

1 SENATE BILL 172

2 **57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025**

3 INTRODUCED BY

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5 and Janelle Anyanonu
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10 AN ACT

11 RELATING TO HEALTH CARE; INCREASING THE STATE'S HEALTH CARE
12 WORKFORCE BY ENACTING THE IMMIGRANT HEALTH CARE WORKFORCE
13 DEVELOPMENT ACT; PROVIDING FOR AN IMMIGRANT HEALTH CARE
14 PROFESSIONAL ACCELERATION PROGRAM; PROVIDING FOR AN IMMIGRANT
15 PRIMARY CARE PHYSICIAN READINESS PATHWAY; PROVIDING FOR AN
16 IMMIGRANT PRIMARY CARE RESIDENCY GRANT PROGRAM; CREATING THE
17 IMMIGRANT HEALTH CARE WORKFORCE DEVELOPMENT FUND; CREATING THE
18 IMMIGRANT HEALTH CARE WORKFORCE ADVISORY GROUP; AMENDING
19 DEFINITIONS IN THE MEDICAL PRACTICE ACT; MAKING AN
20 APPROPRIATION.
21

22 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

23 SECTION 1. [NEW MATERIAL] SHORT TITLE.--Sections 1
24 through 9 of this act may be cited as the "Immigrant Health
25 Care Workforce Development Act".

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1 SECTION 2. [NEW MATERIAL] DEFINITIONS.--As used in the
2 Immigrant Health Care Workforce Development Act:

3 A. "accrediting council" means the accreditation
4 council for graduate medical education;

5 B. "department" means the workforce solutions
6 department;

7 C. "immigrant" means an individual who was born
8 outside of the United States, who resides permanently in the
9 United States and who is authorized to work in the United
10 States under federal laws and regulations;

11 D. "participant" means an underemployed immigrant
12 health care worker who is participating in the immigrant health
13 care professional acceleration program;

14 E. "primary care physician" means a physician
15 licensed in New Mexico to practice general family medicine,
16 general internal medicine, obstetrics and gynecology or general
17 pediatric medicine;

18 F. "prior foreign health care experience" means
19 training or experience in a broadly recognized health care
20 field that is attained outside of the United States and Canada,
21 including at least twelve months of educational or vocational
22 training or at least twenty-four months of clinical work
23 experience;

24 G. "qualified international medical graduate" means
25 a physician who has a medical degree or qualification from a

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1 medical school located outside of the United States and Canada
2 that is recognized by the world health organization or the
3 world directory of medical schools;

4 H. "secretary" means the secretary of workforce
5 solutions;

6 I. "underemployed immigrant health care worker"
7 means an individual who is an immigrant and who has prior
8 foreign health care education or experience, is unemployed or
9 is not working in health care or is working in health care in a
10 position with a scope of practice below the individual's
11 highest level of foreign health care experience or licensure;
12 and

13 J. "underserved community" means a New Mexico area
14 or population included in the list of designated primary
15 medical care health professional shortage areas, medically
16 underserved areas or medically underserved populations
17 maintained and updated by the United States department of
18 health and human services or by any applicable state equivalent
19 thereof.

20 SECTION 3. [NEW MATERIAL] IMMIGRANT HEALTH CARE
21 PROFESSIONAL ACCELERATION PROGRAM--PARTICIPANT SUPPORT--PRIMARY
22 CARE PHYSICIAN READINESS PATHWAY.--

23 A. The department shall establish and maintain an
24 immigrant health care professional acceleration program to
25 support underemployed immigrant health care workers. The

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1 program shall provide participants:

2 (1) educational and career navigation,
3 including:

4 (a) information on training and
5 licensing requirements;

6 (b) guidance in determining the pathway
7 best suited for a participant based on the participant's
8 skills, experience, resources and interests;

9 (c) information and guidance regarding
10 funding sources for training and education; and

11 (d) information regarding practice areas
12 for careers as physicians, nurses, physician assistants or
13 other health care professionals;

14 (2) training and funding for that training to
15 support and facilitate participants who identify a need to
16 acquire medical English proficiency;

17 (3) support with integration into the New
18 Mexico community and labor force, including peer group support
19 and professional associations;

