

LFC Requester: Liu



PUBLIC EDUCATION DEPARTMENT
BILL ANALYSIS
2025 REGULAR SESSION

SECTION I: GENERAL INFORMATION

Check all that apply:

Original Amendment
Correction Substitute

Date Prepared: 02/21 /25
Bill No: HB556

Agency Name and Code: PED - 924

Sponsor: Dow/Armstrong

PED Lead Analyst: -

Phone: - **Email:** -

Short Title: "INSTRUCTIONAL SUPPORT PROVIDER" DEFINITIONS

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SECTION II: FISCAL IMPACT

(Parenthesis () Indicate Expenditure Decreases)

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Nonrecurring	Fund Affected
FY26	FY27		
None	None	N/A	NFA

REVENUE (dollars in thousands)

Estimated Revenue			Recurring or Nonrecurring	Fund Affected
FY26	FY27	FY28		
None	None	None	N/A	NFA

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY26	FY27	FY28	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total	None	None	None	N/A	N/A	NFA

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

SECTION III: NARRATIVE

BILL SUMMARY

House Bill 556 (HB556) would amend the definition of “instructional support providers” in the [General Provisions](#) of the Public School Code to include community health workers. HB556 would also update licensure requirements in the [School Personnel Act](#) to require that community health workers obtain appropriate certification from the Public Education Department (PED), as other instructional support providers are required to do.

HB556 does not provide an effective date. Laws go into effect 90 days after the adjournment of the Legislature enacting them, unless a later date is specified. If enacted, this bill would become effective June 20, 2025.

FISCAL IMPLICATIONS

HB556 does not contain an appropriation.

SIGNIFICANT ISSUES

Community health workers are enabled in statute through 2014’s [Community Health Workers Act](#) and obtain certification through the Department of Health. These workers are defined as public health workers who apply “an understanding of the experience, language and culture of the populations that the individual serves and who provides direct services aimed at optimizing individual and family health outcomes, including:

- (1) informal and motivational counseling and education;
- (2) interventions to maximize social supports;
- (3) care coordination;
- (4) facilitation of access to health care and social services;
- (5) health screenings; and
- (6) other services that the secretary defines by rule.”

Currently, re-certification of community health workers requires continuing education units from training provided by NMDOH. Section 22-10A-17 NMSA 1978, providing for PED licensure of instructional support providers, requires that any such provider holding an underlying license from another certifying authority must maintain that license in order for their instructional support license to remain valid. That would be the case for community health workers if the bill should be enacted.

There are currently about [800 community health workers](#) in New Mexico.

PERFORMANCE IMPLICATIONS

The provisions of HB556 would integrate community health workers into schools, potentially improving student well-being and addressing health-related barriers to learning. However, without clear role definitions and structured collaboration with educators, their impact on academic performance may be inconsistent.

If properly implemented, these professionals could possibly contribute to better attendance by addressing students’ health needs at the school site, rather than students having to miss school to get their health needs addressed by offsite providers, but unclear responsibilities or inadequate

training in educational settings could limit their effectiveness in directly supporting instructional outcomes for students.

ADMINISTRATIVE IMPLICATIONS

Administratively, the bill would require schools to establish new protocols for hiring, training, and overseeing community health workers within the existing instructional support system. Schools would need to allocate resources for coordination between community health workers and existing staff, ensuring their roles align with educational goals. It is also an effort to ensure that community health workers have appropriate background checks for working in schools as a matter of safety and understanding of school systems.

The provisions of HB556 would necessitate PED either amending 6.63.3 NMAC, Licensure for Instructional Support Providers Pre K-12 not Covered in Other Rules, or creating a new Part of Chapter 63 of Title 6, addressing separately specific license for community health workers. Separately licensed instructional support providers include school nurses, psychologists, counsellors, social workers, etc.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

Relates to:

- [House Bill 15](#), Health Care Strategic Recruitment Program.
- House Bill 195, School Nurse Salary Tiers & Minimums.
- Senate Bill 345, Teacher & Instructional Support Licensure

TECHNICAL ISSUES

None.

OTHER SUBSTANTIVE ISSUES

Community health workers may be on the low end of salary bands because there is no requirement for this job band to have a degree. Rather, they are certificated individuals. This bill would cause the candidate for licensure to pay for initial licensure under DOH, continuing education, and PED licensure. This may prove burdensome.

ALTERNATIVES

None.

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

None.

AMENDMENTS

None.