

LFC Requester:

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**AGENCY BILL ANALYSIS - 2025 REGULAR SESSION**

**WITHIN 24 HOURS OF BILL POSTING, UPLOAD ANALYSIS TO**

**[AgencyAnalysis.nmlegis.gov](http://AgencyAnalysis.nmlegis.gov) and email to [billanalysis@dfa.nm.gov](mailto: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:** 1/23/2025

*Check all that apply:*

**Bill Number:** SB 46

Original  Correction

Amendment  Substitute

**Sponsor:** Linda M. Trujillo

**Agency Name**

**and Code**

New Mexico Medical Board-

**Number:**

446

**Person Writing**

Monique Parks, Interim Exec.

**Analysis:**

Director

**Short**

ENACTING THE  
INTERSTATE MEDICAL  
LICENSURE COMPACT

**Title:**

**Requiring**

505-490-

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**SECTION II: FISCAL IMPACT**

**APPROPRIATION (dollars in thousands)**

Appropriation		Recurring or Nonrecurring	Fund Affected
FY25	FY26		

(Parenthesis ( ) indicate expenditure decreases)

**REVENUE (dollars in thousands)**

Estimated Revenue			Recurring or Nonrecurring	Fund Affected
FY25	FY26	FY27		
	60.0	60.0	Recurring	OSF

(Parenthesis ( ) indicate revenue decreases)

**ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)**

	FY25	FY26	FY27	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected

<b>Total</b>		60.0	60.0	120.0	Recurring	OSF
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(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:

SB 46- For New Mexico to enter the Interstate Medical Licensure Compact (IMLC) for the purpose of facilitating interstate practice by physicians and improving public access to physician services. The member states of Interstate Medical Licensure Compact have allied in common purpose to develop a comprehensive process that complements the existing licensing and regulatory authority of state medical boards and provides a streamlined process that allows both allopathic and osteopathic physicians to become licensed in multiple states, thereby enhancing the portability of a medical license and ensuring the safety of patients.

- The mission of the Compact is to increase access to health care – particularly for patients in underserved or rural areas. The IMLC makes it possible to extend the reach of physicians, improve access to medical specialists, and leverage the use of new medical technologies, such as telemedicine. While making it easier for physicians to obtain licenses to practice in multiple states, the IMLC also strengthens public protection by enhancing the ability of states to share investigative and disciplinary information.
- Eligibility requirements are specified for physicians who seek expedited licensure under the Compact. States that participate in the Compact can streamline licensure by using an expedited process to share information with each other that physicians have previously submitted in their State of Principal License (SPL) -- the state in which a physician holds a full and unrestricted medical license.
- Before physicians can participate in the Compact, they must designate an SPL, complete an application, and then receive a formal Letter of Qualification from that state, verifying that they meet the Compact’s strict eligibility requirements. Physicians cannot obtain licenses through the Compact without completing these steps. After verifying a physician’s eligibility for the Compact, the SPL shares this information with additional states where the physician wants to practice medicine. By using expedited information-sharing, participating states can significantly speed up the licensure process.
- The Compact establishes procedures for application for and renewal expedited licensure including criminal background checks. Member states may impose fees for licenses issued or renewed through the Compact.
- The Interstate Commission shall establish a database of licensed physicians or who have applied for licensure, through the Compact. Member boards shall report to the Commission any public action or complaint against a physician who has applied for or received an expedited license through the Compact. Member boards may participate with other member boards in joint investigation of licensed physicians.
- 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.” (See IMLC Section 1).

- The provisions of the IMLC statute clearly and unequivocally require that each and every IMLC member state has the right to establish what constitutes the practice of medicine for its licensees and for the protection of its citizens.
- Of note, under the IMLC scope of practice provisions, a physician who attempts to perform an abortion or gender affirming care where it is prohibited is subject to be disciplined to the extent that state’s regulatory board wishes to pursue it. That same physician who performs abortions or gender affirming care under a license issued by a state which permits such care to a patient is protected against other states attempting to impose discipline on physicians providing such care to a patient located in that state at the time of treatment under those scope of practice provisions.
- The state executive, legislative, and judicial branches in each member state shall enforce the Compact. The Compact’s rules and provisions shall have standing as statutory law but shall not override existing state authority to regulate the practice of medicine. Member states may withdraw from the Compact by specifically repealing the statute that enacted the Compact into law.

**INTERSTATE MEDICAL LICENSURE COMPACT COMMISSION** is created by the member states and consists of two voting commissioners appointed by each member state. The Commission shall establish an Executive Committee to act on its behalf when the Commission is not in session. The Commission may levy an annual assessment from each member state to cover costs of operations. The bill specifies the powers and duties of the Commission and details its organization and operation and rulemaking functions.

The Governor of New Mexico shall appoint two members of the New Mexico Medical Board who are licensed physicians to serve as commissioners; one medical doctor and one osteopathic physician. These commissioners serve at the pleasure of the Governor.

### **FISCAL IMPLICATIONS**

The average compact member state sees a ten to fifteen percent increase in applications. If this figure were applied to New Mexico, estimated increase in annual revenues could be \$50,000-\$70,000.

### **SIGNIFICANT ISSUES**

Physicians licensed in New Mexico thru the Compact will have to obtain NM medical licenses and be subject to the NM Medical Practice Act. New Mexico will not surrender any authority to issue and regulate licensed physicians.

The goal of joining the Compact is to expand access to care by streamlining the licensing process for physicians and facilitate multi-state practice and telemedicine which would benefit both physicians and patients in New Mexico.

States the participate in the Compact see a significant increase in physician licensure in their state, which we anticipate would occur in New Mexico.

The Compact would not supersede New Mexico’s autonomy and control over the practice of

medicine. New Mexico would maintain control through a coordinated legislative and administrative process. The practice of medicine is defined in the Compact as where the patient is located, not where the physician is located. As such, all initial disciplinary actions will be handled by the Board of the state where the patient is located, which is the same as handled by NMMB currently.

Additionally, the Compact creates a Compact Commission that is comprised of two representatives of each member state. The Commission essentially serves as an administrative clearinghouse of licensing and disciplinary information between participating states. The Commission does not have regulatory control over physicians or the practice of medicine and will not issue licenses or revoke licenses. Its only charge is to facilitate interstate cooperation and the transfer of information between member states.

#### **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 Interstate Licensing Compact.

#### **CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP**

None for The New Mexico Medical Board

#### **TECHNICAL ISSUES**

None for The New Mexico Medical Board

#### **OTHER SUBSTANTIVE ISSUES**

None for The New Mexico Medical Board

#### **ALTERNATIVES**

None for The New Mexico Medical Board

#### **WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL**

If SB46 is not enacted there may be longer new licensing application processing times, possibly a decreased number of physician applicants, and consequently less access to care for New Mexico citizens.

#### **AMENDMENTS**

None for The New Mexico Medical Board