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General Information Memorandum

ISD GI 26-13

TO: ISD Employees

FROM: Niki Kozlowski, Acting Deputy Secretary, Health Care Authority

DATE: 03/2/2026

RE: FFY 2026 SNAP Performance Report – First Edition

Attached is the **First Edition of the Supplemental Nutrition Assistance Program (SNAP) Performance Report for FFY 2026**. This report includes all Quality Control (QC) findings received for the review month of October 2025.

The FFY 2026 Performance Goals are as follows:

- Cumulative Payment Error Rate of 6% or better (Payment Accuracy of 94%)
- Cumulative Negative Error Rate of 1% (Case and Procedural Error Rate [CAPER] of 99%)
- Expedite and Non-Expedite application processing timeliness of 95%

If you have any questions or comments regarding this report, please contact Marcos Rivera of the Quality Assessment Bureau via email at HCA.QIS@hca.nm.gov.

Attachment: First Edition SNAP Performance Report for FFY 2026



HEALTH CARE
AUTHORITY

**OCTOBER 2025
PERFORMANCE REPORT**

First Edition

Federal Fiscal Year 2026

Quality Control Review Findings
October 2025

Issued by:
Quality Improvement Section
Quality Assessment Bureau, New Mexico Healthcare Authority

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SNAP Performance Report

SNAP Performance Report: First Edition




This Supplemental Nutrition Assistance Program (SNAP) Performance Report for Federal Fiscal Year (FFY) 2026 includes all Quality Control (QC) findings received for the review month of **October 2025**. A new edition is published monthly; this is the First Edition for FFY 2026.

State Performance Goals

The State reports on three areas and is evaluated by the United States Department of Agriculture (USDA) Food and Nutrition Service (FNS) on these areas:

- **Payment Accuracy**
- **Case and Procedural Error Rate (CAPER)**
- **SNAP Timeliness for Expedite and Non-Expedite**

For FFY 2025, the State Performance Goals are as follows:

<u>Payment Accuracy</u>	<u>CAPER</u>	<u>SNAP Timeliness</u>
		
A cumulative error rate of 6% or better, for a payment accuracy of 94% or better.	A cumulative negative error rate of 1% or better, for a CAPER accuracy of 99% or better.	A timeliness rate of 95% or better for SNAP Expedite and Non-Expedite.

The Payment Error Rate is calculated from the QC Positive Sample cases for the review month, which are the cases actively receiving SNAP benefits. QC reviews the last action taken on the case to certify the eligibility, which could be an Application, Interim Report, or Recertification.

The CAPER Error Rate is calculated from the QC Negative Sample cases for the review month, which are SNAP cases that were denied or terminated during the review month. QC reviews the last action taken to deny/terminate eligibility. The CAPER rate reviews the caseworker action and notices sent to the household. If a notice is not clear and concise and/or does not match the case record, the case is found in error even if the action to deny the case was correct.

Payment Accuracy

State Cumulative Payment Error Rate

The cumulative rates are the ongoing totals and averages taken from the total QC reviews for the fiscal year. These totals contain reviews from the month of **October 2025**.

Ineligible Benefits

\$298 (1.07%) in benefits were incorrectly issued to recipients who were not eligible to receive SNAP benefits.

Total Error Amount

\$3,243 in benefits were incorrectly issued to recipients and is a combination of overpaid, underpaid, and ineligible benefits. This is based on the total cases reviewed by QC and the \$27,908 total benefits issued within those cases.

11.62%

Payment
Error Rate

Underpaid Benefits

\$214 (.77%) in benefits were not appropriately issued to recipients who were eligible to receive a higher amount in SNAP benefits.

