

AMENDED IN ASSEMBLY APRIL 10, 2007

CALIFORNIA LEGISLATURE—2007—08 REGULAR SESSION

ASSEMBLY BILL

No. 158

Introduced by Assembly Member Ma

January 18, 2007

An act to add Part 8 (commencing with Section 122430.10) to Division 105 of the Health and Safety Code, relating to public health, and making an appropriation therefor.

LEGISLATIVE COUNSEL'S DIGEST

AB 158, as amended, Ma. Public health.

Existing law establishes the State Department of Public Health and sets forth its duties and responsibilities, including, but not limited to, responsibilities related to the development and implementation of a hepatitis C public education and outreach program.

This bill would require the department to establish a hepatitis B prevention and management pilot program within its Office of Multi-Cultural Health to provide matching grants to public and not-for-profit organizations in the Los Angeles area and the San Francisco Bay area for the purposes of providing culturally and language appropriate public awareness and other activities relating to the prevention and management of hepatitis B.

This bill would establish the Hepatitis B Prevention and Management Pilot Program Fund, the moneys in which would be used by the department exclusively for purposes of this bill, and would appropriate \$4,000,000 from the General Fund to the department for deposit into the fund. The bill would require the department to report to the Legislature by January 1, 2010.

~~Existing law establishes a Legislative Task Force on Diabetes and Obesity, consisting of specified members, to study the factors contributing to the high rates of diabetes and obesity in Latinos, African-Americans, Asian Pacific Islanders, and Native Americans in this country, and declares that the task force is to prepare a report containing recommendations regarding ways to reduce the incidence of those debilitating conditions in these ethnic groups.~~

~~Existing law establishes various public health programs administered by the State Department of Health Services, with administration of these programs to be transferred to the State Department of Public Health on July 1, 2007.~~

~~This bill would declare the intent of the Legislature to enact legislation that would, among other things, establish a program, administered by the State Department of Public Health, to provide education, outreach, counseling, and social services to ethnic populations that are at high risk of hepatitis and diabetes.~~

~~Vote: majority ²/₃. Appropriation: no-yes. Fiscal committee: no yes. State-mandated local program: no.~~

The people of the State of California do enact as follows:

1 SECTION 1. Part 8 (commencing with Section 122430.10) is
2 added to Division 105 of the Health and Safety Code, to read:

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4

PART 8. HEPATITIS B

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6 122430.10. The Legislature finds and declares all of the
7 following:

8 (a) Approximately 1.4 million Americans are chronically
9 infected with the hepatitis B virus (HBV).

10 (b) HBV is extremely infectious, transmitted from mother to
11 newborn at birth, through infected blood or injections
12 contaminated by infected blood, and through unprotected sex.

13 (c) Persons chronically infected with HBV are at a higher risk
14 of developing cirrhosis of the liver or liver cancer.

15 (d) Asian Pacific Islander Americans make up more than
16 one-half of HBV carriers in the United States.

17 (e) Liver cancer that is primarily caused by HBV is the leading
18 cause of cancer death among Asian Pacific Islander men living in

1 *California and is the most significant health disparity between*
2 *Asian Pacific Islanders and Caucasians.*

3 *(f) Chinese Americans have a three to four times higher risk for*
4 *liver cancer caused by HBV than Caucasian Americans.*

5 *(g) Korean Americans have a five to six times higher risk for*
6 *liver cancer caused by HBV than Caucasian Americans.*

7 *(h) Vietnamese Americans have a seven to eight times higher*
8 *risk for liver cancer caused by HBV than Caucasian Americans.*

9 *(i) There exists a vaccination for HBV that is safe, effective,*
10 *and widely available.*

11 *(j) Early diagnosis of HBV can reduce the risk of further*
12 *transmission and, where appropriate, treatment can reduce the*
13 *risk of progression to liver cancer. HBV diagnosis can be made*
14 *with a simple blood test.*

15 *(k) Regular monitoring of those chronically infected with HBV*
16 *can lead to the detection of liver cancer at a stage where cure is*
17 *still possible.*

18 *(l) The annual health care cost attributable to HBV in the United*
19 *States is estimated to be approximately \$2.5 billion.*

20 *122430.15. (a) The State Department of Public Health shall*
21 *establish within its Office of Multi-Cultural Health, a hepatitis B*
22 *prevention and management pilot program to provide education,*
23 *outreach, counseling, and social services to ethnic populations*
24 *that are at high risk of hepatitis B infection and to individuals*
25 *among those populations suffering from this disease.*

26 *(b) The program shall utilize existing programs and systems*
27 *operated by public and not-for-profit organizations to provide the*
28 *services described in subdivision (a).*

29 *(c) The department shall make and administer grants to the*
30 *public and not-for-profit organizations from funds appropriated*
31 *by the Legislature or donated to the state in order to provide these*
32 *services.*

33 *122430.20. (a) There is hereby established the Hepatitis B*
34 *Prevention and Management Pilot Program Fund.*

35 *(b) The fund shall be available to the Office of Multi-Cultural*
36 *Health in the department, upon appropriation of the Legislature,*
37 *exclusively for to the support of existing and ongoing programs*
38 *operated by nonprofit or academic organizations that provide*
39 *culturally and language appropriate health education, public*
40 *awareness campaigns, and community outreach activities,*

