Date of Hearing: June 24, 2026

ASSEMBLY COMMITTEE ON APPROPRIATIONS
Buffy Wicks, Chair
SB 944 (Wiener) – As Introduced February 2, 2026

Policy Committee: Health Vote: 15 - 0

Urgency: No State Mandated Local Program: No Reimbursable: No

SUMMARY:

This bill requires the Medi-Cal program to cover acupuncture services even if federal matching funds are not available.

FISCAL EFFECT:

The Department of Health Care Services (DHCS) does not anticipate a fiscal impact as long as federal financial participation (FFP) remains available for acupuncture services. However, should FFP become unavailable for acupuncture services in the future, this bill requires Medi-Cal to cover these services with state-only funds. The May 2026 Medi-Cal Local Assistance Estimate projects savings of $13.6 million total funds ($5.4 million General Fund (GF) and $8.2 million federal funds (FF)) in 2026-27 from eliminating the Medi-Cal acupuncture benefit in January 2027. Thus, the cost of funding the benefit in the absence of federal matching funds would be approximately $27.2 million per year (GF).

COMMENTS:

1) **Purpose.** According to the author:

> [This bill]…ensures that regardless of the federal landscape, California will step up to ensure our most vulnerable communities are receiving the care they deserve. By enshrining acupuncture as a Medi-Cal covered benefit, [this bill] brings…Medi-Cal treats acupuncture in line with other forms of care such as occupational therapy, chiropractic care, physical therapy, optometric care, mental health services, pharmacy services, and a number of other critical benefits. By establishing acupuncture as a Medi-Cal provided benefit, [this bill] helps protect this critical form of care from federal funding cuts.

2) **Background.** Acupuncture services are covered in Medi-Cal to prevent, modify, or alleviate the perception of severe, persistent chronic pain resulting from a generally recognized medical condition. Outpatient acupuncture services are currently subject to a limit of two services in any one calendar month or any combination of two services per month from the following services: acupuncture, audiology, chiropractic, occupational therapy, podiatry and speech therapy. A patient may receive additional services based upon medical necessity through prior authorization. A Medi-Cal managed care plan may provide more generous acupuncture coverage at the plans' discretion.

3) **Related Legislation.** AB 1949 (Lee) requires the Medi-Cal program to cover up to 24 acupuncture visits per calendar year and allows Medi-Cal to authorize additional visits based on medical necessity. AB 1949 maintains the de facto annual limit of 24 services per year for acupuncture services, while allowing for a higher intensity of acupuncture treatment than twice per month. Like this bill, AB 1949 also would have required the Medi-Cal program to cover acupuncture, even if federal matching funds are no longer available; however, this committee amended AB 1949 to make the requirement that Medi-Cal cover acupuncture contingent on the availability of federal matching funds. AB 1949 is pending in the Senate Appropriations Committee.

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