

LFC Requester:	Harry Rommel
----------------	--------------

AGENCY BILL ANALYSIS - 2026 REGULAR SESSION

WITHIN 24 HOURS OF BILL POSTING, UPLOAD ANALYSIS TO
AgencyAnalysis.nmlegis.gov and email to billanalysis@dfa.nm.gov
(Analysis must be uploaded as a PDF)

SECTION I: GENERAL INFORMATION

{Indicate if analysis is on an original bill, amendment, substitute or a correction of a previous bill}

Date Prepared: 1/16/2026

Check all that apply:

Bill Number: HB45

Original Correction
Amendment Substitute

Sponsor: Gail Armstrong

Agency Name

New Mexico Medical Board-
446

**and Code
Number:**

Monique Parks, Interim Exec.
Director

**Person Writing
Analysis:**

Email moniquem.parks@nm
Phone: 505-490-3903 : mb.nm.gov

**Short
Title:** Physician Assistant Licensure
Compact
Requiring _____

SECTION II: FISCAL IMPACT

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Nonrecurring	Fund Affected
FY26	FY27		

(Parenthesis () indicate expenditure decreases)

REVENUE (dollars in thousands)

Estimated Revenue			Recurring or Nonrecurring	Fund Affected
FY26	FY27	FY28		

(Parenthesis () indicate revenue decreases)

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY26	FY27	FY28	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected

Total						
--------------	--	--	--	--	--	--

(Parenthesis () Indicate Expenditure Decreases)

Duplicates/Conflicts with/Companion to/Relates to:
Duplicates/Relates to Appropriation in the General Appropriation Act

SECTION III: NARRATIVE

BILL SUMMARY

Synopsis:

Same as HB413- 2025 session- Enters New Mexico in the Physician Assistant Licensure Interstate Compact for the purpose of strengthening access to medical services and enhance the portability of a license to practice as a physician assistant. The Physician Assistant Licensure Compact Commission would serve as the national administrative body. Key features of the Compact follow.

Specifies criteria for a state to participate in the Compact and for a licensee to exercise the “compact privilege,” which is defined as “the authorization granted by a remote state to allow a licensee from another member state to practice as an physician assistant in the remote state under its laws and rules.”

Allows a licensee who is active duty military or is the spouse of active duty military to obtain a compact privilege.

STATE PARTICIPATION requires that a state:

- Implement a criminal background check requirement
- participate in the Commission’s data system
- Require an applicant to obtain a license in the home state
- Grant the compact privilege to a licensee holding a valid unencumbered license in another member state
- Utilize only a recognized national examination as a requirement for licensure
- Notify the Commission of any adverse action against a licensee
- Comply with the rules of the Compact Commission.

Member states may charge a fee for granting a compact privilege.

Details the requirements for a physician assistant seeking privilege to practice under the Compact.

ADVERSE ACTION: Grants authority to a remote state to impose adverse action against a privilege to practice within the member state. Grants exclusive power to a home state to take adverse action against the license issued by it. Joint investigation is authorized.

PHYSICIAN ASSISTANT LICENSURE COMPACT COMMISSION consists of one delegate from each member state and is granted authority to promulgate uniform rules to facilitate the compact (which may be rejected by a majority of legislatures of member states); bring legal proceedings; impose assessments from each member state or fees on other parties to cover

costs; conduct all necessary business; and elect an executive board. The Commission is directed to maintain a coordinated database and reporting system (to which member states shall submit a uniform data set on all persons to whom the compact is applicable).

The nine-member executive board handles the business of the Commission and monitors and reports compliance. Procedures for meetings of the Commission and board are provided. Grants qualified immunity to the Commission, executive board, and employees. Provides procedures for default, technical assistance, and termination relating to member states.

SEVERABILITY: The provisions of the compact are severable; should any provision be declared contrary to the constitution of any member state or of the United States or the applicability of any provision be held invalid, the validity and applicability of the remainder of the compact shall not be affected.

BINDING EFFECT: A licensee providing physician assistant services in a remote state is to function within the laws and regulations of the remote state. Laws in a member state in conflict with the compact are superseded to the extent of the conflict. Lawful actions of the commission are binding on member states. Any provision of the compact that exceeds constitutional limits imposed on the legislature of a member state are ineffective to the extent of the conflict with the constitutional provision in question.

