Fiscal impact reports (FIRs) are prepared by the Legislative Finance Committee (LFC) for standing finance committees of the Legislature. LFC does not assume responsibility for the accuracy of these reports if they are used for other purposes.

FISCAL IMPACT REPORT

	Reps.	Ortez and Szczepanski/Sen.	LAST UPDATED	
SPONSOR	Stefan	ics	ORIGINAL DATE	1/31/25
		Statewide Public Health and Climate	BILL	
SHORT TIT	LE	Program	NUMBER	House Bill 108

ANALYST Klundt

APPROPRIATION* (dollars in thousands)

FY25	FY26	Recurring or Nonrecurring	Fund Affected
	\$1,100.0	Recurring	General Fund

Parentheses () indicate expenditure decreases.

*Amounts reflect most recent analysis of this legislation.

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT*

Agency/Program	FY25	FY26	FY27	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total	No fiscal impact	\$106.96	\$1,206.96	\$1,313.86	Recurring	General Fund

Parentheses () indicate expenditure decreases.

*Amounts reflect most recent analysis of this legislation.

Sources of Information

LFC Files

Agency Analysis Received From Department of Health (DOH)

SUMMARY

House Bill 108 (HB108) would establish the Statewide Public Health and Climate Program within the Department of Health. The program aims to enhance interagency collaboration to address health equity, mitigate health impacts of extreme weather, and support climate change adaptation efforts across New Mexico. Key responsibilities include assisting local communities in developing action plans to build health resilience, providing expertise to aid county and tribal public health councils in climate-related planning and response, and facilitating engagement with communities most affected by extreme weather events. The bill appropriates \$1.1 million from the general fund for FY26 to support the program's implementation.

FISCAL IMPLICATIONS

The appropriation of \$1.1 million contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of FY26 shall revert to the general fund. Although this bill does not specify future appropriations, multiyear appropriations,

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particularly if used to fund services and those services perform well, create an expectation the program will continue in future fiscal years; therefore, this cost could become recurring after the funding period.

DOH provided the following:

To fulfill the requirements of this bill, the following personnel and associated costs would be required annually from FY26 through FY30:

Personnel Services & Employee Benefits (PS&EB)

Program Manager (Epidemiologist Supervisor) Pay Band 80 - \$88,792 (midpoint) x 1 FTE x 1.39 (benefits)	\$123,421
Health Promotion Coordinator (Soc/Comm Coordinator A) Pay Band 70 - \$71,188 x 1 FTE x 1.39	\$98,951
Tribal Liaison (Soc/Comm Coordinator Supervisor) Pay Band 75 - \$79,990 x 1 FTE x 1.39	\$111,186
Climate Change Epidemiologist (Epidemiologist Advanced) Pay Band 75 - \$79,990 x 1 FTE x 1.39	\$111,186
Health Equity Specialist (Soc/Comm Coordinator A) Pay Band 70 - \$71,188 x 1 FTE x 1.39	\$98,951
Climate Change Evaluator (Epidemiologist O) Pay Band 70 - \$71,188 x 1 FTE x 1.39	\$98,951
Medical Director Consultant (Programmatic Physician Manager) Pay Band XC - \$214,788 x 0.5 FTE x 1.39	\$149,278
Sub-total	\$791,925
Office Setup	
Computer setup - \$2,500 per staff x 7	\$17,500
Phones – Cell phone \$600 per staff per year x 7	\$4,200
Duplication and Printing - \$500 per staff per year x 7	\$3,500
IT Costs – Enterprise costs, help desk, email, \$2000 per staff annually x 7	\$14,000
Sub-total	\$39,200
Office Space	
ERD office space: 7 cubicles x \$ 500 per cubicle per month x 12	\$42,000
ERD office security: \$500 per month x12	\$6,000
Sub-total	\$48,000
Supplies	
Office Supplies - \$400 per staff per year x 7	\$2,350
Air filters, water testing supplies, air quality monitors	\$85,000
Sub-total	\$87,350
<u>Travel Costs - In-state Travel and accommodations</u>	
Mileage – 30 trips x 500 miles (annually) x \$0.58	\$8,700
Per diem - 30days x \$151 x 4 staff	\$18,120
Sub-total	\$26,820
Administrative Costs	
Indirect costs @ 18.7%	\$213,661
Total	\$1,206,956

This is an additional \$106,956 to the proposed \$1,100,000 appropriated in the bill. The additional cost is due to salary increases as a result of the implementation of the FY24 and FY25 Classified Service Salary Schedule. Further, the bill appropriates only one year of funding for the program staff. This should be a recurring cost to first establish and then maintain a public health and climate program.

Funding for this program is not included in either the LFC or executive recommendations for DOH.

SIGNIFICANT ISSUES

DOH provided several research summaries and policy recommendations regarding climate change and this bill, reporting:

Health Impacts in New Mexico:

- A 2020 NM Epidemiology Report projected heat-related hospitalizations and emergency visits will double by 2030.
- In summer 2023, heat-related emergency department (ED) visits rose 49 percent from 2022, while heat-related deaths increased nearly fivefold between 2013 and 2022.
- Without dedicated climate funding, the Environmental Public Health Tracking (EPHT) program has independently monitored real-time heat- and cold-related illness dashboards.
- Wildfires, exacerbated by warmer, drier conditions, led to record-breaking fires in 2022, burning 660,000+ acres and increasing air-quality-related respiratory ED visits by 18 percent.
- Rising temperatures also contribute to vector-borne diseases (e.g., Valley Fever, West Nile Virus) and waterborne illnesses while impacting mental health.

Need for a Statewide Public Health & Climate Program:

- The EHEB collaborates with federal and state agencies on climate-related health messaging and response efforts.
- New Mexico is not currently funded under the CDC's Climate-Ready States & Cities Initiative, unlike states such as Washington and Michigan, which have established public health climate programs.
- A state-funded Public Health and Climate Program would enhance data collection, response coordination, and climate resilience efforts, working alongside NM EPHT to track and address climate-related health risks.

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