

ADVOCACY NEWS

Keeping you informed from Washington, D.C.

September 16, 2026

States Act to Address AI Accountability

State legislative activity at the intersection of artificial intelligence and health care continues to evolve. In **California**, newly enacted [legislation](#) will, beginning in 2029, establish an AI Auditor Registry, prohibit unregistered entities from offering, selling, or conducting covered AI audits, and establish standards related to auditors' independence, objectivity, and integrity.

In **Florida**, the state's attorney general released a [legislative proposal](#) to hold companies that own, control, or distribute AI systems liable when those systems participate in criminal conduct. Companies found liable could face state fines, be required to compensate victims, and be subject to court-ordered monitoring.

As a resource to state medical boards, FSMB's Advocacy Office recently released [Artificial Intelligence \(AI\) State, Federal, and Judicial Landscape](#), a policy memo examining AI-related developments since 2025 and their potential implications for state medical boards. The memo is intended for informational purposes only; it is not exhaustive and does not endorse any specific legislation, policy, or regulatory framework. Additionally, FSMB maintains a publicly available, live legislative tracker on AI that can be accessed [here](#).

Please [contact us](#) if you have any questions!



Carolyn Mullen

Senior Vice President, Government Affairs

Federation of State Medical Boards

(202) 463-4000 | cmullen@fsmb.org



Pending Legislation of Interest

Artificial Intelligence

The [People-First Chatbot Act \(H.R. 9619\)](#), introduced by **Rep. Valerie Foushee (D-NC)**, would establish consumer privacy, transparency, and data-security requirements for AI chatbot providers. The bill would restrict the use, sale, and extended retention of users' personal data and chat logs; require affirmative consent for certain advertising or training uses and parental consent for users believed to be minors; and prohibit retaliation against users who decline consent. The bill would also require clear disclosures that users are interacting with AI rather than a person, give users access to downloadable chat logs and deletion options, and require providers to maintain data-security programs and conduct recurring risk assessments.

Regulatory News

Accreditation

On August 19, the **Dept. of Education** issued its Accreditation, Innovation and Modernization (AIM) **Notice of Proposed Rulemaking (NPRM)** proposing significant changes to federal accreditation requirements, including a greater emphasis on measurable student outcomes and return on investment, academic freedom, civil rights compliance, research integrity and increased competition among accreditors. Accreditors would be required to assess program-level outcomes such as licensure exam performance, completion and post-graduation outcomes, as well as economic returns relative to the cost and length of a program. The proposal also strengthens requirements separating accrediting agencies from affiliated professional or trade associations, including restrictions on shared personnel, facilities, technology and other resources. The NPRM builds on an April 2025 executive order "**Reforming Accreditation to Strengthen Higher Education**," which was critical of the recruitment and retention of diverse students by the Liaison Committee on Medical Education (LCME) and Accreditation Council for Graduate Medical Education (ACGME), which it called "unlawful discrimination." **Comments are due September 21, 2026.**

Administration Appointments

On September 8, the **Dept. of Health and Human Services (HHS)** **announced** the selection of four senior leaders at the **Food and Drug Administration (FDA)**:

- Jared Seehafer, MS, Deputy Commissioner for Technology and AI;
- Michael Davis, MD, Director of the Center for Drug Evaluation and Research (CDER);
- Karim Mikhail, BPharm, Director of the Center for Biologics Evaluation and Research (CBER);
- and
- Bret Koplrow, PhD, Director of the Center for Tobacco Products (CTP).

Behavioral Health

On September 9, **HHS** **announced** \$383.4 million in **Substance Abuse and Mental Health Services Administration (SAMHSA)** grant funding to strengthen behavioral health treatment, prevention, and crisis response nationwide. \$252 million will support the 988 Suicide & Crisis Lifeline, suicide prevention, and mobile crisis services; \$81.4 million for substance use treatment and prevention; and \$50 million towards mental health programs and initiatives.

Rural Health

On September 4, **HHS** **announced** \$11.2 million in **Health Resources and Services Administration (HRSA)** grant funding towards new **Rural Residency Planning and Development (RRPD) programs** in family medicine, internal medicine, preventive medicine, psychiatry, and general surgery in rural and tribal communities in 14 states. Each award recipient will receive up to \$750,000 over three years to support the planning and development activities needed to establish a new rural residency program.

