

LFC Requestor: MONTANO, Noah

2025 LEGISLATIVE SESSION
AGENCY BILL ANALYSIS

Section I: General

Chamber: Senate

Category: Bill

Number: 46

Type: Introduced

Date (of THIS analysis): 1/23/25

Sponsor(s): Linda M. Trujillo

Short Title: Interstate Medical Licensure Compact

Reviewing Agency: Agency 665 - Department of Health

Analysis Contact Person: Arya Lamb

Phone Number: 505-470-4141

e-Mail: Arya.Lamb@doh.nm.gov

Section II: Fiscal Impact

APPROPRIATION (dollars in thousands)

Appropriation Contained		Recurring or Nonrecurring	Fund Affected
FY 25	FY 26		
\$0	\$0	N/A	N/A

REVENUE (dollars in thousands)

Estimated Revenue			Recurring or Nonrecurring	Fund Affected
FY 25	FY 26	FY 27		
\$0	\$0	\$0	N/A	N/A

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY 25	FY 26	FY 27	3 Year Total Cost	Recurring or Non-recurring	Fund Affected
Total	\$0	\$0	\$0	\$0	N/A	N/A

Section III: Relationship to other legislation

Duplicates: None

Conflicts with: None

Companion to: None

Relates to: None

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

Section IV: Narrative

1. BILL SUMMARY

a) Synopsis

SB46 proposes to enact the interstate medical licensure compact, providing for the appointment of New Mexico compact commissioners, requiring the filing of interstate commission bylaws and rules with the state records administrator.

The proposed purpose of SB46 is to strengthen access to and delivery of health care by providing member states of the Interstate Medical Licensure Compact a comprehensive process that complements the existing licensing and regulatory authority of state medical boards, provides a streamlined process that allows physicians to become licensed in multiple states, and ensures the safety of patients.

The compact would create a more streamlined pathway for licensure and does not otherwise change a state's existing medical practice act. The compact adopts the prevailing standard for licensure and affirms that the practice of medicine occurs where the patient is located at the time of the physician-patient encounter and, therefore, requires the physician to be under the jurisdiction of the state medical board where the patient is located. State medical boards that participate in the compact retain the jurisdiction to impose an adverse action against a license in the state issued to a physician through the procedures in the compact.

Is this an amendment or substitution? Yes No

Is there an emergency clause? Yes No

b) Significant Issues

According to the 2024 report published by the New Mexico Health Care workforce Committee, New Mexico continues to fall below acceptable benchmarks for the number of primary care physicians necessary to meet the needs of its residents. The data used in the report for physicians shows that in 2021 New Mexico would have needed 334 physicians to meet the needs of residents. While the number of providers did slightly improve since

2019, we continue to see a shortage of medical providers in New Mexico. As our population continues to age, we can anticipate the need for more primary care and specialty providers to meet the needs of the population. (https://digitalrepository.unm.edu/cgi/viewcontent.cgi?article=1012&context=nmhc_workforce)

Data shows an increase in the number of employed physicians, increasing from 41.8% of licensed physicians being employed in 2012 to 77.6% in 2024. However, the increase in employed physicians still falls short of meeting the needs of our communities. During this time frame we also saw a decrease of 25% in the number of physicians who work in a private practice, as most are associated with larger medical groups which are better equipped to handle administrative, economic, and regulatory issues. (<https://www.nmlegis.gov/handouts/ALFC%20061124%20Item%2014%20Healthcare%20Workforce.pdf>)

Available data indicates that Interstate Medical Licensure Compacts increase the number of physicians by reducing the time and administrative burden in obtaining a license in a new location. (<https://imlcc.com/wp-content/uploads/2023/11/Access-to-Care-and-Physician-Practice-Growth-Dr-Deyo-Ghosh-and-Plemmons-11-2023.pdf>). There are now 40 States, one territory, and the district of Columbia participating the Interstate Medical Licensure Compact. ([Interstate Medical Licensure Compact Updates 2024 - Consilium](#))

While this important issue impacts all citizens in New Mexico, studies show that Tribal citizens face unique and “significant barriers” (<https://www.thinknewmexico.org/wp-content/uploads/pdfs/HealthCareProfessionalShortageReport2024.pdf>). Tribal Communities in NM often find they must navigate multiple healthcare systems, complicating access to essential care. To ensure better access to health care for Tribal citizens we must not only increase providers but must also work in creative ways to ensure access is available in the Tribal communities.

The Interstate Medical Licensure Compact will reduce the administrative burden and the time required to become licensed in New Mexico, which could increase available physicians. An increase in primary care providers could also reduce the number of emergency department visits. By having access to a primary care provider who can see a person within a day or two reduces the number of people seeking more routine medical care in emergency departments. In addition, by providing routine care and follow-up on chronic conditions, primary care providers reduce the need to seek emergency treatment for diseases that can be controlled through routine care. ([tcpi-changepkgmod-edvisits.pdf](#)) ([Pathways to reduced emergency department and urgent care center use: Lessons from the comprehensive primary care initiative - PMC](#))

The Compact would facilitates telemedicine services by allowing physicians to more easily obtain licensure in multiple states where their patients reside, promoting continuity of care and access to specialists. While making it easier for physicians to obtain licenses to practice in multiple states, the Compact also strengthens public protection by enhancing the ability of states to share investigative and disciplinary information.

2. PERFORMANCE IMPLICATIONS

- Does this bill impact the current delivery of NMDOH services or operations?
 Yes No
- Is this proposal related to the NMDOH Strategic Plan? Yes No
 - Goal 1:** We expand equitable access to services for all New Mexicans
 - Goal 2:** We ensure safety in New Mexico healthcare environments
 - Goal 3:** We improve health status for all New Mexicans
 - Goal 4:** We support each other by promoting an environment of mutual respect, trust, open communication, and needed resources for staff to serve New Mexicans and to grow and reach their professional goals

By increasing the number of licensed providers, we can improve access to providers for all New Mexicans.

3. FISCAL IMPLICATIONS

- If there is an appropriation, is it included in the Executive Budget Request?
 Yes No N/A
- If there is an appropriation, is it included in the LFC Budget Request?
 Yes No N/A
- Does this bill have a fiscal impact on NMDOH? Yes No

4. ADMINISTRATIVE IMPLICATIONS

Will this bill have an administrative impact on NMDOH? Yes No

5. DUPLICATION, CONFLICT, COMPANIONSHIP OR RELATIONSHIP

None

6. TECHNICAL ISSUES

Are there technical issues with the bill? Yes No

7. LEGAL/REGULATORY ISSUES (OTHER SUBSTANTIVE ISSUES)

- Will administrative rules need to be updated or new rules written? Yes No
- Have there been changes in federal/state/local laws and regulations that make this legislation necessary (or unnecessary)? Yes No
- Does this bill conflict with federal grant requirements or associated regulations?
 Yes No
- Are there any legal problems or conflicts with existing laws, regulations, policies, or programs? Yes No

8. DISPARITIES ISSUES

This bill has the potential to impact rural and Tribal communities in a positive way by increasing the number of providers available

9. HEALTH IMPACT(S)

With increased medical providers we could see a tremendous impact on healthcare, as more citizens would have access to primary care providers who could help manage chronic conditions. This could also reduce healthcare cost, as receiving preventative and routine medical care reduces the need for potential expensive emergency services if the condition is not treated and maintained.

10. ALTERNATIVES

None

11. WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL?

If SB 46 is not passed, the interstate medical licensure compact would not be enacted. Without a streamlined process for obtaining medical licenses from participating states, New Mexico could continue to see a shortage of medical providers.

12. AMENDMENTS

None