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## FISCAL IMPACT REPORT

**SPONSOR** Reps. Lujan and Garratt/Sen. Stewart **LAST UPDATED** \_\_\_\_\_  
**ORIGINAL DATE** 2/16/25  
**SHORT TITLE** Sexual Assault Services Programs **BILL**  
**NUMBER** House Bill 306  
**ANALYST** Sanchez

### APPROPRIATION\* (dollars in thousands)

FY25	FY26	Recurring or Nonrecurring	Fund Affected
	\$2,000.0	Nonrecurring	General Fund

Parentheses ( ) indicate expenditure decreases.

\*Amounts reflect most recent analysis of this legislation.

### Sources of Information

LFC Files

#### Agency Analysis Received From

Crime Victims Reparation Commission (CVRC)

Department of Health (DOH)

#### Agency Analysis was Solicited but Not Received From

Department of Finance and Administration (DFA)

## SUMMARY

### Synopsis of House Bill 306

House Bill 306 (HB306) appropriates \$2 million from the general fund to the Crime Victims Reparation Commission (CVRC) for the purpose of providing grants to sexual assault services programs.

This bill does not contain an effective date and, as a result, would go into effect 90 days after the Legislature adjourns if enacted, or June 20, 2025.

## FISCAL IMPLICATIONS

The appropriation of \$2 million contained in this bill is a nonrecurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of FY26 shall revert to the general fund.

## SIGNIFICANT ISSUES

The Department of Health (DOH) has identified an additional \$400 thousand in funding needs for professional service contracts related to community-based sexual violence prevention programs; these are not covered by the bill's current appropriation.

CVRC has historically relied on nonrecurring state appropriations and federal funding to support its services. A reduction in federal funding may impact the availability of sexual assault services, including counseling and forensic examinations, particularly in rural communities. Service providers may experience increased wait times for victims seeking assistance, and some individuals may have to travel significant distances to access services.

Research indicates that the economic costs associated with sexual violence—including direct expenses for victim care, law enforcement, and judicial processes, as well as indirect costs such as lost productivity—can be significant. In prior years, CVRC has provided financial assistance to victims, but the demand for services continues to grow. If nonrecurring funding is not reappropriated in future years, CVRC and service providers may need to seek alternative funding sources to maintain current service levels.

According to data from DOH and the New Mexico Coalition of Sexual Assault Programs, demand for these services has increased in recent years. In FY24, over 5,500 survivors received sexual assault services in New Mexico, representing a 19 percent increase from the previous year. Services include crisis intervention, forensic medical examinations, advocacy, and counseling.

State and national research indicates that sexual violence can have long-term physical, psychological, and economic impacts on survivors. Studies have identified associations between sexual assault and increased risks of mental health conditions, substance use disorders, and chronic health issues. Additionally, national data suggest that survivors may face barriers in accessing services, particularly in rural areas where specialized providers are limited.

The bill's funding is nonrecurring, meaning ongoing support for sexual assault services would require future appropriations or alternative funding sources. CVRC has noted that a reduction in federal funding may affect service availability, and service providers have reported challenges in maintaining capacity to meet growing demand. If funding fluctuations occur, there may be impacts on service accessibility, particularly in regions with fewer providers or longer travel distances for survivors seeking assistance.

## PERFORMANCE IMPLICATIONS

CVRC and DOH have established performance measures related to sexual assault response, including service utilization rates, availability of forensic medical examinations, and participation in evidence-based prevention programs. If implemented, the appropriation could contribute to expanded data collection and reporting on these measures, providing insight into service accessibility and program effectiveness.

The impact of additional funding may also be reflected in changes to service response times, the number of individuals receiving counseling and advocacy support, and the ability of service

providers to meet growing demand. DOH has indicated that performance metrics specific to youth sexual assault prevention programs may be used to assess the reach and effectiveness of prevention strategies over time. Additionally, given the nonrecurring nature of the appropriation, the ability to sustain service levels beyond FY26 could be a factor in long-term performance trends.

## **ADMINISTRATIVE IMPLICATIONS**

CVRC indicated it has the administrative capacity to manage the additional appropriation and distribute funds to service providers without requiring significant structural changes. CVRC has experience administering state and federal funding for victim services and has existing partnerships with organizations that provide sexual assault response and prevention programs. Given the agency's reliance on multiple funding sources, ongoing administrative oversight may be necessary to ensure alignment with federal and state funding requirements.

For DOH, any expansion of sexual assault prevention programs may require adjustments in contract management and performance tracking. If additional funding for prevention initiatives is pursued separately, DOH may need to allocate administrative resources to support grant management and compliance. The extent of administrative workload changes would depend on the volume of new contracts issued and the level of reporting required for performance monitoring.

## **OTHER SUBSTANTIVE ISSUES**

HB306 does not specify how the appropriation should be allocated among different service types, such as crisis intervention, forensic medical examinations, legal advocacy, or prevention programs. CVRC will determine fund distribution based on program needs and provider capacity. If certain service areas experience higher demand, funding allocations may require adjustments.

The reliance on nonrecurring appropriations for sexual assault services may also have implications for long-term program planning. Service providers dependent on state funding may face challenges in workforce retention and service continuity if appropriations fluctuate from year to year. In particular, rural providers and organizations offering specialized services may encounter difficulties sustaining operations if funding is not consistent.

Additionally, broader trends in sexual assault reporting and service utilization could influence the demand for these programs. Factors such as public awareness initiatives, changes in law enforcement procedures, and evolving victim assistance policies may affect the number of individuals seeking services. If demand continues to increase, additional funding considerations may arise in future budget cycles. While HB306 addresses immediate funding needs for FY26, ongoing evaluation of service capacity and funding availability may be necessary to align resources with demand over time.

## **POSSIBLE QUESTIONS**

- How will the Crime Victims Reparation Commission (CVRC) allocate the \$2 million appropriation among different service areas, such as crisis intervention, forensic medical

exams, legal advocacy, and prevention programs?

- What factors contributed to the recent increase in demand for sexual assault services, and how does this funding address those trends?
- Given that this is a nonrecurring appropriation, what funding sources will be available in future years to sustain these services if demand remains high?
- How will CVRC and DOH track and measure the impact of this funding on service availability and victim outcomes?
- What specific administrative or reporting requirements will be placed on service providers receiving funds through this appropriation?
- Are there geographic disparities in access to sexual assault services, and how will this funding help address those gaps, particularly in rural areas?
- How has the reduction in federal funding impacted service providers, and will this appropriation be sufficient to offset those reductions?

SS/rl