



**BOARD MEETING
APPROVED MEETING MINUTES
November 6, 2025**

LOCATION:

Dongguk University Library
440 South Shatto Place
Los Angeles CA 90020

Remote Access via Web Ex Teleconference

Staff Present

Benjamin Bodea, Executive Officer
Brennan Meier, Legal Counsel
Jay Herdt, Licensing Manager
Kristine Brothers, Policy Coordinator
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 9:33 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 June 13, 2025

Members reviewed the minutes from the June 13, 2025, meeting.

MOTION

Vice-President Francisco Kim (VP Kim) motioned to approve the June 13, 2025, meeting minutes.

Board Member Ruben Osorio (Member Osorio) seconded.

Yes: Chen, Kim, Li, Osorio, Leung

5-0

Motion Passes

Item 4 – Discussion and Possible Adoption of Standards of Practice for Telehealth Services Rulemaking (16 CCR section 1399.452.1, Including Consideration of Comments Received and Modified Text)

Policy Coordinator Kristine Brothers (Brothers) presented an update on proposed regulations establishing standards for acupuncture services provided via telehealth. Public comments generally supported telehealth but asked for clearer scope-of-practice definitions, with emphasis on allowing nonphysical services and excluding hands-on treatments. The Board intentionally declined to narrowly define allowable services, opting instead for a flexible, factor-based framework, and recommended no changes in response to most comments.

One comment led to a modification clarifying that licensees may provide all services authorized under Business and Professions Code Section 4937, while retaining the term “acupuncture services” for consistency. Other comments opposing license disclosure requirements, raising cost concerns, or calling for additional penalties for unlicensed telehealth were not adopted, as existing law already addresses these issues and telehealth remains optional. Several comments expressed support for the proposal. Staff recommended adopting the proposed responses and modified text, which would require an additional 15-day public comment period before finalization.

VP Kim raised questions about whether telemedicine guidance such as instructing patients to perform acupressure or self-care techniques could be considered a billable treatment rather than merely a consultation. Ms. Brothers acknowledged that under the proposed language, virtual treatment could be considered treatment if clinically appropriate but emphasized that insurance coverage and billing are outside the Board's authority. President Chen pointed out insurance definitions and billing codes typically require skin penetration to qualify as acupuncture, meaning telehealth services would generally be reimbursed as consultations, not acupuncture treatments.

Executive Officer Bodea (E.O. Bodea) and Licensing Manager Jay Herdt (Herdt) clarified that the Board's role is not to redefine acupuncture, acupressure, or insurance billing practices. Instead, the regulation's purpose is to formally allow acupuncturists to offer telehealth services within their existing legal scope, as highlighted during the pandemic, while leaving reimbursement and coding issues to the profession and insurers.

Board Member Gregory Leung (Member Leung) raised concern about the potential abuse of telehealth, such as excessive calls or after-hours access. The response is that telehealth functions like in-person care: visits are scheduled, limited by practitioner availability, governed by standard business practices, and not intended for emergency or unlimited access.

MOTION

VP Kim motioned for the Board to direct staff to reject the action(s) requested in the comments, accept in part amendment suggested by comment #4, provide the responses to the comments (as indicated in the meeting materials), and approve the proposed modified text for a 15-day public comment period, direct staff to take all steps necessary to complete the rulemaking process, authorize the Executive Officer to make any technical or non-substantive changes to the proposed regulations, and adopt the enclosed modified text either as described in the proposed modified text or with any potential amendments, if no relevant, adverse comments are received within a modified text comment period.

Member Osorio seconded.

Yes: Chen, Kim, Li, Osorio, Leung

5-0

Motion Passes

Public Comment

The commenter highlighted two main points of concern: the definition of acupuncture (clarifying that practices like cupping or Gua sha are not considered acupuncture under the statute) and challenges around informed consent for telehealth patients, noting the need for clear communication and documentation.

Item 5 – Discussion and Possible Adoption of Retired Status; Retired Status; Restoration Rulemaking (16 CCR sections 1399.419.3 & 1399.460, Including Consideration of Comments Received)

Ms. Brothers explained that the agenda item on the Retired Status was a placeholder as no public comments were received by the end of the comment period, so there was nothing to discuss.

Item 6 – Discussion and Possible Action to Reconsider Previously Approved Text, Authorize Initiation of a New Rulemaking and to Adopt New Amendments to the Documents Incorporated by Reference in Section 1399.469 in Title 16 of the California Code of Regulations: “Disciplinary Guidelines and Uniform Standards Related to Substance Abusing Licensees (Revised October 2023)” and “Quarterly Report” (10/2023)

Ms. Brothers presented proposed revisions to the Board's disciplinary guidelines, which had not been updated since 1996, to align with current regulations and three bills: SB 1441 (uniform standards for substance-abusing licensees), SB 1448 (probation disclosure requirements), and AB 2138 (already implemented but now incorporated into the guidelines). Key changes include simplifying the document title by removing references

to the uniform standards, updating the revision date to reflect OAL approval, and incorporating quarterly report requirements directly into the guidelines while clarifying reporting periods and removing automatic probation extensions. Probation terms were also revised to restrict employment of acupuncture assistants, adjust cost recovery provisions, clarify examination and competency requirements, and refine supervised practice and billing monitor terms to address legal authority concerns. Additional edits include adding the Acupuncture Board logo, contact information, and correcting minor errors, with updated recommended penalties for violations such as fraud.

