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FISCAL IMPACT REPORT

BILL NUMBER: Senate Bill 229

SHORT TITLE: Allow Auricular Acupuncture

SPONSOR: Tobiassen

LAST ORIGINAL
UPDATE: _____ **DATE:** 02/10/2026 **ANALYST:** Rommel

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT* (dollars in thousands)

Agency/Program	FY26	FY27	FY28	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
NMMB	No fiscal impact	No fiscal impact	No fiscal impact		Recurring	Other state funds
RLD	No fiscal impact	No fiscal impact	No fiscal impact		Recurring	Other state funds

Parentheses () indicate expenditure decreases.

*Amounts reflect most recent analysis of this legislation.

Sources of Information

LFC Files

Agency or Agencies Providing Analysis

Regulation and Licensing Department
New Mexico Medical Board

SUMMARY

Synopsis of Senate Bill 229

Senate Bill 229 (SB229) directs that a physician licensed pursuant to the Medical Practice Act may practice auricular acupuncture to the extent that the physician's auricular acupuncture practice is consistent with the scope of practice authorized by the physician's medical license.

This bill does not contain an effective date and, as a result, would go into effect 90 days after the Legislature adjourns, which is May 20, 2026.

FISCAL IMPLICATIONS

The Regulation and Licensing Department (RLD) notes:

An administrative rulemaking process, including a public hearing and all required publication of notices and proposed rules, would be required to update and amend current administrative rules issued pursuant to the Act if SB277 is enacted. The Regulation and

Licensing Department (RLD) believes it can absorb the costs associated with the rulemaking processes for this bill within existing resources.

The New Mexico Medical Board (NMMB) notes no fiscal impact from SB229.

SIGNIFICANT ISSUES

Auricular acupuncture is a specialized therapeutic technique that focuses on the outer ear, also known as the auricle. It is based on the principles of Traditional Chinese Medicine (TCM), which posits that the ear reflects the body's internal organs and systems. Practitioners insert thin needles into specific points on the ear to promote healing and balance within the body, leveraging the ear as a microsystem that corresponds to the entire body.

NMMB provides the following:

This change allows physicians to provide auricular acupuncture as part of comprehensive medical care consistent with their clinical training and expertise. Physicians are trained in neuroanatomy, pain pathways, autonomic regulation, and the diagnosis and management of complex medical conditions, which are directly relevant to the safe and effective use of auricular acupuncture. Incorporating this modality into physician practice enhances treatment options for conditions such as acute and chronic pain, substance use disorders, anxiety, and postoperative symptoms, particularly when used as an adjunct to evidence-based medical therapy. Permitting physicians to perform auricular acupuncture improves continuity of care, reduces delays in treatment, and expands access to nonpharmacologic interventions while maintaining high standards of patient safety and clinical oversight.

OTHER SUBSTANTIVE ISSUES

RLD notes:

[The Department] contacted the Board of Acupuncture and Oriental Medicine (Board) regarding SB229. The Board members were not aware of this legislation until today (2/5/2026). There is not a consensus among Board members on how to address this legislation, and the Board would need to meet in an open meeting to discuss the matter. Therefore, the Board cannot provide a position on SB229. There has been concern expressed regarding overlapping scopes of practice between healthcare professions and the implications for both access to care and the health and safety of the public.

HLR/cf/ct