Overpaid Benefits

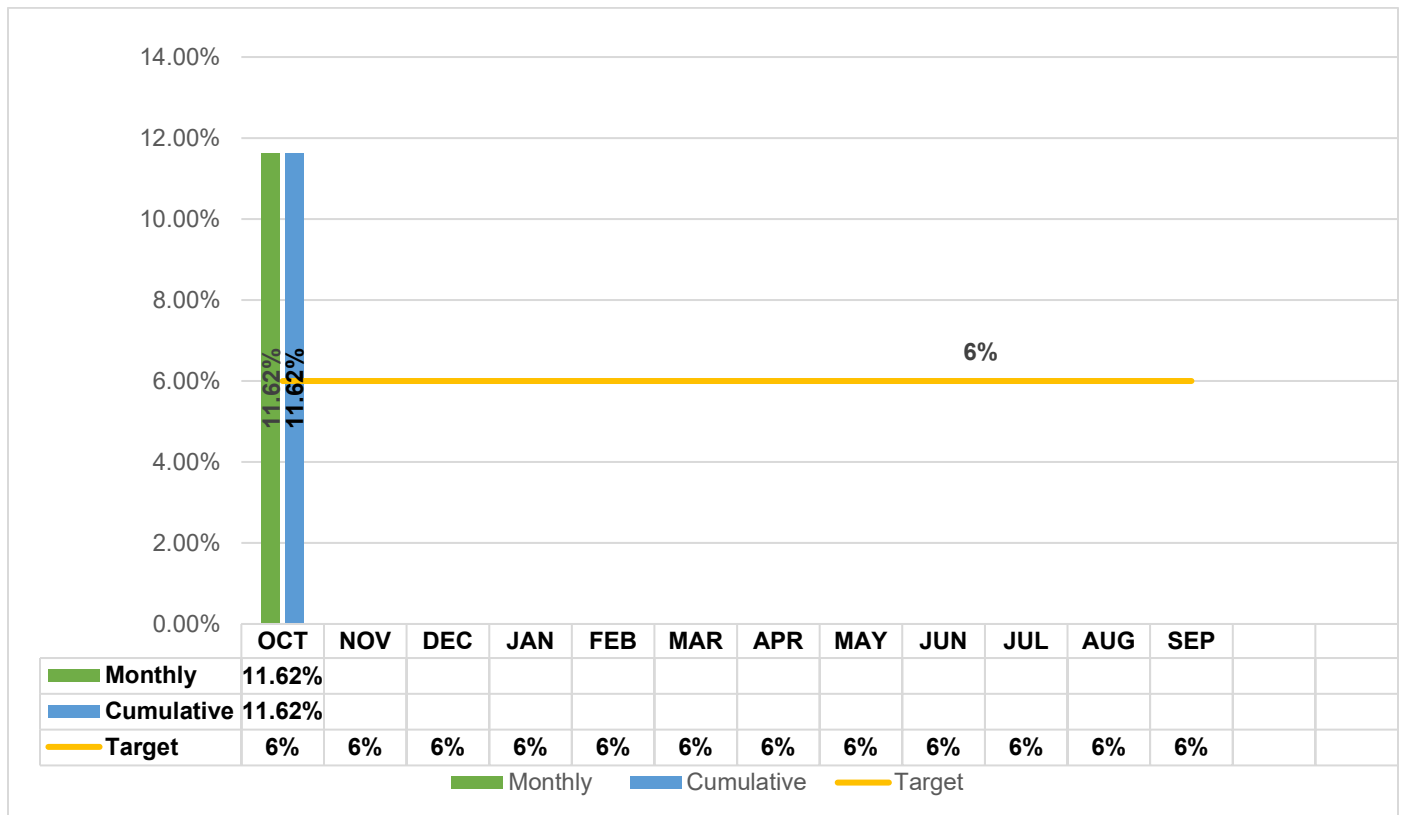
\$2,731 (9.79%) in benefits were incorrectly issued to recipients who were eligible for a lesser amount in SNAP benefits.

Cumulative Totals – October 2025

Total Benefits Paid in QC Sample	\$27,908
Total Error Amount in QC Sample	\$3,243
Total Cases Reviewed by QC	89
Total Cases with Errors	14
Total Correct Cases	75
Total Cases with Overpaid Benefits	12
Total Cases with Underpaid Benefits	1
Total Cases with Ineligible Benefits	1
Cases Dropped (In Sample, not Reviewed by QC)	3

FFY 2026 State Payment Error Rates

Monthly vs. Cumulative Error Rates



Monthly totals are for the individual review month, cumulative totals are the totals of all months added together.

Cumulative Error Breakdown-Are they Agency or Recipient Errors?

21%
Agency Error Rate

These are worker errors in application processing and benefit issuance. Eligible recipients could receive overpayments or underpayments, or ineligible recipients could receive wrongful payments.