20 (4) training and funding for that training for
21 participants to become familiar with using medical information
22 technologies, including acquiring and updating contemporary
23 computer skills and the use of electronic health record
24 technologies;

25 (5) training and funding for that training to

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1 improve participants' knowledge, familiarity and skills in the
2 use of health care and health insurance systems used by health
3 care professionals and health care-related entities in New
4 Mexico and the United States;

5 (6) support and guidance to acquire, develop
6 and expand applicable foundational skills the department may
7 identify as necessary or appropriate;

8 (7) financial support, contingent on the
9 availability of funds, including stipends and reimbursements
10 for travel costs, test fees or test preparation costs and other
11 costs or expenses identified by the department as critical to
12 participants' successful completion of the program; and

13 (8) support to become credentialed, certified,
14 licensed or registered by the appropriate state licensing
15 authorities applicable to each participant's chosen health care
16 career, including assistance with preparation for required
17 licensing examinations and financial assistance for related
18 fees.

19 B. In administering the immigrant health care
20 professional acceleration program, the department shall partner
21 with a licensed health care provider in New Mexico for the
22 development and operation of an immigrant primary care
23 physician readiness pathway for qualified immigrant
24 international medical graduates seeking to become licensed
25 primary care physicians in New Mexico. The pathway shall be

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1 designed to:

2 (1) prepare participants to enter a United
3 States residency program in a primary care specialty in a
4 clinical readiness program to last no less than six months and
5 not to exceed twelve months;

6 (2) prepare participants to take the
7 *Comprehensive Osteopathic Medical Licensing Examination of the*
8 *United States, United States Medical Licensing Examination* or
9 other examinations necessary upon completion of a residency
10 program to obtain a license to practice as a primary care
11 physician in New Mexico; and

12 (3) provide stipends or other support for
13 participants while the participants are not employed full-time
14 and for a period of time determined as necessary and reasonable
15 by the department.

16 SECTION 4. [NEW MATERIAL] IMMIGRANT HEALTH CARE

17 PROFESSIONAL ACCELERATION PROGRAM--ELIGIBILITY--UNDERSERVED
18 COMMUNITIES RULES--PRIMARY CARE PHYSICIAN--READINESS PATHWAY--
19 ELIGIBILITY.--

20 A. To be eligible to participate in the immigrant
21 health care professional acceleration program, an underemployed
22 immigrant health care worker shall:

23 (1) not be present in the United States on a
24 J1 visa following acceptance into a United States medical
25 residency or fellowship program;

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1 (2) not be present in the United States on a
2 non-immigrant employment-based visa;

3 (3) have prior foreign health care experience;

4 (4) be a New Mexico resident during program
5 participation; and

6 (5) commit to living in New Mexico and working
7 in one of New Mexico's underserved communities post-licensure
8 for a period of time that is the longer of:

9 (a) at least one year; or

10 (b) a period of time commensurate with
11 the level of financial support received by the participant, not
12 to exceed three years.

13 B. The department shall promulgate rules and
14 methods to identify and evaluate rural or underserved
15 communities where program participants can live and work while
16 providing primary care medical services to those communities.

17 C. To be eligible to participate in the immigrant
18 primary care physician readiness pathway, a qualified immigrant
19 international medical graduate shall:

20 (1) receive a certificate of acceleration
21 program completion based on that individual's skills,
22 participation, experience and other prerequisites set by the
23 department, as demonstrated during the individual's
24 participation in the immigrant health care professional
25 acceleration program;

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1 (2) have attained educational commission for
2 foreign medical graduates certification, a substantially
3 similar certification or a generally recognized and accepted
4 alternative evaluation of medical training as approved by the
5 department;

6 (3) have completed a post-graduate training
7 program in a country outside of the United States and Canada
8 that is substantially similar to a United States residency
9 program accredited by the accrediting council;

10 (4) have been licensed to practice medicine in
11 a country other than the United States or Canada for at least
12 three years; and

13 (5) commit to practicing as a primary care
14 physician for three years in an underserved community in New
15 Mexico post-licensure, not including time spent participating
16 in a New Mexico residency program, which service shall be
17 counted as served concurrently with any other commitment for
18 service in an underserved community in New Mexico accrued
19 during participation in the immigrant health care professional
20 acceleration program.

