



**BOARD MEETING
APPROVED MEETING MINUTES
March 26, 2026**

LOCATION:

2005 Evergreen St, Rm. 1150 A & B
First Floor Hearing Room
Sacramento, CA 95815

Remote Access via Web Ex Teleconference

Staff Present

Benjamin Bodea, Executive Officer
Brennan Meier, Legal Counsel
Jay Herdt, Licensing Manager
Enrico Garcia, Administrative Coordinator
Marisa Ochoa, Central Services Manager, Remote

Members (of the Board) Present

Dr. Yong Ping Chen, Ph.D., L.Ac., President
Hyun “Francisco” Kim, M.S., L.Ac., Vice President
Gregory Leung
Shu Dong Li, Ph.D.
Ruben Osorio

Item 1 – Call to Order, Roll Call, and Establishment of Quorum

Meeting commenced at 9:36 a.m.

Roll call taken. All members present. Quorum established.

Item 2 – President’s Remarks

President Yong Ping Chen (President Chen) welcomed members, staff, and the public to the meeting.

Item 3 – Review and Possible Approval of Board Meeting Minutes for November 6, 2025

Members reviewed the minutes from the November 6, 2025, meeting.

MOTION

Vice-President Francisco Kim (VP Kim) motioned to approve the November 6, 2025, meeting minutes.

Board Member Gregory Leung (Member Leung) seconded.

Yes: Chen, Kim, Leung, Li, Osorio

5-0

Motion Passes

Item 4 – Update from the Department of Consumer Affairs

Lucia Saldivar (Ms. Saldivar) from the Department of Consumer Affairs provided an update to the California Acupuncture Board (Board). Ms. Saldivar announced that Christine Lally has been appointed Acting Director following Kimberly Kirchmeyer's retirement. Ms. Saldivar also reviewed recent actions supporting licensees affected by the Los Angeles fires, including a one-year postponement of renewal fees. Ms. Saldivar then discussed the state's approved plan to reorganize the Business, Consumer Services and Housing Agency into two new agencies, with the changes becoming effective July 1, 2026. Ms. Saldivar reminded board members to practice cost-effective travel planning and provided updates on board member training requirements.

Item 5 – Professional Association Updates

(A) Council of Colleges of Acupuncture and Herbal Medicine

The Council of Colleges for Acupuncture and Herbal Medicine (CCAHM), represented by its President, Dr. Thomas Kouo, and Executive Director, Kristin Richeimer, delivered a comprehensive update to the Board. They outlined the Council's mission, current membership, including numerous California campuses, and their strategic efforts to strengthen the profession.

A major focus of the presentation was the growing pressure on acupuncture schools caused by new federal rulemaking tied to the One Big Beautiful Bill Act, and CCAHM's related committees, which are reshaping student loan eligibility and caps, professional degree definitions, and institutional accountability measures. The Council emphasized that these regulations pose significant risks to acupuncture institutions, particularly the proposed earnings-based metrics that disadvantage professions with high rates of self-employment. They warned that failure to meet new standards could lead not only to loss of Title IV financial aid but also potential accreditation consequences affecting school survival. The presenters also highlighted declining nationwide enrollment, the need to reduce student debt, and the challenge of maintaining high educational quality while remaining competitive with other healthcare programs.

Another major component of the update concerned Clean Needle Technique (CNT). They described CNT as the national safety standard, detailed its frequent updates, and formally requested that California adopt CCAHM's CNT certification as a requirement for licensure. They also clarified CNT trademark and copyright rules and noted the Council's capacity to reinstate multilingual exams if California joins the requirement.

President Chen and VP Kim posed questions about CNT's adequacy, language accessibility, employment data, comparisons with dry needling requirements, and broader concerns about professional safety. Additional dialogue explored workforce challenges, the lack of insurance and Medicare coverage for acupuncture, economic pressure on graduates, and barriers to employment in mainstream medical environments. The discussion concluded with mutual appreciation and

acknowledgment of the need for unified national efforts to protect and advance the acupuncture profession.

