
SENATE COMMITTEE ON HEALTH

Senator Akilah Weber Pierson, Chair

BILL NO: AB 1949
AUTHOR: Lee
VERSION: May 18, 2026
HEARING DATE: June 10, 2026
CONSULTANT: Jen Flory

SUBJECT: Medi-Cal: acupuncture treatments.

SUMMARY: Requires the Medi-Cal program to cover up to 24 acupuncture visits per recipient per calendar year.

Existing law:

- 1) Establishes the Medi-Cal program, which is administered by the Department of Health Care Services (DHCS), and under which qualified low-income individuals receive health care services. [WIC §14000, et seq.]
- 2) Establishes a schedule of benefits under the Medi-Cal program, which includes benefits required under federal law and benefits provided at the state's option, both of which are funded with federal and state dollars. The schedule of benefits includes acupuncture, provided that federal matching funds are available. [WIC §14132]
- 3) Limits the coverage of acupuncture, chiropractic services, physical therapy, occupational therapy, speech pathology, audiological services, and podiatry to twice collectively, per month. [22 CCR §51304]

This bill

- 1) Requires Medi-Cal to cover up to 24 acupuncture visits per recipient per calendar year.
- 2) Authorizes additional acupuncture visits beyond 24 per calendar year based on medical necessity pursuant to prior authorization procedures established by DHCS.
- 3) Specifies that this bill does not limit coverage for beneficiaries under 21 years of age who are entitled to Early and Periodic Screening, Diagnostic, and Treatment services and conditions implementation on the availability of federal financial participation.

FISCAL EFFECT: According to the Assembly Appropriations Committee, this bill would have costs to the Medi-Cal program of an unknown amount, potentially hundreds of thousands of dollars per year or more if this bill results in Medi-Cal beneficiaries using more acupuncture services, to the extent federal financial participation continues. (General Fund, federal funds).

PRIOR VOTES:

Assembly Floor:	77 - 0
Assembly Appropriations Committee:	11 - 0
Assembly Health Committee:	15 - 1

COMMENTS:

- 1) *Author's statement.* According to the author, acupuncture is a crucial treatment for debilitating health conditions, and we cannot eliminate this health benefit for low-income

Californians. This bill improves access to the proven benefits of acupuncture by allowing the medically necessary number of treatments per month while maintaining the overall cost controls for the benefit.

- 2) *Acupuncture.* According to the American Academy of Medical Acupuncture, the classical Chinese explanation of how acupuncture works is that channels of energy run in regular patterns through the body and over its surface. These energy channels, called meridians, can be influenced by needling the acupuncture points to unblock obstructions and reestablish regular flow through the meridians. The modern scientific explanation is that needling acupuncture points stimulates the nervous system to release chemicals in the muscles, spinal cord, and brain to change the experience of pain or trigger the release of other chemicals and hormones to influence the body's own internal regulating system. Acupuncture is most closely associated with pain control, though it has also been recognized in the treatment of other medical problems, including neurological and muscular disorders, respiratory disorders, and digestive disorders. The number of acupuncture treatments needed differs from person to person and the complexity of the condition. For complex, chronic conditions, one to two treatments per week for several months may be recommended, while for acute problems, fewer visits are likely required.
- 3) *Medi-Cal provision of acupuncture services.* According to the Medi-Cal provider manual, acupuncture services are covered when used to prevent, modify, or alleviate the perception of severe, persistent chronic pain resulting from a generally recognized medical condition. Outpatient acupuncture services in fee-for-service Medi-Cal are limited to two services in a calendar month, although additional services can be provided based upon medical necessity through prior authorization. The two services per month limitation also applies collectively across many of the optional medical benefits, including chiropractic services, physical therapy, occupational therapy, speech pathology, audiological services, and podiatry, meaning not only can a Medi-Cal recipient only have two acupuncture appointments per month, if that recipient is receiving any of these other optional benefits that month, their access to acupuncture (or any of the other optional benefits) would be further limited. The manual does allow for additional acupuncture services if approved via a treatment authorization request. Medi-Cal plans can technically offer more services than what is provided in fee-for-service Medi-Cal, though the fee-for-service rates and rules often guide what Medi-Cal plans offer as fee-for-service Medi-Cal is the baseline for developing the Medi-Cal plan rates. This bill would clarify that 24 acupuncture visits per Medi-Cal recipient are permitted without prior authorization, and additional visits as authorized.

In order to address a state budget crisis beginning in 2008, AB X3 5 (Evans, Chapter 20, Statutes of 2009) eliminated Medi-Cal coverage of several optional benefits, including those listed above along with psychology, optometry, optician, and optical laboratory services, incontinence creams and washes, and dental services. When the state's finances were on the rebound, the Legislature passed SB 833 (Committee on Budget and Fiscal Review, Chapter 30, Statutes of 2016) to restore acupuncture as a Medi-Cal benefit for all eligible members. For the past two years, the Administration proposed cutting adult acupuncture services as a cost-cutting measure to balance the state budget.

- 4) *Related legislation.* SB 944 (Wiener) requires the continued coverage of acupuncture in the Medi-Cal program, even if federal matching funds are no longer available. *SB 944 is set for hearing on June 9, 2026 in the Assembly Health Committee.*

- 5) *Prior legislation.* SB 833 (Committee on Budget and Fiscal Review, Chapter 30, Statutes of 2016) restored acupuncture as a Medi-Cal benefit for all eligible members, effective July 1, 2016.

AB X3 5 (Evans, Chapter 20, Statutes of 2009) eliminated Medi-Cal coverage of several optional benefits, including acupuncture.

- 6) *Support.* Sponsor the California Acupuncture Coalition writes in support stating that under the current utilization structure the two-visits-per-month framework, unless otherwise authorized, creates unintended barriers to care, disrupts continuity of treatment, and imposes administrative burdens on patients and providers alike. This bill addresses this issue in a balanced and thoughtful manner by establishing a clearly defined annual visit allotment for acupuncture services—while preserving DHCS’s authority to approve additional visits when medically necessary. By doing so, the bill allows treating practitioners to develop clinically appropriate treatment plans that reflect the need of the patient rather than arbitrary monthly constraints.

SUPPORT AND OPPOSITION:

Support: California Acupuncture Coalition (sponsor)
Academy of Chinese Culture and Health Sciences
AIDS Healthcare Foundation
Asian Americans Advancing Justice Southern California
California Acupuncture Board
Clever Care Health Plan
Dongguk University Los Angeles
Health Access California
North East Medical Services
U.S. Pain Foundation
United Acupuncture Association

Oppose: None received.

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