1 especially to the ethnic communities with high rates of hepatitis
2 B infection and other high-risk groups, to promote public
3 awareness and knowledge about the value of hepatitis B
4 immunization, risk factors, the transmission and prevention of
5 hepatitis B, and the value of screening for early detection of
6 hepatitis B infection, and to conduct at least two of the following:
7 (1) Testing programs to screen the high chronic hepatitis B
8 prevalence populations in order to identify chronically infected
9 individuals, and provide vaccines to protect susceptible adults.
10 (2) Programs for high-prevalence populations that provide
11 client-centered information, education, and counseling
12 concentrating on any of the following:
13 (A) Testing of family members.
14 (B) Modifying behaviors that place individuals at risk of
15 hepatitis B virus infection.
16 (C) Reducing the risk of dying from end-stage liver disease or
17 liver cancer among individuals with hepatitis B.
18 (D) Culturally appropriate health information for pregnant
19 women or those of childbearing age who are chronically infected
20 with hepatitis B to alleviate their fears of becoming pregnant or
21 raising a family.
22 (E) Referring persons with chronic hepatitis B for further
23 medical evaluation, monitoring, and treatment, as appropriate.
24 (3) The training of health care professionals and health
25 educators to make them aware of the high rates of chronic hepatitis
26 B in certain adult ethnic populations, and the importance of
27 prevention, detection, and medical management of hepatitis B and
28 of liver cancer screening.
29 (c) Funds appropriated to the fund shall be distributed to
30 nonprofit or academic organizations in the greater Los Angeles
31 and San Francisco Bay areas that during 2007 met the requirement
32 set forth in subdivision (b) and have conducted at least two or
33 more of the programs set forth in subdivision (b).
34 (d) In order to receive distributions from the fund, a recipient
35 organization shall do all of the following:
36 (1) Submit audited financial statements setting forth its
37 expenditures made in 2007 for activities described in subdivision
38 (b) to demonstrate a history of successfully providing those
39 services, including, but not limited to, conducting two or more of
40 the programs as set forth in subdivision (b), along with a report

1 *on the specific activities engaged in and an analysis of the impact*
2 *of the programs and activities.*

3 *(2) Commit to using all distributions from the fund in the*
4 *2008–09 fiscal year to meet the requirements of subdivision (b),*
5 *including conducting two or more of the programs set forth in*
6 *subdivision (b).*

7 *(3) Submit audited financial statements setting forth*
8 *expenditures made in the 2008–09 fiscal year demonstrating that*
9 *it has met the requirements of subdivision (b), including, but not*
10 *limited to, successfully conducting two or more of the programs*
11 *set forth in subdivision (b) during that fiscal year.*

12 *122430.25. Distributions from the fund shall be on a matching*
13 *dollar-for-dollar basis for each organization’s expenditures up to*
14 *the total amount of funds available in the fund. However, funds*
15 *shall be distributed equally between the two geographic areas.*

16 *122430.30. The department shall report to the Legislature by*
17 *January 1, 2010, regarding implementation, and recommendations*
18 *regarding, the pilot program.*

19 *SEC. 2. The sum of four million dollars (\$4,000,000) is hereby*
20 *appropriated from the General Fund to the State Department of*
21 *Public Health for deposit into the Hepatitis B Prevention and*
22 *Management Pilot Program Fund established pursuant to Section*
23 *122430.20 of the Health and Safety Code.*

24 ~~SECTION 1. The Legislature finds and declares all of the~~
25 ~~following:~~

26 ~~(a) Asian Pacific Islander Americans make up more than~~
27 ~~one-half of the 1.4 million hepatitis B virus (HBV) carriers in the~~
28 ~~United States; 1 out of 10 are chronically infected.~~

29 ~~(b) Liver cancer that is primarily caused by HBV is the leading~~
30 ~~cause of cancer death among Asian Pacific Islander men living in~~
31 ~~California and is the most significant health disparity between~~
32 ~~Asian Pacific Islanders and Caucasians.~~

33 ~~(c) Chinese Americans have a five to six times higher risk for~~
34 ~~liver cancer caused by HBV than Caucasian Americans.~~

35 ~~(d) Korean Americans have an eight times higher risk for liver~~
36 ~~cancer caused by HBV than Caucasian Americans.~~

37 ~~(e) Vietnamese Americans have a 13 times higher risk for liver~~
38 ~~cancer caused by HBV than Caucasian Americans.~~

- 1 ~~(f) African-Americans (10.3 percent) and Native Americans~~
- 2 ~~(9.3 percent) living in California have higher rates of diabetes~~
- 3 ~~compared to Caucasians (5.6 percent).~~
- 4 ~~(g) Hispanic/Latino Americans are 1.7 times more likely to have~~
- 5 ~~diabetes compared to Caucasians.~~
- 6 ~~(h) Gestational diabetes occurs more frequently among~~
- 7 ~~Hispanic/Latino Americans, African-Americans, and Native~~
- 8 ~~Americans.~~
- 9 ~~SEC. 2. It is the intent of the Legislature to enact legislation~~
- 10 ~~that would do all of the following:~~
- 11 ~~(a) Establish a program to provide education, outreach,~~
- 12 ~~counseling, and social services to ethnic populations that are at~~
- 13 ~~high risk of hepatitis and diabetes and to individuals among those~~
- 14 ~~populations suffering from these diseases.~~
- 15 ~~(b) Utilize existing programs and systems operated by public~~
- 16 ~~and not-for-profit organizations to provide the services described~~
- 17 ~~in subdivision (a).~~
- 18 ~~(c) Direct the State Department of Public Health to make and~~
- 19 ~~administer grants to the public and not-for-profit organizations~~
- 20 ~~from funds appropriated by the Legislature or donated to the state~~
- 21 ~~in order to provide these services.~~