DEFINITIONS include

“home state” means the member state that is the licensee’s primary state of residence

“licensee” means a person who currently holds an authorization from a state to provide medical services as a physician assistant

“remote state” means a member state other than the home state where the licensee is exercising the compact privilege.

FISCAL IMPLICATIONS

The average compact member state may see an increase in applications.

SIGNIFICANT ISSUES

As of late 2025/early 2026, 19 states have enacted the Physician Assistant (PA) Licensure Compact. While the compact is not yet operational, its passage represents a significant step toward reducing licensure barriers for PAs who practice across state lines.

The PA Licensure Compact is an interstate agreement under which participating states agree to recognize a valid, unencumbered PA license issued by another compact member state. Rather than obtaining a separate full license in each state, eligible PAs may apply for a compact privilege to practice in additional compact states, avoiding the lengthy and duplicative licensure process.

Compact Eligibility Requirements

To qualify for compact privileges, a PA must meet all eligibility criteria established in the compact model legislation, including:

- Holding an **active, unencumbered PA license** in a compact member state
- Graduation from an **accredited PA program**
- **Current NCCPA certification**
- **No felony or misdemeanor convictions**
- Any additional requirements specified in the compact

How the Compact Privilege Process Works

Once eligibility is confirmed:

1. The PA submits an application for a **compact privilege** through the **PA Compact Commission**.
2. The PA's license and eligibility are verified using the compact's **data system**.
3. The PA pays the required **compact privilege fee** and completes any applicable **jurisprudence requirements**.
4. The compact privilege is issued by the **remote compact member state** through the Commission.
5. The PA is legally authorized to practice in that state and must comply with **all laws and regulations of the state where the patient is located and services are delivered**.

Any PA practicing under a compact privilege remains fully subject to the **regulatory authority and disciplinary jurisdiction** of the state in which they are practicing.

Implementation Timeline

According to the American Academy of Physician Associates (AAPA), it may take **18 to 24 months** for the compact to become fully operational. During this time, states must complete rulemaking, systems integration, and administrative preparations before compact privileges can be issued.

Impact on Workforce and Patient Access

The PA Licensure Compact removes many of the barriers that limit PA mobility, helping to expand access to high-quality healthcare—particularly in rural and underserved areas. Many healthcare facilities are struggling to recruit and retain PAs, and the compact offers a more efficient pathway for onboarding qualified clinicians, including **locum tenens PAs**, in participating states.

Comparison to Other Interstate Compacts

The PA Licensure Compact is similar in structure to the **Interstate Medical Licensure Compact (IMLC)** for physicians and the **Nurse Licensure Compact (NLC)** for registered nurses. All three compacts streamline licensure while preserving state authority over scope of practice and discipline.

The primary difference is **scale and maturity**. While the IMLC and NLC are well established, the PA Licensure Compact is still in its preliminary stage. If it follows the trajectory of the IMLC—which has issued more than **97,000 physician licenses since launching in 2017**—the PA compact has the potential to significantly improve workforce flexibility and patient access to care.

Physician assistants shall remain responsible for the payment of NMMB licensure fees, and any other fees required under the PA Compact.

PERFORMANCE IMPLICATIONS

None for The New Mexico Medical Board

ADMINISTRATIVE IMPLICATIONS

The New Mexico Medical Board would have to promulgate and amend their rules to incorporate the Physician Assistant Interstate Licensing Compact.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

None for The New Mexico Medical Board

TECHNICAL ISSUES

NMMB must integrate their licensing databases with the PA Compact Commission's shared data system, which may require system configuration, interface development, and limited data mapping with NMMB's licensing system.

OTHER SUBSTANTIVE ISSUES

Participation in the compact would increase costs to the NMMB due to added administrative burdens, including compact licensure reviews, data management requirements, and increased staffing needs. Fees associated with physician assistant licenses issued under the compact would need to cover these costs.

ALTERNATIVES

None for The New Mexico Medical Board

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

If HB45 is not enacted there may be longer new physician assistant licensing application processing times, possibly a decreased number of physician assistant applicants, and consequently less access to care for New Mexico citizens.

AMENDMENTS

None for The New Mexico Medical Board