

LFC Requestor: Self Assigned

2025 LEGISLATIVE SESSION
AGENCY BILL ANALYSIS

Section I: General

Chamber: House

Category: Bill

Number: 448

Type: Introduced

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Sponsor(s): Meredith A. Dixon, Janelle Anyanonu, Cristina Parajon and Michael Padilla

Short Title: Office of Housing Planning & Production

Reviewing Agency: Agency 665 - Department of Health

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Section II: Fiscal Impact

APPROPRIATION (dollars in thousands)

Appropriation Contained		Recurring or Nonrecurring	Fund Affected
FY 25	FY 26		
\$0	\$0	NA	NA

REVENUE (dollars in thousands)

Estimated Revenue			Recurring or Nonrecurring	Fund Affected
FY 25	FY 26	FY 27		
\$0	\$0	\$0	NA	NA

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY 25	FY 26	FY 27	3 Year Total Cost	Recurring or Non-recurring	Fund Affected
Total	\$0	\$0	\$0	\$0	NA	NA

Section III: Relationship to other legislation

Duplicates: SB205

Conflicts with: None

Companion to: None

Relates to: SB190

Duplicates/Relates to an Appropriation in the General Appropriation Act: None

Section IV: Narrative

1. BILL SUMMARY

a) Synopsis

House Bill 448 (HB448) would create an Office of Housing Planning and Production, which will be attached to the Department of Finance and Administration (DFA) to provide administrative services for that office. Its purpose will be to 1) reduce housing costs, 2) increase statewide housing availability including for low-income households, 3) maximize resources to address housing needs, and 4) work on several other areas related to housing supply. It will also track progress through goal setting and data collection at least annually. Key actions include working with local governments to set goals for meeting housing needs across income levels.

Is this an amendment or substitution? Yes No

Is there an emergency clause? Yes No

b) Significant Issues

The issue of New Mexicans experiencing homelessness is a major challenge across the state. While this problem has multiple causes, insufficient housing for low-income persons and families is certainly a significant contributor.

Housing instability has been associated with poorer health outcomes ([HHS Office of Disease Prevention and Health Promotion - Healthy People 2030 - Housing Instability](#)). Persons experiencing homelessness (PEH) are at increased risk of infectious diseases, chronic health conditions, serious mental illness, and premature death. Homelessness has negative impacts across the lifespan. Pregnant women experiencing homelessness are more likely to deliver a baby preterm or with low birthweight ([Homelessness During Pregnancy: A Unique, Time-Dependent Risk Factor of Birth Outcomes](#)). Children with unstable housing are at higher risk of having inadequate nutrition, were sick twice as often as children with stable housing, and were twice as likely to have a learning disability ([HHS - Administration for Children and Families](#)).

Housing insecurity is a significant challenge for many New Mexicans. In 2023, 15% or an estimated 245,000 adults experienced a time in the previous year where they could not pay their mortgage, rent, or utility bills. One in every four New Mexican adults with a disability and one in every four New Mexican American Indian or Alaska Native adults experienced housing insecurity. Compared to stably housed adults, those with housing insecurity were 2.5 times more likely to experience frequent mental distress, 4 times more likely to have considered suicide, and 6 times more likely to experience food insecurity (2023 NM Behavioral Risk Factor Surveillance System, NMDOH). In 2023, the New Mexico Youth Risk and Resiliency Survey found that 1.4% or an estimated 1,428 New Mexico high school students and 1.6% or an estimated 1,155 New Mexico middle school students experienced homelessness. Compared to other high school students in the state, youth experiencing homelessness were 4 times more likely to have gone hungry, 12 times more likely to have been injured in a suicide attempt, and 65 times more likely to have used heroin.

The national standard for estimating homelessness is the Department of Housing and Urban Development (HUD) annual Point-In-Time (PIT) Count. In 2024, the department reported an 18% increase in homelessness nationally from the prior year ([HUD - The 2024 Annual Homelessness Assessment Report](#)). New Mexico experienced a 20.5% increase from 2023 to 2024. The New Mexico Coalition to End Homelessness (NMCEH) coordinates the PIT count for the state and reported in 2024 there were 2,740 PEH in Albuquerque with 1,231 of those PEH being unsheltered ([2024 New Mexico Point-in-Time Count](#)). In the remainder of the state where the count was conducted, there were 1,909 PEH with 1,011 of those PEH being unsheltered. About 8% of the unsheltered homeless in the state reported being a US veteran. There were 64 persons in the unsheltered count of the state who were minors under 18 years old. The report also found significant racial/ethnic disparities in the unsheltered homeless counts with the American Indian/Alaska Native, Black/African American/African, and Native Hawaiian/Pacific Islander populations being disproportionately represented. A soon to be released report from NMDOH reports there are 2-4 times more PEH statewide than were counted by the annual Point-In-Time count, demonstrating a greater need of services in the state than current estimates. From 2019 to 2023, 30,882 unique individuals were found to have indications of homelessness in their healthcare record.