21 SECTION 5. [NEW MATERIAL] IMMIGRANT HEALTH CARE
22 PROFESSIONAL ACCELERATION PROGRAM--IMMIGRANT PRIMARY CARE
23 PHYSICIAN READINESS PATHWAY--PARTICIPATION SELECTION
24 CRITERIA.--The department shall establish criteria for
25 selection of individuals to participate in the immigrant health

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1 care professional acceleration program and the immigrant
2 primary care physician readiness pathway. In addition to
3 meeting the educational and professional experience
4 requirements, other participant eligibility criteria for
5 selection shall include an underemployed immigrant health care
6 worker's:

7 A. demonstrated interest in serving in one of New
8 Mexico's underserved communities;

9 B. personal connections or ties to New Mexico;

10 C. experience, skills or cultural competencies
11 required in New Mexico's health care workforce; and

12 D. education, experience or skills in areas of
13 practice that are in-demand statewide or in a county or region
14 within New Mexico, according to available labor market
15 information.

16 SECTION 6. [NEW MATERIAL] IMMIGRANT PRIMARY CARE
17 RESIDENCY GRANT.--

18 A. The department, in partnership with
19 department-approved health care education programs, shall
20 establish and maintain an immigrant primary care residency
21 grant to support primary care residency positions in New Mexico
22 designated for eligible qualified immigrant international
23 medical graduates.

24 B. To be eligible to receive grant funding, a
25 health care education program applicant shall:

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1 (1) be a medical education program in a
2 program approved by the accrediting council as provided in the
3 Immigrant Health Care Workforce Development Act;

4 (2) be located in New Mexico; and

5 (3) identify each qualified immigrant
6 international medical graduate designated to fill a funded
7 primary care residency position.

8 C. As a condition of grant approval, each grant
9 recipient shall agree to the following:

10 (1) a grant awarded pursuant to this section
11 shall not supplant an existing local, state, federal or private
12 funding support, if any, of residency positions;

13 (2) a grant recipient shall not reduce its
14 residency program's approved residency quota, measured as an
15 average of its three prior-year primary care residency quotas,
16 not including other residency positions funded by the immigrant
17 primary care residency grant;

18 (3) a grant recipient shall not in any way
19 replace its residency program's primary care residency
20 positions with designated qualified immigrant international
21 medical graduate residency positions;

22 (4) a grant recipient's program shall not
23 violate the Human Rights Act;

24 (5) a grant recipient's program shall not
25 establish criteria for the residencies that exceed reasonable

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1 requirements or expectations for other residency applicants in
2 the same or a substantially similar primary care residency
3 program;

4 (6) a grant recipient's program shall not
5 create undue or burdensome barriers for otherwise eligible
6 applicants to be eligible for a residency position; and

7 (7) a grant recipient shall fill the funded
8 residency positions with participants who have successfully
9 completed the primary care physician readiness pathway;
10 provided, however, that if there are fewer individuals who have
11 successfully completed the immigrant primary care physician
12 readiness pathway than available funding, residency grant
13 recipient managers may apply for a waiver to fill the funded
14 residency position with a qualified immigrant international
15 medical graduate who meets the eligibility criteria for the
16 immigrant primary care physician readiness program. Waivers
17 shall be issued at the discretion of the secretary.

18 D. Priority shall be given to residency grant
19 applicants serving underserved communities.

20 SECTION 7. [NEW MATERIAL] IMMIGRANT HEALTH CARE WORKFORCE
21 DEVELOPMENT FUND CREATED.--The "immigrant health care workforce
22 development fund" is created as a nonreverting fund in the
23 state treasury. The fund consists of appropriations, gifts,
24 grants and donations to the fund. Money in the fund is subject
25 to appropriation by the legislature to the department to

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1 implement and administer the provisions of the Immigrant
2 Healthcare Workforce Development Act. Disbursements from the
3 fund shall be made by vouchers signed by the secretary or the
4 secretary's designee upon warrants signed by the secretary of
5 finance and administration.