VP Kim motioned for the Board to rescind prior proposed text approved on October 26, 2023, and approve the newly proposed regulatory language and changes to Division 13.7, Articles 6.1, 6.2, and section 1399.469 of Title 16 of CCR, as provided in the materials, and...

Direct staff to submit the text to the Director of the Department of Consumer Affairs and the Business, Consumer Services, and Housing Agency for review. If no adverse comments are received, authorize the Executive Officer to take all steps necessary to initiate the rulemaking process, make any non-substantive changes to the package, and set the matter for a hearing if requested.

If no adverse comments are received during the 45-day comment period and no hearing is requested, authorize the Executive Officer to take all steps necessary to complete the rulemaking, and amend Division 13.7, Articles 6.1, 6.2, and section 1399.469 of Title 16 of CCR as noticed.

Member Osorio seconded.

Yes: Chen, Kim, Li, Osorio, Leung

5-0

Motion Passes

Public Comment

The commenter sought clarification on why certain penalties (restitution amounts, probation hours/years) are left blank and how they are determined. Ms. Brothers explained these are decided on a case-by-case basis by an administrative law judge or through stipulated settlements, with final approval by the Board. The commenter then raised concern about the use of the title "doctor" under Business and Professions Code Section 4936, specifically whether holders of discontinued OMD (Oriental Medical Doctor) certificates qualify. E.O. Bodea clarified the statute itself is not changing and that the discussion is limited to disciplinary guidelines when violations occur.

The Board recessed from 10:35 a.m.-10:55 a.m.

Roll Call taken at 10:55 a.m. All members present. Quorum established.

Item 7 – Executive Management Report

(A) Budget Update

Jennifer Tompkins (Tompkins) from the Department of Consumer Affairs (DCA) Budget Office presented the Board's Expenditure and Revenue Projections, and the Board's Fund Condition Statement. Ms. Tompkins noted that one of the main factors driving expenditure increases for the coming years is personal service adjustments which include general salary increases, employee compensation, and retirement rate adjustments. The Budget Office will continue to monitor the Board's revenue and expenditures then report back to the Board with expenditure projections as they continue to close fiscal months in the current fiscal year.

(B) Licensing Report Q4 2024-25 and Q1 2025-26

Mr. Herdt reported the data on Licensing, Continuing Education (CE), Tutorial, Training Programs, and Exam Results.

Member Osorio inquired whether the number of licenses has returned to pre-pandemic levels. Mr. Herdt explained license counts are roughly hovering around that level with a very slight overall decrease. Mr. Herdt notes contributing factors such as retirements among an aging group of licensees and out-of-state license holders choosing not to renew due to fee increases.

Member Leung expressed concern regarding the low level of compliance with wall license requirements relative to the number of active licenses and inquired about potential measures to improve compliance. Mr. Herdt explained the Board is working on outreach, reminders, and potential enforcement actions to improve compliance, though adoption has been slow and fines are typically modest. Member Leung emphasized the importance of wall licenses for consumer trust.

VP Kim noted many licensees maintain valid licenses without actively practicing. Mr. Herdt explained that canceled licenses occur automatically after three years of non-renewal and that a retired status helps distinguish voluntary retirement. Reasons for inactive practice was discussed, including lack of confidence, financial concerns, and challenges with insurance or running a business. Continuing Education (CE) providers remain steady though smaller providers offer courses sporadically and auditing ensures compliance.

(D) Business Modernization Update – Item moved up by the President

Key updates provided by Mr. Herdt include launching an automated CE audit system, moving all cashiering into a newer system to replace an older platform, and starting the development of an enforcement module with online complaint capabilities. Overall, the focus is on streamlining and modernizing licensing, education, and enforcement processes.

(C) Enforcement Report Q4 2024-25 and Q1 2025-26

E.O. Bodea reviewed the complaints/convictions, investigations, and disciplinary data for Q4 of the 2024-25 Fiscal Year (April 1 – June 30, 2025) and Q1 of the 2025-26 Fiscal Year (July 1 – September 30, 2025).

Member Leung asked how sexual misconduct complaints are handled, specifically whether police are notified. E.O. Bodea explained that police are informed only if the case involves an arrest or after an internal investigation, but the agency does not routinely notify police when a complaint is first received. Ms. Brothers adds that when investigators find sufficient evidence, cases can be referred to law enforcement or the district attorney for criminal investigation.

Public Comment

The first commenter asked about the next occupational analysis, E.O. Bodea responded that it is expected by the end of January 2026. The commenter added overall sexual misconduct cases are down, and cases are being resolved faster, praising the Board for improvements following legislative recommendations. The commenter also questioned the effectiveness of the wall license requirement, requesting data or analysis to justify the requirement.