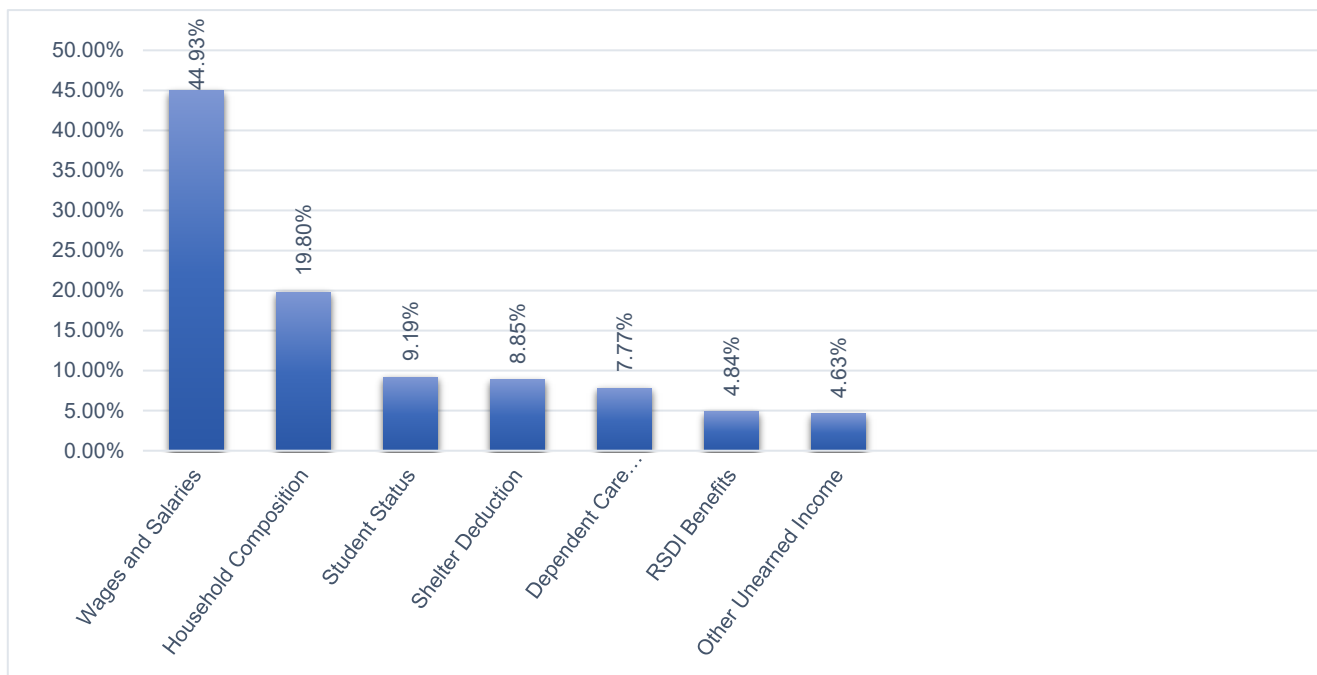
79%
Recipient Error Rate

These are recipient-caused errors in which recipients failed to provide accurate and timely information. Recipients are required to timely report changes to earnings, expenses, and assets.

FFY 2026 SNAP Error Trends – Cumulative Totals

Cumulative Totals –October 2025		
Error Element	Error Amount	Error Percentage
<i>Wages and Salaries</i>	\$1,457	44.93%
<i>Household Composition</i>	\$642	19.80%
<i>Student Status</i>	\$298	9.19%
<i>Shelter Deduction</i>	\$287	8.85%
<i>Dependent Care Deduction</i>	\$252	7.77%
<i>RSDI Benefits</i>	\$157	4.84%
<i>Other Unearned Income</i>	\$150	4.63%
Totals	\$3,243	100.00%

FFY 2026 SNAP Error Trends – Cumulative Totals



FFY 2026 SNAP Payment Error Rates

Regional and County Breakdowns

Percentages are on based total amount of benefits in error divided by the total of benefits issued in the QC sample.

		OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	TOTAL AVG.
Region 1 Northwest Region	Cibola	0.00%												0.00%
	McKinley	0.00%												0.00%
	San Juan	8.93%												8.93%
	Sierra	23.86%												23.86%
	Socorro	0.00%												0.00%
	N. Valencia	12.45%												12.45%
	S. Valencia	0.00%												0.00%
Region 1 Totals		8.80%												8.80%
Region 2 Northeast Region	Colfax	0.00%												0.00%
	Guadalupe	0.00%												0.00%
	Quay	0.00%												0.00%
	Rio Arriba	0.00%												0.00%
	San Miguel	0.00%												0.00%
	Sandoval	31.33%												31.33%
	Santa Fe	0.00%												0.00%
	Taos	0.00%												0.00%
Region 2 Totals		11.11%												11.00%
Region 3 Central Region	NE Bernalillo	11.65%												11.65%
	NW Bernalillo	30.08%												30.08%
	SE Bernalillo	28.74%												28.74%
	SW Bernalillo	5.00%												5.00%
	Torrance	0.00%												0.00%
Region 3 Totals		14.26%												14.26%
Region 4 Southeast Region	Chaves	0.00%												0.00%
	Curry	0.0%												0.00%
	Artesia	0.00%												0.00%
	Carlsbad	4.99%												4.99%
	Lea	70.09%												70.09%
	Lincoln	0.00%												0.00%
	Roosevelt	0.00%												0.00%
Region 4 Totals		10.93%												10.93%
Region 5	E. Dona Ana	0.00%												0.00%
	Grant	0.00%												0.00%
	Luna	0.00%												0.00%
	Otero	0.00%												0.00%
	S. Dona Ana	24.61%												24.61%
	W. Dona Ana	40.93%												40.93%
Region 5 Totals		13.25%												13.25%
State Totals		11.62%												11.62%

SNAP Payment Error Rates Mitigation Strategies

Identified reasons for cases found in error during the month of October

- **Wages and Salaries**
 - Information not reported (Client Caused)
- **Household Composition**
 - Information withheld by client (Client Caused)
 - Information not reported (Client Caused)
 - Reported information disregarded or not applied (Agency Caused)
- **Student Status**
 - Information withheld by client (Client Caused)

Description of activity developed to resolve deficiencies:

Quality Control reviews are referred to the offices where the error was made for review by the worker and their direct supervisor. County Director written responses are required within ten days of the issuance of the QC finding.

Committees and work groups are developed as needed in review of common error trends and system development or error. These teams consist of County Directors and Line Managers from ISD Regions and the Field Support Bureau, representatives from the ASPEN Help Desk, Policy & Program Development Bureau, Quality Assessment Bureau, and the Training Support Bureau. Staff identify the reason for the error and steps to prevent recurring errors and submit inquiries for policy and procedure clarifications.

Accuracy Improvement Month (AIMs) trainings are released weekly to address the top QC error trends. These are released via email announcements to all ISD staff and have a weekly assessment to track competency. The following week, an email will go out to all ISD staff that explains the answers to the assessment to further ensure competency.

Review processes and findings procedures are reviewed and updated consistently to incorporate FNS findings and observations from QC Reviews, Timeliness Technical Assistance Reviews, State Systems Reviews, Payment Accuracy Reviews etc. as well as any new or adjusted legislation, policy, standards or consent decrees as needed or available.

FFY 2026 Case and Procedural Error Rate (CAPER)

State Cumulative Negative Error Rate

Invalid Closure Breakdown

Out of the 14 invalid denials/closures identified, 8 were identified as an incorrect closure, and 6 were identified as incorrect denials.

Negative Error Amount

14 cases out of 74 were found to have been denied or closed incorrectly. These cases were found to have errors with denial/closure reasons, timeliness, and/or notices.

18.92%
CAPER
Error Rate

Incorrect Notices

36% of the incorrect negative actions reported were due to unclear or incorrect notices issued.

Incorrect Denials

64% of the incorrect negative actions reported were due to incorrect denial/closure reasons and/or untimely denials/closures.

Cumulative Totals – October 2025

Total Cases in Sample Pulled for Review	75
Cases Dropped (Sampled not Reviewed by QC)	1
Total Cases Reviewed	74
Total Valid Cases	60
Total Invalid Cases	14