6 SECTION 8. ~~[NEW MATERIAL]~~ ADVISORY COMMITTEE.--

7 A. The secretary shall appoint an "immigrant health
8 care workforce advisory committee" composed of no more than
9 fifteen individuals representing state agencies, medical
10 professional associations, community-based organizations,
11 graduate medical education providers and other relevant
12 stakeholders, including at least one qualified immigrant
13 international medical graduate and at least one internationally
14 educated nurse, both of whom shall have been licensed health
15 care providers in and residents of New Mexico.

16 B. Upon the request of the secretary, the immigrant
17 health care workforce advisory committee shall:

18 (1) advise the department on developing
19 streamlined pathways for underemployed immigrant health care
20 workers to provide health care services in New Mexico's
21 workforce;

22 (2) collaborate with appropriate state
23 regulatory and licensing agencies and other stakeholders toward
24 that goal; and

25 (3) assist and advise the department regarding

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1 matters in furtherance of the purposes of the Immigrant Health
2 Care Workforce Development Act.

3 C. Public members of the immigrant health care
4 workforce advisory committee are entitled to per diem and
5 mileage pursuant to the Per Diem and Mileage Act and shall
6 receive no other compensation, perquisite or allowance.

7 D. The department shall provide reports and
8 recommendations derived from the work of the immigrant health
9 care workforce advisory committee to the legislative finance
10 committee and other legislative committees as deemed
11 appropriate by the secretary.

12 SECTION 9. [NEW MATERIAL] RULES.--The department shall
13 adopt rules in accordance with the State Rules Act and as
14 necessary to carry out the provisions of the Immigrant Health
15 Care Workforce Development Act.

16 SECTION 10. Section 61-6-6 NMSA 1978 (being Laws 1973,
17 Chapter 361, Section 1, as amended) is amended to read:

18 "61-6-6. DEFINITIONS.--As used in the Medical Practice
19 Act:

20 A. "approved postgraduate training program for
21 physicians" means a program approved by the accreditation
22 council for graduate medical education, the American
23 osteopathic association or other board-approved program;

24 B. "board" means the New Mexico medical board;

25 C. "collaboration" means the process by which a

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1 licensed physician and a physician assistant jointly contribute
2 to the health care and medical treatment of patients; provided
3 that:

4 (1) each collaborator performs actions that
5 the collaborator is licensed or otherwise authorized to
6 perform; and

7 (2) collaboration shall not be construed to
8 require the physical presence of the licensed physician at the
9 time and place services are rendered;

10 D. "licensed physician" means a medical or
11 osteopathic physician licensed under the Medical Practice Act
12 to practice medicine in New Mexico;

13 E. "licensee" or "health care practitioner" means a
14 medical physician, osteopathic physician, physician assistant,
15 polysomnographic technologist, anesthesiologist assistant,
16 naturopathic doctor, podiatric physician or naprapath licensed
17 by the board to practice in New Mexico;

18 F. "medical college or school in good standing" for
19 medical physicians means a board-approved medical college or
20 school that has as high a standard as that required by the
21 association of American medical colleges and the council on
22 medical education of the American medical association; and for
23 osteopathic physicians means a college of osteopathic medicine
24 accredited by the commission of osteopathic college
25 accreditation;

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1 G. "medical student" means a student enrolled in a
2 board-approved medical college or school in good standing;

3 H. "physician assistant" means a health care
4 practitioner who is licensed by the board to practice as a
5 physician assistant and who provides services to patients with
6 the supervision of or in collaboration with a licensed
7 physician as set forth in rules promulgated by the board;

8 I. "qualified international medical graduate" means
9 a physician who has a medical degree or qualification from a
10 medical school located outside the United States and Canada
11 recognized by the world health organization or the world
12 directory of medical schools as provided in the Immigrant
13 Health Care Workforce Development Act;

14 ~~[F.]~~ J. "resident" means a graduate of a medical
15 college or school in good standing who is in training in a
16 board-approved and accredited residency training program in a
17 hospital or facility affiliated with an approved hospital and
18 who has been appointed to the position of "resident" or
19 "fellow" for the purpose of postgraduate medical training;

20 ~~[J.]~~ K. "the practice of medicine" consists of:

21 (1) advertising, holding out to the public or
22 representing in any manner that one is authorized to practice
23 medicine or to practice health care that is under the authority
24 of the board in this state;

