Administrative Office of the Courts

Supreme Court of New Mexico

Karl W. Reifsteck, Director
Sarah Jacobs, Deputy Director

202 East Marcy Street
Santa Fe, NM 87501
(505) 827-4800

September 30, 2026

Senator George Munoz
Senator Linda Lopez
Senator Joseph Cervantes

Director Charles Sallee
Legislative Finance Committee
325 Don Gaspar Ste 101
Santa Fe, NM 87501

Representative Nathan Small
Representative Liz Thomson
Representative Christine Chandler

Secretary Kari Armijo
New Mexico Health Care Authority
P.O. Box 2348
Santa Fe, NM 87504-2348

via email

Re: September Quarterly Report - Behavioral Health Reform and Investment Act (BHRIA)

As of September 30, 2026, 11 of the 13 Behavioral Health Regional Plans have received formal approval from the Behavioral Health Executive Committee. This milestone was achieved through the sustained, coordinated efforts of regional stakeholders and planning committees, who worked together closely throughout every stage of planning development. Their ongoing engagement has been instrumental in bringing this milestone to fruition, reflecting a shared commitment to a thorough and collaborative process at every step.

The two remaining plans are under final review and are expected to come before the Behavioral Health Executive Committee (BHEC) for a vote on October 6, 2026. The table below shows each region and the status of their Regional Plan.

Region	Regional Plan Status
Region 1	Approved by BHEC 7/9/26
Region 2	Approved by BHEC 4/23/26
Region 3	Approved by BHEC 9/2/26
Region 4	Pending BHEC final approval
Region 5	Approved by BHEC 8/14/26
Region 6	Approved by BHEC 8/14/26
Region 7	Approved by BHEC 8/14/26
Region 8	Approved by BHEC 9/2/26
Region 9	Approved by BHEC 8/14/26

Region 10	Approved by BHEC 9/2/26
Region 11	Approved by BHEC 8/14/26
Region 12	Pending BHEC final approval
Region 13	Approved by BHEC 9/2/26

The 11 approved plans have been posted to the University of New Mexico Behavioral Health Technical Assistance Center (UNM-BHTAC) repository website, which serves as the repository for all BHRIA-related information, reports, and plans. The website may be accessed here: https://hsc.unm.edu/medicine/departments/psychiatry/bhria/

Transitioning AOC Planning to HCA Implementation

AOC has supported Accountable Entities (AEs) in transitioning from the BHRIA planning phase, coordinated by the Administrative Office of the Courts (AOC), to the implementation phase, coordinated by the Health Care Authority (HCA) and UNM-BHTAC. AOC has served as the primary state contact throughout regional planning. HCA is now the primary contact as regional plans are submitted and approved.

AOC Statutory Requirements

Requirement	Status
§24A-10-4(A) Coordinate regional planning	As of Sept. 2026, 11 of 13 regional plans approved by BHEC; Regions 4 and 12 scheduled for BHEC vote Oct. 6, 2026.
§24A-4-10(E) Distribute approved plans	Approved plans distributed to the Legislature, LFC, HCA, CYFD, DOH, and DFA, and posted to the UNM-BHTAC website.
§24A-10-4(H) Legislative/HCA reporting	Quarterly reports (Sept. 30 & Dec. 31, 2026; Mar. 31 & Jun. 30, 2027)

AOC Statewide Contacts & Consultants

- Pam Trujillo (Statewide BH Program Manager) remains the primary AOC point of contact; Director Karl Reifsteck (BHRIA Executive Committee Member).
- Active BH Consultants:
  - Dr. Royleen Ross; concluding upon tribal priority plan submissions to HCA
  - Dr. Bronwyn Neeser; concluding October 30, 2026
- Former BH Consultants:
  - Pulling Through Together LLC, Bryce Pittenger - contract ended June 30, 2026
  - NM Tribal Behavioral Health Association, Sindy Sacoman - contract ended June 30, 2026
  - Alliance of Health Councils - contract ended June 30, 2026
  - Noonen & Martinez Consulting, LLC - contract ended June 30, 2026
  - Vox Optima LLC - contract ended June 30, 2026

HCA Behavioral Health Services Division

Josh Swatek, Deputy Director of BH Transformation and Innovation; Bianca Foppert, BH Regional Director (oversees four Regional Coordinators); Chastity Sandoval, HCA Tribal Liaison.

BHSD Contact	Supporting Behavioral Regions	Office Location	Email
Camie Willetto	2, 11, & 13	Farmington	Camie.Willetto@hca.nm.gov
Francine Arguello	1, 4, 8, & 10	Las Vegas	Francine.Arguello2@hca.nm.gov
Laurie Dudek	5, 9, & 12	Roswell	Laurie.Dudek@hca.nm.gov
Silvia Robles	3, 6, & 7	Las Cruces	Silvia.Robles1@hca.nm.gov

UNM Behavioral Health Technical Assistance Center & Project ECHO

UNM-BHTAC will be available to provide technical assistance to AEs throughout implementation. UNM-BHTAC serves as the centralized repository for BHRIA information, supports alignment with state standards and workforce development, and provides technical expertise to prioritize disproportionately impacted communities. Project ECHO hosts the BHRIA Regional Implementation Collaborative on the 2nd and 4th Tuesday of each month, 12:00–1:00 pm via Zoom, with short didactic presentations and peer case discussions.