FFY 2026 Top Error Trends in CAPER Reviews

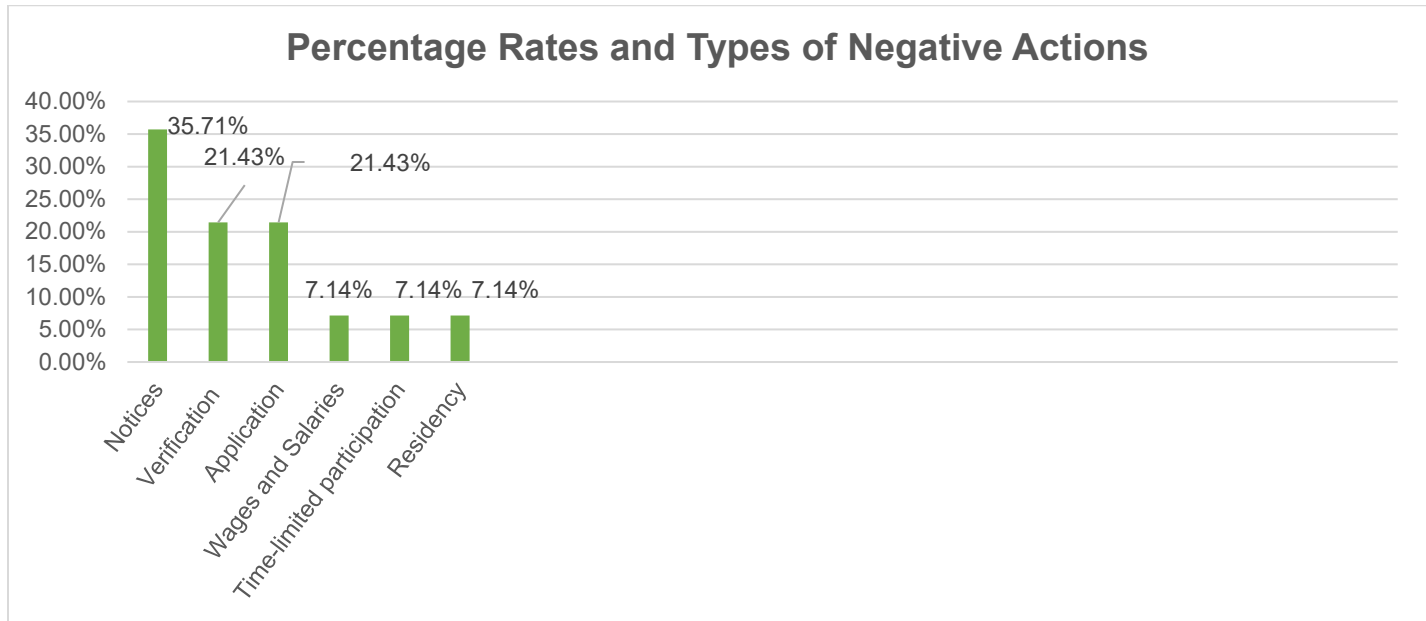
Cumulative Totals from CAPER Reviews: October 2025

Reason for the Error	When the Errors Occurred		Total Errors	Percent of Cases with Error
	Denials	Terminations		
Rank #1 Notices				
Notice was sent to wrong address	0	2	2	14.29%
Policy incorrectly applied – no other codes applicable	0	1	1	7.14%
Notice not clearly understandable	0	1	1	7.14%
Notice was not complete	1	0	1	7.14%
Total	1	4	5	35.71%
Rank #2: Verification				
Improper Denial/Termination – Failure to provide-verification was received or is in case file	0	1	1	7.14%
Policy Incorrectly Applied – No other codes applicable	1	0	1	7.14%
Verification was in case file.	0	1	1	7.14%
Total	1	2	3	21.43%
Rank #3: Application				
Policy incorrectly applied –No other codes applicable	2	0	2	14.29%
Late Denial agency failed to process the application timely.	1	0	1	7.14%
Total	3	0	3	21.43%
Rank #4: Wages and Salaries				
Policy incorrectly applied – no code applicable	0	1	0	7.14%
Total	0	1	0	7.14%
Rank #5 Time-Limited Participation				
Improper denial – met ABAWD exemption	1	0	1	7.14%
Total	1	0	1	7.14%
Rank #6 Residency				
Policy incorrectly applied – No other codes applicable	0	1	1	7.14%
Total	0	1	1	7.14%

FFY 2026 CAPER Errors – Cumulative Totals

Percentage Rates and Types of Negative Actions: October 2025

Error	Denials		Closures		Total Invalid	Percentage Total
Notices	1	7.14%	4	28.57%	5	35.71%
Verification	1	7.14%	2	14.29%	3	21.43%
Application	3	21.43%	0	0.00%	3	21.43%
Wages and Salaries	0	0.00%	1	7.14%	1	7.14%
Time-limited participation	1	7.14%	0	0.00%	1	7.14%
Residency	0	0.00%	1	7.14%	1	7.14%
Total	6	42.86%	8	57.14%	14	100.00%