(B) Accreditation Commission for Acupuncture and Herbal Medicine

The Accreditation Commission for Acupuncture and Herbal Medicine (ACAHM), represented by its Executive Director Dr. Mark McKenzie and Director of Accreditation Jason Wright, provided the Board with a detailed update on the status of accredited programs, current challenges in higher education, and emerging federal policies that could significantly impact the acupuncture profession. They reported that ACAHM currently accredits forty-five institutions and oversees 113 programs, though closures and declining enrollment have reduced these numbers in recent years. Much of their presentation focused on the looming threat posed by new federal gainful-employment and earnings-threshold regulations, which use Internal Revenue Service and census income data to judge program viability. Because most acupuncture graduates are self-employed, leading to lower reported adjusted gross income, ACAHM anticipates that nearly all programs may lose federal financial-aid eligibility by 2028, creating severe financial strain on schools and limiting access for future students. They also addressed program hour requirements, explaining differences between master's, entry-level doctoral, and advanced doctoral programs, and discussed ongoing efforts to explore more efficient curriculum models without compromising professional competencies or public safety.

VP Kim emphasized concerns about graduate employment, reporting that some schools claim high unemployment despite ACAHM's self-employment statistics. VP Kim also stressed that income challenges are market-driven and urged ACAHM to consider higher science prerequisites so graduates can qualify for employment in larger medical institutions. Board Member Reuben Osorio (Member Osorio) sought clarity on ACAHM's hour requirements, questioned whether cost pressures were influencing standards, and noted that lower hours could harm the profession, especially as the broader economy struggles. President Chen asked extensive questions about degree-name unification, program hour differences, accreditation categories, prerequisites, TOEFL (The Test of English as a Foreign Language) requirements, and pathways such as Asian medical bodywork. President Chen highlighted the importance of preparing acupuncturists for system-based medical environments and explored whether moving from the master's to entry-level doctoral programs could strengthen professional status and improve financial viability. Executive Officer Benjamin Bodea (E.O. Bodea) clarified that proposed curriculum-hour changes come from legislation, not the Board, and asked ACAHM to clarify when students must attain the minimum TOEFL scores in their education, and if the Clean Needle Technique exam was offered meeting the minimum TOEFL requirements ACAHM has set such that all applicants would be able to test in English.

ACAHM emphasized that while it cannot lobby, it is actively reviewing its standards and gathering input from schools and stakeholders to help the field adapt to regulatory and

economic pressures. They closed by offering continued support and follow-up communication as the Board considers future policy and educational issues.

The Board recessed from 12:23 p.m.-1:33 p.m.

Roll Call taken at 1:33 p.m. All members present. Quorum established.

(C) California Acupuncture Coalition

Ryan McCarthy (Mr. McCarthy), representing the California Acupuncture Coalition (CAC), delivered a comprehensive presentation to the Board outlining the Coalition's mission, legislative priorities, and concerns impacting the acupuncture profession in California. Mr. McCarthy explained that CAC was formed to unite various acupuncture associations, schools, and medical organizations statewide, initially to protect Medi-Cal acupuncture benefits during repeated budget threats.

Mr. McCarthy described three bills sponsored by CAC: SB 944, which removes a federal-funding contingency in Medi-Cal law to ensure stable funding for acupuncture services; AB 1949, which would eliminate the current twice-per-month treatment cap while preserving annual limits to give practitioners greater clinical flexibility; and AB 2668, which proposes raising California's entry-level licensure requirement to a doctoral degree with at least 3,300 education hours to improve professional recognition, integration into healthcare systems, research eligibility, and employment opportunities. Mr. McCarthy also emphasized CAC's strong opposition to AB 2497, a bill that would expand physical therapists' scope, including authorization to perform dry needling, which CAC views as acupuncture performed without proper training, arguing it poses patient-safety risks.

President Chen inquired on the education-hour figures and questioned whether the proposed 3,300-hour minimum is below the averages of current training programs' curriculum. VP Kim asked about support levels and later suggested seeking subject-matter expert input before Board action. CAC board members Dr. Lin Yang and Dr. Anyork Lee provided additional technical explanations, noting that most California programs already exceed 3,300 hours, that doctoral preparation enhances clinical reasoning and professional status, and that expanded training could improve employment outcomes and access to research funding. Board members acknowledged the value of the information and expressed interest in further study before taking any formal positions.

(D) CSOMA

Dr. Julie Tran (Dr. Tran), president of CSOMA, opened the discussion by thanking the Board and attendees before presenting an update on the association's efforts. Dr. Tran outlined current legislative activity, noting CSOMA's support for SB 944 and AB 1949, and its opposition to AB 2647 and AB 2668. Dr. Tran added that students also oppose AB 2668 and have submitted a petition with more than 225 signatures. Dr. Tran described CSOMA's collaborative work with the California Acupuncture Coalition and its role in helping preserve acupuncture benefits within Medi-Cal. Dr. Tran also highlighted a request from the San Francisco Department of Public Health, which sought CSOMA's advice on pay structures and ways to make open acupuncturist positions more appealing. Dr. Tran then discussed CSOMA's community-education efforts, including monthly webinars, legislative town halls, and upcoming conferences at Yo San University in May, and in Oakland in September.