Tribal (PTN) Engagement

On December 2, 2025, HCA held a formal Tribal Consultation. PTNs may participate in BHRIA in the following ways: (1) sign onto the Regional Plan as a signatory; (2) submit a Tribal Priority Plan as an addendum tied to the Region's priorities; (3) do both; or (4) elect not to participate at this time (existing appropriations remain subject to House Bill 2 reversion dates). Tribal Priority Plan process (adopted by BHEC Aug. 14, 2026): PTN submits Tribal Priority Plan to HCA at BHRIAsupport@hca.nm.gov and (cc AOC: aocpvt@nmcourts.gov) → HCA routes to SMEs → BHEC votes to approve/conditionally approve/modify; this allows a pathway for HCA to directly contract with PTNs who submit an addendum to the regional plan. On September 2, 2026, after reviewing multiple funding scenarios, the BHEC adopted a modified approach that keeps the total PTN set-aside but allocates it via an equal base amount plus a needs-based population calculation. The AOC will continue to work directly with any PTN submitting a tribal priority plan to ensure ongoing support and technical assistance is available during the planning phase.

The table below shows the revised tribal set-aside funding formula:

Behavioral Health Executive Committee amended Native American formula as of 09/02/26	$ 10,445,726	33.0% $3,447,090		67.0% $6,998,637	Total $10,445,726	
Entity	Region	Equal Base Share	Population	Need-Adjusted	Total Tribal Allocation	Region Sum
Jicarilla Apache Nation Reservation and Off-Reservation Trust Land, NM	1	$156,686	2.64%	$184,463	$341,149	
Nambe Pueblo and Off-Reservation Trust Land, NM	1	$156,686	0.81%	$56,491	$213,177	
Ohkay Owingeh, NM	1	$156,686	4.96%	$347,467	$504,153	
Pueblo of Pojoaque and Off-Reservation Trust Land, NM	1	$156,686	1.55%	$108,561	$265,246	$ 2,412,329
San Ildefonso Pueblo and Off-Reservation Trust Land, NM	1	$156,686	0.80%	$55,846	$212,532	
Santa Clara Pueblo and Off-Reservation Trust Land, NM	1	$156,686	7.53%	$526,687	$683,373	
Tesuque Pueblo and Off-Reservation Trust Land, NM	1	$156,686	0.51%	$36,013	$192,699	
Isleta Pueblo, NM	2	$156,686	1.48%	$103,648	$260,334	$ 643,885
Sandia Pueblo, NM	2	$156,686	3.24%	$226,865	$383,551	
Fort Sill Apache Indian Reservation, NM	6		0.00%	$0	$0	
Picuris Pueblo, NM	8	$156,686	1.00%	$69,760	$226,446	$ 585,320
Taos Pueblo and Off-Reservation Trust Land, NM	8	$156,686	2.89%	$202,188	$358,874	
Navajo Nation Reservation and Off-Reservation Trust Land, AZ--NM--UT (part	11	$156,686	50.06%	$3,503,345	$3,660,031	
Ute Mountain Reservation and Off-Reservation Trust Land, CO--NM--UT (part	11		0.00%	$0	$0	$ 4,228,976
Zuni Reservation and Off-Reservation Trust Land, NM--AZ (part)	11	$156,686	5.89%	$412,260	$568,946	
Mescalero Reservation, NM	12	$156,686	2.68%	$187,692	$344,378	$ 344,378
Acoma Pueblo and Off-Reservation Trust Land, NM	13	$156,686	2.55%	$178,459	$335,145	
Jemez Pueblo, NM	13	$156,686	1.40%	$97,803	$254,489	
Laguna Pueblo and Off-Reservation Trust Land, NM	13	$156,686	3.14%	$219,830	$376,516	
Pueblo de Cochiti, NM	13	$156,686	1.06%	$74,034	$230,720	$ 2,230,838
San Felipe Pueblo, NM	13	$156,686	2.59%	$181,065	$337,751	
Santa Ana Pueblo, NM	13	$156,686	0.48%	$33,600	$190,286	
Santo Domingo Pueblo, NM	13	$156,686	2.22%	$155,227	$311,913	
Zia Pueblo and Off-Reservation Trust Land, NM	13	$156,686	0.53%	$37,333	$194,019	
TOTAL		$3,447,090	100.00%	$6,998,637	$10,445,726	

Health Care Authority Implementation Updates

On the staffing front, the BHRIA team has reached full strength with the recent hiring of the Deputy Director for Behavioral Health Transformation and Innovation. This completes the leadership capacity needed to carry the initiative through its next phase of growth. With all four regional directors, the regional manager, and deputy director positions filled, the team is well positioned to sustain the pace of implementation work ahead.

HCA is also pleased to report that all early access funds have now been provided to the behavioral health regions, marking a significant milestone in getting resources into the communities that need them. HCA has received quarterly reports from all 13 regions on the early access funds. Of the $24,473,462 approved for early access, regions have already encumbered $9,199,325 and spent $2,599,092 to date.