Judicial News

Reproductive Care

On September 9, a federal appeals court **heard** arguments in *Louisiana v. Food and Drug Administration (FDA)* that **FDA** approval of mifepristone and subsequent agency actions allowing the drug to be prescribed through telehealth and dispensed by mail infringe upon the state's right to prohibit abortion within state borders. Several states have filed similar lawsuits which are currently proceeding through the judicial process.



State Legislative News

Pending Legislation of Interest

Healthcare Professionals' Scope of Practice

Ohio HB 1004 – Expands pharmacists' scope of practice to allow dispensing oral contraceptives and nicotine replacement therapies to adults 18 years and older, provided they complete specified training. The Board of Pharmacy must promulgate rules and submit a draft protocol to the State Medical Board for review.

Regulatory News

Board Structure and Function

The **Oregon Medical Board** finalized a [rule](#) implementing [HB 5022](#) (2025), which authorized a 20 percent increase to license registration fees, effective March 1, 2028, raising fees from \$314 to \$375 for MD/DOs; from \$239 to \$287 for PAs; from \$201 to \$242 for acupuncturists; and from \$304 to \$365 for podiatrists.

The **Tennessee Board of Medical Examiners** issued a [proposed rule](#) to modify initial and renewal licensure for polysomnographic technologists, allowing for online applications, requiring proof of legal standing in the US, providing requirements for trainees, revising renewal dates and methods, requiring completion of continuing education requirements, and providing for licensure reinstatement and retirement.

The **Virginia Board of Medicine** issued a [final rule](#) that establishes licensure by endorsement for surgical assistants and surgical technologists, requiring applicants to submit evidence of a license in good standing in the U.S. or Canada, a completed application and fee, verification of a professional credential, and a current report from the National Practitioner Data Bank. The **Virginia Board of Medicine** also issued a [final rule](#) that establishes licensure by endorsement under these same conditions for respiratory therapists. This rule also removed existing language that required respiratory therapists licensed out of state to provide to the Board documentation of the completion of 20 continuing education hours.

Opioids

The **Virginia Board of Medicine** issued a [final rule](#) that provides that a patient who is prescribed buprenorphine and declines counseling may still receive office-based buprenorphine care for opioid use disorder.

FSMB Legislative Trackers

FSMB maintains free, live legislative trackers for topics impacting medical regulation and the practice of medicine: [artificial intelligence](#), [board authority](#), [board structure and function](#), [continuing medical education](#), [gender-affirming care](#), [IMGs](#), [internationally trained physicians](#), [licensure compacts](#), [license portability](#), [occupational licensing reform](#), [physician sexual misconduct](#), [prescribing practices](#), [reproductive care](#), and [telemedicine](#).

Contact

If you have questions regarding specific legislation, please contact [John Bremer](#), Managing Director, Advocacy and Policy, at jbremmer@fsmb.org, or by phone at (202) 463-4021; or [Andrew Smith](#), Manager, Legislation and Policy, at asmith@fsmb.org or by phone at (202) 463-2002.

This email is not intended as an exhaustive or comprehensive statement of the law on this topic. It does not constitute legal advice. Non-cited laws, regulation, and/or policy could impact analysis on a case-by-case or state-by-state basis. All information should be verified independently, as these areas of law change rapidly and there is no guarantee that the information presented reflects the current state of law and policy. If you have any questions about the contents of this document, please contact FSMB staff.



Resources for Regulators

- [Resources for FSMB Members](#)
- [Pathway to Medical Licensure in the U.S.](#)
- [Journal of Medical Regulation](#)



Meetings & Events

April 15-17, 2027: FSMB Annual Meeting, Oklahoma City, Oklahoma

[more meetings & events](#)

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Texas Office: 400 Fuller Wiser Road, Euless, TX 76039
Telephone: (817) 868-4000

Washington, D.C. Office: 1775 Eye St. NW Suite 410, Washington, D.C. 20006
Telephone: (202) 463-4000



Federation of State Medical Boards | 400 Fuller Wiser Road | Euless, TX 76039 US

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