FFY 2026 CAPER Error Rates

Regional and County Breakdowns: October 2026

		OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	TOTAL AVG.
Region 1 Northwest Region	Cibola	100.00%												100.00%
	McKinley	0.00%												0.00%
	San Juan	20.00%												20.00%
	Sierra	0.00%												0.00%
	Socorro	0.00%												0.00%
	N. Valencia	0.00%												0.00%
	S. Valencia	0.00%												0.00%
	Region 1 Totals	25.00%												
Region 2 Northeast Region	Colfax	0.00%												0.00%
	Guadalupe	0.00%												0.00%
	Quay	33.33%												33.33%
	Rio Arriba	0.00%												0.00%
	San Miguel	0.00%												0.00%
	Sandoval	14.29%												14.29%
	Santa Fe	50.00%												50.00%
	Taos	0.00%												0.00%
Region 2 Totals	25.00%													25.00%
Region 3 Central Region	NE Bernalillo	12.50%												12.50%
	NW Bernalillo	0.00%												0.00%
	SE Bernalillo	28.57%												28.57%
	SW Bernalillo	33.33%												33.33%
	Torrance	0.00%												0.00%
	Region 3 Totals	17.24%												
Region 4 Southeast Region	Chaves	50.00%												50.00%
	Curry	100.00%												100.00%
	Artesia	0.00%												0.00%
	Carlsbad	0.00%												0.00%
	Lea	0.00%												0.00%
	Lincoln	0.00%												0.00%
	Roosevelt	0.00%												0.00%
Region 4 Totals	42.86%													42.86%
Region 5 Southwest Region	E. Dona Ana	0.00%												0.00%
	Grant	0.00%												0.00%
	Luna	0.00%												0.00%
	Otero	0.00%												0.00%
	S. Dona Ana	0.00%												0.00%
	W. Dona Ana	0.00%												0.00%
Region 5 Totals	100.00%													100.00%
State Totals	18.92%													18.92%

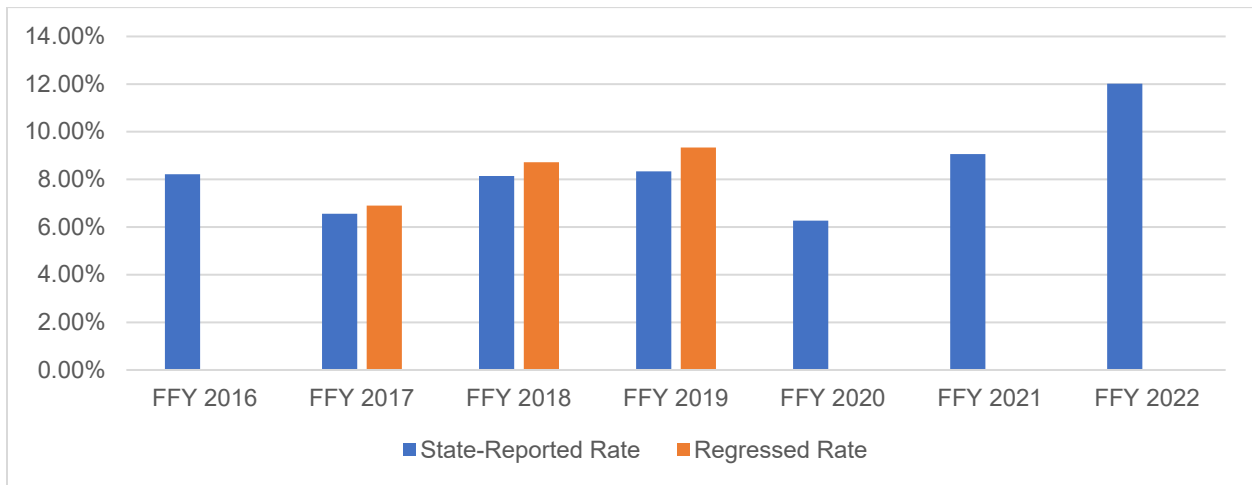
FFY 2026 Regression Rates

Regression rates are calculated by FNS and depend on such variables as FNS reviews of QC-reviewed cases and the State’s caseload size. The following charts give the State-reported error rates and the regression rates for Payment Accuracy and CAPER.

*****Please note that regression rates were not issued for FFY 2016 and FFY 2020. A CAPER regression rate for FFY 2019 and FFY 2020 was not issued. FFY 2021, FFY 2022, FFY 2023, FFY 2024, FFY 2025 and current data for FFY 2026 have not been issued at the time of this report.**

Payment Error Rate

Current Fiscal Year and Previous Fiscal Years



CAPER Error Rate

Current Fiscal Year and Previous Fiscal Years

