriation

- BH pilot project for a limited number of NFs
 - Enhanced rate increase to support improved BH care
 - Matched with FMAP funds
-

HB2: 2026 General Appropriations Act

INSERT Flow CHART

2026 Federal Election

New Mexico

US Senate

Ben Ray Lujan (D)*, Christopher J Vanden Heuvel (R), Matt Dodson (D)

Congressional District 1

Melanie Stansbury (D)*, Steve Jones (R), Carlton Pennington (R) & Ndidiamaka Okpareke(R)

Congressional District 2

Gabe Vasquez (D)*, Greg Cunningham (R), Thomas Wakely (R) & Jose Orozco (R)

Congressional District 3

Martin Zamora(R), & Teresa Leger Fernandez (D)*

2026 State Election

New Mexico

Governor

- Deb Haaland (D), Doug Turner (R), Duke Rodriguez (R), Gregory D Hull (R), Sam Bregman (D) and Steve Lanier (R)

State House of Representatives

- All 70 Districts
- 19 contested primaries: 14 D incumbents, 2 Open D, 2 R incumbents, & 1 Open R
- 31 contested general election

State Senate (Every Four Years/next 2028)

Grassroots Advocacy

What is it?

Grassroots advocacy is the act of a constituent communicating ideas and opinions to their government officials

Grassroots Advocacy

NMHCA/NMCAL Member

- Active participation
 - Advocate for your facility(s), you staff, residents, and families
 - Be the subject matter expert
 - Unique access opportunity
 - Patient, trusted, reliable
 - NMHCA/NMCAL Support
-

Grassroots Advocacy

Interim vs. Legislative Session

Roundhouse Advocacy

- 30 Day vs. 60 Day Session
- No appointments
- Legislative Offices
- House and Senate Chamber
- Hallway/Arm Pull
- Meeting outside Roundhouse

Interim Session Advocacy

- Postal mail and email
 - In-person
 - Facility Visit/Tour
 - Interim Committees
 - Campaign events
 - Other opportunities
-

Interim Session Advocacy



Grassroots Advocacy

Legislator Contact Information

Identify Legislator - House & Senate

1. www.nmlegis.gov
2. Under “Legislators” Tab click *Find My Legislator*
3. Determine House or Senate then click *Search by Your Address*
4. Enter Your/Facility address
5. Click legislators name for information (office & mailing info, committee info.)

ID Nearby Legislators – House & Sen.

1. www.nmlegis.gov
 2. Under “Legislators” Tab click *Find My Legislator*
 3. Determine House or Senate then click *Search by Your Address*
 4. Enter Your/Facility address
 5. Scroll to map, zoom in on tear-drop map marker, click shaded district boundaries next to district of map marker
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Grassroots Advocacy

Effective Written Communication

Postal Mail and Email

- Issue specific advocacy
 - Succinct and to the point
 - One-page letter or email equivalent
 - Not verbose, repetitive, argumentative
- Regular Communication/Updates
 - Newsletter, annual report, other

Who: Intro. You and your facility (census, employment number, Medicaid% if appropriate, unique facts)

Why: clearly state issue and position

What: request specific legislative action

Where: Describe impact of issue on residents, families, facility & employees

Grassroots Advocacy

In-Person Meeting

Scheduled In-Person Meeting

- Patience and consideration
- Coffee, breakfast, lunch, etc.
- NMHCA/NMCAL can facilitate
- Maybe with staff

Interim-Committee Meetings

- Softly Scheduled or just show up

Public Service Membership Org.

- Kiwanis, Rotary, Lions Club, etc.
- Non-legislative basis

Campaign Event

- Depending on level of comfort
partisan or nonpartisan
-

Grassroots Advocacy

In-Person Meeting

Who: Intro. You and your facility (census, employment number, Medicaid% if appropriate, unique facts)

Why: clearly state issue and position

What: request specific legislative action

Where: Describe impact of issue on residents, families, facility & employees

Consideration of setting/location, time and schedule - Patience

Stick to FACTS – limit emotional based arguments or unsubstantiated opinions

OK to say you DON'T KNOW

Legislator commitment not likely

Good listener to gather info. and better know legislator

Leave meeting opened ended to allow for future meetings

Grassroots Advocacy

Facility Visit/Tour

Purpose of Facility Tour

- Most legislators don't know long-term care
 - One on one time with legislator
 - Humanizes priority issues
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Grassroots Advocacy

Facility Visit/Tour

Planning Your Tour (Contact NMHCA/NMCAL for Assistance)

- Utilize nmlegis.gov to ID legislator and contact information
- Extend invitation via email/postal mail, telephone may work with staff
- Develop Agenda, plan around event: groundbreaking, new flagpole, Employee Rec.
- Reserve at least 2-hours NOTHING Elaborate
- Notify and inform staff
- Involve residents, families, staff so they can meet the legislator
- If appropriate schedule time for senior leadership meeting
- Led by Administrator w/senior staff support & possible staff interaction on the floor

Grassroots Advocacy

Facility Visit/Tour

Prepare Branded Facility Profile

- Number of resident/clients and employees, and services provide
 - Highlight differences of resident profile (geriatric, behavioral health, complex care, etc.)
 - If appropriate percent of residents/clients on Medicaid
 - If appropriate facility paid taxes: federal, state, local, and property
 - Number of vendors who support your facility (highlight local)
 - Unique services provided to employees, residents or the community
 - Community service support
-

Grassroots Advocacy

Facility Visit/Tour

Conducting Facility Tour

- Led by administrator and highlight daily operations
 - show realities of resident care and compliance with changing standards
 - Emphasize quality based improvements throughout the visit
 - Utilized a facility area that impacted by changing compliance standards or interpretations to discuss costs of achieving compliance
 - When appropriate discuss issue that make it difficult to operate
-

Grassroots Advocacy

Facility Visit/Tour

Including Media

- Possible but not necessary
 - Contact NMHCA/NMCAL for assistance
 - Contact legislator first for approval
 - Consider media access
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Grassroots Advocacy

Thank You Note

Send a Thank You Note after substantive interaction

- Appreciate time commitment
 - Offer to provide insight and assistance regarding LTC
 - Look forward to future interactions
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NMHCA/NMCAL Advocacy Contacts

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