25 (2) offering or undertaking to administer,

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1 dispense or prescribe a drug or medicine for the use of another
2 person, except as authorized pursuant to a professional or
3 occupational licensing statute set forth in Chapter 61 NMSA
4 1978;

5 (3) offering or undertaking to give or
6 administer, dispense or prescribe a drug or medicine for the
7 use of another person, except as directed by a licensed
8 physician;

9 (4) offering or undertaking to perform an
10 operation or procedure upon a person;

11 (5) offering or undertaking to diagnose,
12 correct or treat in any manner or by any means, methods,
13 devices or instrumentalities any disease, illness, pain, wound,
14 fracture, infirmity, deformity, defect or abnormal physical or
15 mental condition of a person;

16 (6) offering medical peer review, utilization
17 review or diagnostic service of any kind that directly
18 influences patient care, except as authorized pursuant to a
19 professional or occupational licensing statute set forth in
20 Chapter 61 NMSA 1978; or

21 (7) acting as the representative or agent of a
22 person in doing any of the things listed in this subsection;

23 [K-] L. "the practice of medicine across state
24 lines" means:

25 (1) the rendering of a written or otherwise

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1 documented medical opinion concerning diagnosis or treatment of
2 a patient within this state by a physician located outside this
3 state as a result of transmission of individual patient data by
4 electronic, telephonic or other means from within this state to
5 the physician or the physician's agent; or

6 (2) the rendering of treatment to a patient
7 within this state by a physician located outside this state as
8 a result of transmission of individual patient data by
9 electronic, telephonic or other means from within this state to
10 the physician or the physician's agent;

11 [~~L-~~] M. "sexual contact" means touching the primary
12 genital area, groin, anus, buttocks or breast of a patient or
13 allowing a patient to touch another's primary genital area,
14 groin, anus, buttocks or breast in a manner that is commonly
15 recognized as outside the scope of acceptable medical or health
16 care practice;

17 [~~M-~~] N. "sexual penetration" means sexual
18 intercourse, cunnilingus, fellatio or anal intercourse, whether
19 or not there is any emission, or introducing any object into
20 the genital or anal openings of another in a manner that is
21 commonly recognized as outside the scope of acceptable medical
22 or health care practice; [~~and~~]

23 O. "underserved community" means a New Mexico area
24 or population included in the list of designated primary
25 medical care health professional shortage areas, medically

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1 underserved areas or medically underserved populations
2 maintained and updated by the United States department of
3 health and human services or any state equivalent thereof; and

4 [N.] P. "United States" means the fifty states, its
5 territories and possessions and the District of Columbia."

6 SECTION 11. Section 61-6-11 NMSA 1978 (being Laws 1923,
7 Chapter 44, Section 3, as amended) is amended to read:

8 "61-6-11. PHYSICIAN LICENSURE.--

9 A. The board may consider for licensure a person
10 who is of good moral character, is a graduate of an accredited
11 United States or Canadian medical or osteopathic medical
12 school, has passed an examination approved by the board and has
13 completed two years of an approved postgraduate training
14 program for physicians.

15 B. An applicant who has not completed two years of
16 an approved postgraduate training program for physicians, but
17 who otherwise meets all other licensing requirements, may
18 present evidence to the board of the applicant's other
19 professional experience for consideration by the board in lieu
20 of the approved postgraduate training program. The board
21 shall, in its sole discretion, determine if the professional
22 experience is substantially equivalent to the required approved
23 postgraduate training program for physicians.

24 C. A graduate of a board-approved medical or
25 osteopathic medical school located outside the United States or

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1 Canada may be granted a license to practice medicine in New
2 Mexico, provided the applicant presents evidence to the board
3 that the applicant is a person of good moral character and
4 provided that the applicant presents satisfactory evidence to
5 the board that the applicant has successfully passed an
6 examination as required by the board and has successfully
7 completed two years of postgraduate medical training in an
8 approved postgraduate training program for physicians. A
9 graduate of a medical school located outside the United States
10 who successfully completes at least two years of an approved
11 postgraduate training program for physicians at or affiliated
12 with an institution located in New Mexico prior to December 30,
13 2007 and who meets the other requirements of this section may
14 also be granted a license to practice medicine.