The creation of an Office of Housing Planning and Production, as proposed in HB448, would establish a centralized program to address housing costs, availability, and the underlying factors which make housing difficult to attain for individuals of lower socio-economic status. The office would identify state and federal resources to mitigate housing shortages, particularly for lower-income households. A centralized model would improve efficiency by streamlining data collection, enhancing coordination between state agencies addressing housing and homelessness, supporting local and tribal governments housing initiatives, and working to modernize outdated regulations which could be considered restrictive when creating new housing developments in high-need communities.

2. PERFORMANCE IMPLICATIONS

- Does this bill impact the current delivery of NMDOH services or operations?
 Yes No

- Is this proposal related to the NMDOH Strategic Plan? Yes No

Goal 1: We expand equitable access to services for all New Mexicans

Goal 2: We ensure safety in New Mexico healthcare environments

Goal 3: We improve health status for all New Mexicans

Goal 4: We support each other by promoting an environment of mutual respect, trust, open communication, and needed resources for staff to serve New Mexicans and to grow and reach their professional goals

Creating an office to increase housing options would likely reduce homelessness and thereby improve health outcomes for this population while expanding equitable access to services for all New Mexicans. It would improve the health status of New Mexicans experiencing housing insecurity and homelessness.

3. FISCAL IMPLICATIONS

- If there is an appropriation, is it included in the Executive Budget Request?
 Yes No N/A
- If there is an appropriation, is it included in the LFC Budget Request?
 Yes No N/A
- Does this bill have a fiscal impact on NMDOH? Yes No

4. ADMINISTRATIVE IMPLICATIONS

Will this bill have an administrative impact on NMDOH? Yes No

5. DUPLICATION, CONFLICT, COMPANIONSHIP OR RELATIONSHIP

HB448 duplicates SB205.

HB448 relates to SB190, which creates the Homelessness Reduction Division of the Health Care Authority (HCA).

6. TECHNICAL ISSUES

Are there technical issues with the bill? Yes No

7. LEGAL/REGULATORY ISSUES (OTHER SUBSTANTIVE ISSUES)

- Will administrative rules need to be updated or new rules written? Yes No
- Have there been changes in federal/state/local laws and regulations that make this legislation necessary (or unnecessary)? Yes No
- Does this bill conflict with federal grant requirements or associated regulations?
 Yes No
- Are there any legal problems or conflicts with existing laws, regulations, policies, or programs? Yes No

8. DISPARITIES ISSUES

Among the 30,882 PEH identified to have indications of homelessness through their health records, 66% were male. By race and ethnicity categories, 39% of the identified PEH were Hispanic, 39% were White, 15% were American Indian/Alaska Native, 6% were Black/African American, and <1% were Asian/Pacific Islander. The American Indian/Alaska Native and Black/African American populations were disproportionately represented in this study. The disparate representation likely indicates many structural and historical health inequities impacting these populations and leading to higher rates of homelessness. The age distribution of PEH in the study skewed toward the middle-aged group 25-44 years (46%). Additionally, 869 infants and children under age 5 (3%) were identified among the cohort. Over the five-year period, these 30,882 PEH accounted for 182,689 visits for an average of 5.9 visits per PEH. Comorbidities that were commonly found among their visits included alcohol-related disorders, stimulant-related disorders, musculoskeletal pain, schizophrenia, and infectious diseases. The creation of an office and in particular the work to coordinate efforts with tribal and local governments would likely lead to decreased housing and health disparities among PEH.

9. HEALTH IMPACT(S)

Persons experiencing homelessness are a vulnerable population and are at greater risk for chronic disease, infectious diseases, serious mental illness, substance use disorders, and premature death. The UNM PICKUP study conducted in coordination with NMDOH revealed that only 18% of respondents said their health was excellent or very good, while another 26% said good; this may relate to the fact that while 74% reported having health insurance, only 42% noted that they have a place to receive medical care. Many persons noted health issues, with high blood pressure (30%), respiratory challenges (asthma, chronic bronchitis, emphysema or COPD at 22%) or heart problems/stroke (16%) being the most common.

Providing more comprehensive support to those experiencing housing instability or homelessness would have positive health impacts and would strengthen the communities of New Mexico. This would be accomplished by facilitating linkage and reducing barriers to both health care and behavioral health services.

People with chronic health conditions and disabilities are at an increased risk of losing their housing, and those who are unsafely housed are at an increased risk for negative health outcomes ([Network for Public Health Law - The Public Health Implications of Housing Instability, Eviction, and Homelessness](#)).

10. ALTERNATIVES

None.

11. WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL?

If House Bill 448 (HB448) is not enacted, there would not be a new Office of Housing Planning and Production created. There would not be a mechanism to conduct its primary activities including 1) reduce housing costs, 2) increase statewide housing availability including for low-income households, 3) maximize resources to address housing needs, and 4) work on several other areas related to housing supply.

12. AMENDMENTS

None.