After Dr. Tran's presentation, VP Kim asked about regional representation in student petition signatures, and Dr. Tran explained that most signatures came from Southern California schools but that updates from Northern California campuses are pending. President Chen asked several questions regarding San Francisco's acupuncturist hiring program, including the number of positions, rotation between clinics, qualifications required, pay levels, and clinical responsibilities. Dr. Tran clarified that the city is hiring four part-time acupuncturists who will rotate among clinics, must be licensed in California, and will perform typical clinical duties and documentation. Dr. Tran emphasized that CSOMA's role was limited to advising on compensation, not job design. President Chen encouraged CSOMA to extend similar advocacy efforts to other public agencies, such as the Veterans Administration, and inquired about the profession's long-term readiness for primary-care-level roles. Dr. Tran responded that expanding employment opportunities is a major priority and explained CSOMA's past legislative attempt to allow California licensure via either the CALE or the national exam to better align with hospital and federal hiring standards.

Dr. Tran emphasized that CSOMA opposes AB 2668 because it would impose additional educational and financial burdens on students. The conversation concluded with President Chen reflecting on historical developments related to licensure and urging CSOMA to continue building the profession's capacity and competency, while Dr. Tran expressed appreciation and reiterated CSOMA's commitment to advocacy and advancement.

Public Comment

The first public commenter warned that upcoming federal financial aid changes will make current acupuncture programs unsustainable and argued that increasing state-mandated hours will raise costs without improving outcomes, risking school closures and fewer practitioners. The commenter urged the Board to recognize financial realities before imposing additional requirements.

The second public commenter highlighted California's long history of acupuncture legislation and advocacy, especially around Medicare recognition, and emphasized teamwork across organizations. The commenter argued that increasing hours does not guarantee improved quality and urged focusing on strengthening education rather than expanding hours.

The third public commenter opposed adopting the current CNT manual, calling it outdated and incomplete in safety content. The commenter noted the Council of Colleges relies heavily on CNT revenue while membership shrinks, questioning its responsiveness and urging the Board not to adopt the current version.

The fourth public commenter explained existing pathways that reduce student financial burden, tutorial programs, acupuncture assistant roles, and community-college science hours, and stressed the need to maintain strong education standards, citing recent dry-needling injuries as evidence that safety must not be compromised.

The fifth public commenter stated that Five Branches University does not support increasing required hours, arguing California already has high standards and that quality depends on curriculum, not hour count. The commenter supported allowing graduates to advance into doctoral studies without raising entry-level hours.

The sixth public commenter proposed using Artificial Intelligence (AI) as a tool to raise educational quality without adding tuition hours, describing an AI platform built on master-level expertise. The commenter encouraged embracing technology to improve learning and clinical support rather than increasing program length.

The seventh public commenter stated the profession has stagnated due to low educational quality, reflected in weak recruitment and practice challenges. They support raising education quality, including a professional doctorate, arguing it will benefit schools, practitioners, and public safety.

The eighth public commenter requested an accessible licensure pathway for elder traditional practitioners whose lifetime expertise predates modern academic structures. The commenter described how current rules force a 75-year-old master practitioner to redo basic education, calling it an undue burden and a loss of living knowledge.

The ninth public commenter argued that to thrive in the modern healthcare system, acupuncture must raise entry-level licensure to the doctoral degree, aligning with other healthcare fields. The commenter said this change would improve public perception, insurance recognition, and student recruitment.

The tenth public commenter opposed AB 2668's provision allowing accreditation waivers, warning it threatens patient safety and national licensure portability. The commenter cautioned against raising burdens on students and schools amid tightening federal loan policies and emphasized maintaining strong national standards.

The eleventh public commenter highlighted technical issues with the California Acupuncture Licensing Examination (CALE) and lower overall pass rates, asking for a

formal review of its alignment with curricula. The commenter noted school closures and financial aid changes will further stress the licensure pipeline and urged the Board to evaluate whether CALE creates unnecessary barriers.

The twelfth public commenter expressed that they experienced dramatic relief through advanced acupuncture, they argued the profession needs more rigorous education, not less. The commenter urged optimism about future financing options, predicting private and AI-enabled funding models will emerge as federal loans shrink.