15 D. The board may issue to an applicant who is a
16 qualified international medical graduate a provisional license
17 to practice medicine valid for a period not to exceed two years
18 if the applicant submits evidence acceptable to the board that
19 the applicant:

20 (1) has graduated from a legally chartered
21 medical school outside of the United States and Canada
22 recognized by the world health organization or the world
23 directory of medical schools;

24 (2) has been licensed or otherwise authorized
25 to practice medicine in a country other than the United States

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1 and has not been out of practice for more than two years;

2 (3) has a valid certificate issued by the
3 educational commission for foreign medical graduates or other
4 credential evaluation service approved by the board; provided,
5 however, that the board may waive certification at the board's
6 discretion if the applicant is unable to obtain the required
7 documentation from a noncooperative country;

8 (4) has achieved a passing score on both step
9 1 and step 2 clinical knowledge of the United States medical
10 licensing examination;

11 (5) has entered into an agreement with a
12 medical care facility that provides an assessment and
13 evaluation program designed to develop, assess and evaluate the
14 physician's nonclinical skills and familiarity with standards
15 appropriate for medical practice in New Mexico according to
16 criteria developed or approved by the board, which shall
17 promulgate rules regarding these standards;

18 (6) has an offer of full-time employment from
19 the medical care facility identified in Paragraph (5) of this
20 subsection after the board issues a license pursuant to this
21 subsection; and

22 (7) has satisfied any other criteria that the
23 board may require for issuance of a provisional license
24 pursuant to this subsection.

25 E. An individual who successfully obtains a license

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1 pursuant to Subsection D of this section and practices under
2 that license until the license's expiration shall be eligible
3 to apply for a renewable two-year restricted license to
4 practice medicine in an underserved community in New Mexico.
5 The board may issue a renewable license to an applicant if the
6 applicant submits evidence acceptable to the board that the
7 applicant:

8 (1) has successfully completed the
9 participating facility's assessment and evaluation program
10 required pursuant to Subsection D of this section;

11 (2) has achieved a passing score on step 3 of
12 the United States medical licensing examination;

13 (3) has an offer of full-time employment from
14 a health care facility, including a public hospital, a for-
15 profit or nonprofit private hospital, a general or special
16 hospital, an outpatient facility, a freestanding birth center,
17 a nursing home, an intermediate care facility, an assisted
18 living facility or other health care facility at which medical
19 care is provided by state-licensed medical care practitioners,
20 in an underserved community in New Mexico; and

21 (4) has no disciplinary actions or pending
22 investigations related to the applicant's practice under the
23 provisional license issued pursuant to Subsection D of this
24 section.

25 F. After at least two years of practice under a

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1 renewable two-year restricted license issued pursuant to
2 Subsection E of this section resulting in no disciplinary
3 actions or pending investigations, the board shall grant a
4 license to practice medicine to an internationally trained
5 physician who meets the other requirements of this section.

6 ~~[D.]~~ G. All applicants for licensure may be
7 required to appear personally before the board or a designated
8 agent for an interview.

9 ~~[E.]~~ H. An applicant for licensure by examination
10 shall not be granted a license if the applicant has taken the
11 examination in two or more steps and has failed to successfully
12 pass the final step within seven years of the date that the
13 first step was passed. An applicant for licensure who holds a
14 medical or osteopathic doctor degree and a doctoral degree in a
15 medically related field must successfully complete the entire
16 examination series within ten years from the date the first
17 step of the examination is passed. The board may, by rule,
18 establish exceptions to the time requirements of this
19 subsection.

20 ~~[F.]~~ I. Every applicant for licensure under this
21 section shall pay the fees required by Section 61-6-19 NMSA
22 1978.

23 ~~[G.]~~ J. The board may require fingerprints and
24 other information necessary for a state and national criminal
25 background check."

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SECTION 12. APPROPRIATION.--One million five hundred thousand dollars (\$1,500,000) is appropriated from the general fund to the workforce solutions department for expenditure in fiscal year 2026 to implement and administer the provisions of the Immigrant Health Care Workforce Development Act, including hiring three full-time-equivalent department staff and providing program grants. Any unexpended or unencumbered balance remaining at the end of fiscal year 2026 shall revert to the general fund.

SECTION 13. EFFECTIVE DATE.--The effective date of the provisions of this act is July 1, 2025.