The second commenter inquired whether schools could obtain exam-taker analysis reports to track graduate performance, identify weaknesses, and support students, noting difficulties tracking exam participation since exams moved online.

The third commenter asked whether findings from recent job analyses, especially regarding Western medicine and its integration with Traditional Chinese Medicine, have led to changes in the California Acupuncture Licensing Examination.

The Board recessed from 11:52 a.m.-12:11 p.m.

Roll Call taken at 12:11 p.m. All members present. Quorum established.

Item 8 – Legislative Report and Possible Action on Bills of Interest to the Board

Ms. Brothers reported on the outcome of the Bills of Interest the Board has been tracking this year.

Item 9 – Regulatory Report

Ms. Brothers provided the status of the Board's active regulatory packages.

Item 10 – Report and Possible Action on November 5, 2025, Licensing Committee Meeting

VP Kim reported on the discussion about doctoral education standards, noting the Board currently oversees only minimum competency and lacks authority over disputes between schools and accrediting bodies. VP Kim emphasized the key issue is the quality and modernization of education rather than externship hours, and calls for broader stakeholder involvement to update professional standards to meet evolving healthcare and market demands. VP Kim also mentioned a proposal to expand clinical externship options by allowing up to 50% of training to occur off campus, giving students more diverse clinical learning opportunities.

President Chen supports unifying the many existing acupuncture degree titles into fewer, standardized doctoral titles to reduce consumer confusion and strengthen public trust, emphasizing the Board's mission to protect consumers. President Chen noted that California programs already meet or exceed required training hours for professional doctorates and sees a broader trend toward doctoral-level entry into the profession, though such a change would require legislation and consensus among schools. President Chen emphasized degree changes must focus on meaningful educational content and clinical competence, not just increased hours or titles, and encourages schools to collaborate, assess feasibility, and ensure graduates can practice safely and independently.

Member Osorio reinforced the idea that adopting a doctoral degree would significantly increase patient confidence in acupuncturists.

Board Member Shudong Li (Member Li) believes acupuncturists already receive solid training and that using a doctoral title would further enhance public confidence and trust. Member Li sees the title change as beneficial for improving perceived quality and public support for the profession.

Public Comment

The first commenter urged the Board to compile the issues discussed and formally communicate them to the Joint Legislative Review Committee, noting that many require legislation. The commenter suggests developing an acupuncture modernization act similar to efforts already undertaken by chiropractors and emphasizes that legislative change is more effective when initiated by the Board.

The second commenter expressed support for entry-level doctoral programs, highlighting benefits for students' knowledge, skills, and professional training. The speaker also endorsed using Artificial Intelligence technology in education and clinical practice to improve proficiency.

The third commenter stressed that acupuncture education should now require a doctoral degree at the entry level. The speaker stressed coordination between educators and the profession to standardize the doctoral program, incorporating research on neural mechanisms and evidence-based acupuncture practices.

Item 11 – Report and Possible Action on November 5, 2025, Enforcement Committee Meeting

E.O Bodea reported that the committee approved the March meeting minutes and reviewed the draft of the Consumer's Guide to Acupuncture Brochure. The guide is still a draft focused on content, emphasizing the consumer perspective such as verifying licenses, checking clinic postings, and understanding patient rights. Public recommendations were considered, but the Board cannot officially endorse specific treatments. The committee agreed to seek input from professional associations on defining acupuncture and updating the introduction to the practice, including modern perspectives.

Item 12 – Public Comments for Items not on the Agenda

Public Comment

The first commenter emphasized the need to strengthen public perception by establishing a proper four-year bachelor's degree before expanding master's and doctoral programs. The speaker affirmed their commitment to collaborating with accreditation bodies and other institutions to achieve these educational goals.

The second commenter noted many schools are closing due to a limited student market, professional restrictions like insurance issues, and competition from newly approved schools with fewer restrictions. The speaker suggested the need for discussions on ensuring quality, assessing market demand, and possibly implementing regional arrangements to reduce unfair competition and support the sustainability of acupuncture education programs.

Item 13 – Future Agenda Items

Member Leung asked whether there is data on combining Eastern and Western medicine to benefit patients. President Chen responded by acknowledging the efforts in California hospitals but highlighted two main challenges: access (few programs and restrictions on treating patients due to liability) and readiness (acupuncturists need high-level qualifications comparable to primary-care doctors to integrate into mainstream hospital-based healthcare). President Chen emphasized that while there are opportunities, the profession must be prepared to meet strict standards before widespread adoption.

VP Kim proposed adding a future agenda item on curriculum updates but suggested stakeholders meet first to discuss and reach consensus before bringing it to the Board.

President Chen suggested allowing stakeholders to provide feedback before revisiting the item.

Public Comment

The first commenter recommended the Board should review not just the curriculum content but also the approval process, especially since the Board no longer conducts site visits for curriculum schools.

The second commenter, a patient who uses acupuncture for spinal cord injury treatment, highlighted Singapore's recent initiative to integrate TCM with Western medicine. The speaker encouraged U.S. acupuncture stakeholders to unite and learn from Singapore's approach

Item 16 – Adjournment

President Chen adjourned the meeting at or around 1:22 p.m.