The thirteenth public commenter clarified that most California schools already exceed 3,000 hours and that increasing hours may not change actual training. The commenter emphasized the lack of national standards across accrediting bodies and argued education is primarily a local matter, urging schools and practitioners to collaborate on solutions.

The fourteenth public commenter opposed AB 2668, citing that many programs are already financially unstable under federal benchmarks. The commenter warned that increasing hours during a period of shrinking loan access will deter new students and harm the profession's viability.

The fifteenth public commenter supported modest hour increases to convert master's-level programs into doctoral degrees, arguing that doctoral-level specialized training would strengthen clinical effectiveness, reputation, and incomes. The commenter noted that other healthcare professions already require doctorates and urged acupuncture to align.

The sixteenth public commenter opposed AB 2668, arguing it detracts from combating physical therapists' push for dry needling authority. The commenter stated there is no evidence that increasing education hours improves national recognition or job opportunities and emphasized that national hiring agencies want uniform certification, not more hours.

The seventeenth public commenter warned that AB 2668 would raise costs and deter prospective students already struggling with affordability. The commenter stated financial barriers, not lack of dedication, are keeping people from joining the profession and urges consideration of student financial realities.

The eighteenth public commenter supported adding CNT training to California's curriculum, stating it would standardize education, improve patient safety, and reduce liability risks.

The nineteenth public commenter provided cost data showing acupuncture students often incur two hundred thousand to three hundred thousand dollars in debt while earning far below the required income thresholds. The commenter noted upcoming federal loan limits will worsen this gap but takes no stance on the policy issues.

The twentieth public commenter credits acupuncture with improving their health and stresses that high training standards protect patients. The commenter opposes reducing hours or expanding scope to professions with less training.

The twenty-first public commenter supports AB2668, stating that the profession should elevate educational standards and move toward producing doctoral-level practitioners.

The Board recessed from 3:50 p.m.-4:07 p.m.

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Roll Call taken at 4:08 p.m. All members present. Quorum established.

Item 11 – Discussion and Possible Adoption of Standards of Practice for Telehealth Services Rulemaking (16 CCR section 1399.452.1, Including Consideration of Comments Received During 15-day Comment Period for Modified Text

The Board reviewed the telehealth regulatory package following a second 15-day public comment period, which generated one comment from Dr. Elizabeth Selandia. The comment argued that most acupuncture services cannot be provided via telehealth and that the proposed regulations would negatively affect practitioners. Board staff proposed a response explaining that the regulation is not intended to list specific services appropriate for telehealth but instead allows licensed acupuncturists to determine suitability based on statutory scope and professional judgment. Staff also noted that billing concerns fall outside the scope of the regulation. With no questions or suggested changes from board members, a motion was made and seconded to reject the requested action in the comment, approve the proposed response, authorize technical edits, and direct staff to proceed with the rulemaking process.

MOTION

VP Kim motioned for the Board to direct staff to reject the action requested in the comment, approve the response to the comment (as indicated in the meeting materials), authorize the Executive Officer to make any technical or non-substantive changes to the proposed regulations, and direct staff to take all steps necessary to complete the rulemaking process.

Member Osorio seconded.

Yes: Chen, Kim, Li, Leung, Osorio

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Motion Passes

Item 12 – Future Agenda Items

President Chen requested adding discussion of two bills, AB 2668 and AB 2497, to the next agenda. E.O. Bodea agreed and noted that the legislative report will be updated with any changes, and that AB 2497 will also be included.

Public Comment

The first commenter suggested adding an agenda item to review federal developments affecting acupuncture, including bills related to student loans and provider recognition. The commenter noted that Medicare already covers acupuncture and emphasizes the need to ensure qualified providers are included in federal policy.

The second commenter proposed discussing how the Board, schools, associations, and national organizations can collaborate to create clinical training opportunities for acupuncture students in mainstream medical settings, supporting greater integration into the healthcare system.

The third commenter requested a review of whether California's current education-to-licensure pathway protects the public while avoiding unnecessary limits on the future acupuncture workforce.

Item 13 – Public Comments for Items not on the Agenda

Public Comment

No public comments were made.

Item 13 – Pursuant to Government Code, section 11126, subd. (a), the Board Will Meet in Closed Session for Discussion, Deliberation, and Possible Action on Evaluating the Executive Officer's Performance

Closed Session

Closed session began at 4:28 pm and ended at 4:58 pm.

Return to Open Session

Item 14 – Adjournment

President Chen adjourned the meeting at or around 4:58 p.m.