Funding for the regional plans is currently in process, and HCA expects contracts to begin being sent to the regions starting in September. Once funds are fully encumbered, HCA will be able to provide the entire first year of funding similar to what occurred with the early access funds.

With the newly approved Tribal funding allocation, HCA, in coordination with AOC, has been providing information to Pueblos, Tribes, and Nations on the impact of the changes to both process and funding. HCA is working closely with all PTNs to ensure the available options are understood and to provide direct funding mechanisms for both early access and regional plans. As AOC completes its technical assistance, HCA will receive the Tribal plans, submit them to subject matter experts for review, and provide them to the executive committee.

The regional coordinators have been meeting, in coordination with UNM–BHTAC, with the behavioral health regions to better understand their technical assistance needs and to provide information on the services and support available through BHSD. As the BHRIA process moves into the implementation phase, regional coordinators will begin monthly meetings with all behavioral health regions to track the progress of each regional plan.

AOC BHRIA Appropriation - BH Court-Related Projects

For FY26–FY29, the Administrative Office of the Courts (AOC) received funding through the Behavioral Health Reform and Investment Act (BHRIA). In order to access these funds, judicial districts were required to submit proposals to the AOC demonstrating alignment with their Region's BHRIA priorities.

Eligible projects must address regional behavioral health priorities, such as expanding access to services, reducing involvement with the justice system, and improving collaboration among courts, counties, tribal partners, and community-based providers across each behavioral health region. Districts may request funding to sustain current court programs, launch new pilot initiatives, or enhance and expand existing judicial efforts. The AOC has received proposals from 11 out of 13 districts, plus Bernalillo County Metropolitan Court, and is now finalizing a Memorandum of Understanding with each district. The table below provides a summary of what these proposals have included.

New Staff Positions (e.g., BH Navigators, CPSWs, TC Probation Ofcs)	**Contracted Treatment Services**
Enhanced Pretrial Services	**Transportation, Housing, Basic Need Assistance**
Treatment Court Program Incentives	**Court Clinic Implementation**
Reentry Support (Medication/Housing)	**Ancillary Services (e.g., Yoga, Equine Therapy, Acupuncture)**

Behavioral Health Regional Priorities - Thematic Grouping

Matrix below shows which of the 13 regions named each thematic priority among their top 5. A checkmark indicates the region listed a priority falling under that theme (regardless of rank).

Theme	R1	R2	R3	R4	R5	R6	R7	R8	R9	R10	R11	R12	R13
Housing, Transportation & Basic Needs			✓		✓	✓	✓	✓	✓		✓	✓	✓
Crisis Services & Stabilization				✓		✓			✓	✓		✓	✓
Justice System, Diversion & Courts			✓	✓	✓					✓	✓	✓	
Treatment, Recovery & Clinical Access	✓	✓			✓	✓	✓			✓	✓	✓	✓
Workforce Development & Provider Support	✓	✓		✓		✓	✓	✓	✓				✓
Youth, Family & Caregiver Supports	✓		✓	✓	✓	✓	✓	✓	✓	✓		✓	
Prevention, Wellness, Trauma & Cultural Support	✓				✓		✓			✓	✓		
School-Based Supports	✓		✓					✓					
Care Coordination & System Integration			✓	✓				✓			✓		✓
Policy & Social Drivers of Health		✓											

Behavioral Health Executive Committee

Next BHEC Meeting:
Date: Tuesday, October 6, 2026 | 9:00 a.m. to 12:00 p.m.
Location: New Mexico State Capitol
490 Old Santa Fe Trail, Santa Fe, NM 87501, Room 322

Public Entry Notice: The New Mexico State Capitol is currently under construction. All public entry has been moved to the Capitol West Annex. Public participation is encouraged as we work together to build a stronger, more equitable behavioral health system for all New Mexicans.

Join via Zoom

https://us02web.zoom.us/j/88187931642?pwd=CpdgTslz6tvRCxBGZo9BtsJrp9kEcd.1

Meeting ID: 881 8793 1642

Passcode: 440307

Recommendations

1. Procurement and billing-related concerns remain consistent questions from the Accountable Entities. Entities continue to seek clarity on whether the Department of Finance and Administration and the Health Care Authority are advancing solutions to address procurement requirements for services that may otherwise qualify for exemption through the HCA.
    a. There is a clear need for practical strategies that allow local governments to contract for services in an effective and efficient manner. In response, AOC recommends that HCA engage with the Legislature to explore a statewide administrative services solution that Accountable Entities would utilize in the administration of behavioral health services, rather than requiring each Accountable Entity to independently procure these services.

2. Workforce is a priority that is largely consistent across the regions and an issue that must be addressed at the state level. As mentioned in our April and May reports, it is still unclear which entity is responsible for leading the efforts. Section 24A-10-4(I) of BHRIA requires coordination among higher education institutions, the Health Care Authority, the Workforce Solutions Department, and other behavioral health stakeholders to develop a workforce pipeline.

Please visit the UNM BHTAC website, which serves as a centralized, university-based resource and repository for all BHRIA-related information, plans, and reports.