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CALIFORNIA LEGISLATURE—2009—10 REGULAR SESSION

ASSEMBLY BILL

No. 52

Introduced by Assembly Member Portantino

(Principal coauthor: Assembly Member Anderson)

**(Coauthors: Assembly Members Bass, Block, Blumenfield,
Buchanan, Cook, Huffman, Jones, Ma, Salas, Swanson, and
Torlakson)**

(Principal coauthor: Senator Alquist)

(Coauthors: Senators DeSaulnier, Leno, Padilla, Price, and Yee)

December 2, 2008

An act to amend Sections 1627, 1628, and 1630 of, and to amend, repeal, and add Sections 102247, 103605, and 103625 of, the Health and Safety Code, relating to umbilical cord blood banking, and declaring the urgency thereof, to take effect immediately.

LEGISLATIVE COUNSEL'S DIGEST

AB 52, as amended, Portantino. Umbilical Cord Blood Collection Program.

Existing law requires the State Department of Public Health to establish, by January 1, 2010, and until January 1, 2015, the Umbilical Cord Blood Collection Program for the purpose of increasing the amount of umbilical cord blood that is donated in the state and that will be added to the national inventory. Existing law authorizes the department, to the extent private or public funds are identified for this purpose, to contract with blood banks that are licensed or accredited to provide umbilical cord blood banking storage services, for the purpose of collecting and storing umbilical cord blood.

This bill would, instead, ~~to the extent adequate federal funding, as determined by the University of California (UC), is appropriated to UC,~~ request ~~UC~~ *the University of California* to establish and administer the Umbilical Cord Blood Collection Program on or before July 1, 2011, to conclude no later than ~~December 31, 2021~~ *January 1, 2018*, for the purpose of collecting units of umbilical cord blood for public use, as defined, for transplantation and for providing nonclinical units for specified research.

Existing law provides that any funds made available for purposes of the program shall be deposited into the Umbilical Cord Blood Collection Program Fund. Existing law provides that moneys in the fund shall be available, upon appropriation by the Legislature, for purposes of the program. Existing law provides that the fund shall include any federal, state, and private funds made available for purposes of the program.

Existing law requires the collection of a \$7 fee for certified copies of birth certificates.

Under existing law, \$4 of the \$7 fee is allocated to either the county Children's Trust Fund or to the State Children's Trust Fund, which exists in the State Treasury. Existing law requires that the money in the State Children's Trust Fund, upon appropriation by the Legislature, be allocated to the State Department of Social Services for the purpose of funding child abuse and neglect prevention and intervention programs, as specified.

This bill would, instead, until January 1, ~~2022~~ *2018*, require the collection of a \$9 fee for certified copies of birth certificates and require that \$2 of any \$9 fee be paid to the Umbilical Cord Blood Collection Program Fund.

This bill would provide that it is the intent of the Legislature that the University of California implement the program when the Controller determines, by an unspecified date, that at least an unspecified amount, including both federal and private moneys and the above-described

fees, is available in the fund. The bill would provide that no moneys shall be expended from the fund to implement the program unless and until ~~UC~~ *the University of California* accepts the request to establish and administer the program and the Controller ~~determines, by an unspecified date, that at least an unspecified amount is available in the fund~~ *makes the above-described determination*, and would provide, if this determination is not made, for a prescribed distribution of the money in the fund.

This bill would declare that it is to take effect immediately as an urgency statute.

Vote: $\frac{2}{3}$. Appropriation: no. Fiscal committee: yes.

State-mandated local program: no.

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

1 SECTION 1. The Legislature finds and declares all of the
2 following:

3 (a) Although rich in stem cells known as hematopoietic stem
4 and progenitor cells (HSPCs), the blood within the umbilical cord
5 and placenta is mostly discarded as medical waste following the
6 birth of a child. The relatively small number of units of cord blood
7 that are stored for transplantation are used to treat blood cancers,
8 such as leukemia, myeloma, and lymphoma, and more than 70
9 inherited immunodeficiencies and other genetic and acquired blood
10 diseases, including sickle cell anemia, thalassemias,
11 hemoglobinopathies, aplastic anemias, marrow failure disorders,
12 and inherited disorders or errors of metabolism.

13 (b) Conducted after birth, the cord blood donation procedure is
14 quick, painless, and risk free to the child and mother. The harvested
15 cord blood is immediately shipped, processed, sorted, labeled,
16 stored, and frozen. Since the first transplant in 1988, as its use for
17 transplantation has steadily increased, the unique handling of cord
18 blood has been the subject of both recent and pending regulation
19 by the United States Food and Drug Administration (FDA).

20 (c) Although only one-third of all harvested cord blood has
21 sufficient stem cells to be suitable for transplantation as currently
22 practiced, the rest may be valuable to university-based and private
23 research facilities that continue to search for cures for some of our
24 most common and perplexing medical conditions. The uses for
25 cord blood are quickly evolving and have created great excitement

1 among researchers and physicians. For example, cord blood derived
2 from stem and progenitor cells may also be particularly suitable
3 candidates for conversion into induced pluripotent stem cells
4 (IPSCs) derived by modifying only four stem cell-associated genes.
5 This modification causes the cord blood stem cells to exhibit the
6 essential characteristics of embryonic stem (ES) cells, the potential
7 to differentiate into all tissues of the body. Since cord blood stem
8 and progenitor cells per se are very early cells that have great
9 proliferative capacity, and they already are banked for public use,
10 tested, and HLA-typed, they could well become the premier source
11 of optimal cells to convert to IPSCs and might, arguably, provide
12 an individual a lifetime of personalized replaceable tissue.

13 (d) Cord blood units that are appropriate for transplantation are
14 used to treat more than 70 lethal diseases, but the current inventory
15 is not only unable to accommodate the overall demand, but
16 especially fails to properly provide matched units for many ethnic
17 and racial groups, including multicultural individuals. According
18 to the United States Government Accountability Office (GAO)
19 and the National Marrow Donor Program, over 10,000 children
20 and adults in the United States would benefit annually from a
21 transplant from someone unrelated to them, but less than 30 percent
22 actually receive one largely due to an inadequate inventory.

23 (e) Unlike bone marrow, cord blood can provide good clinical
24 outcomes with less than a perfect match to the patient. However,
25 to transplanting physicians, both options are considered valuable.
26 A bone marrow donation requires an exact match and a live donor
27 who is willing and available to undergo a time-sensitive medical
28 procedure. With targeted collections and an adequate inventory,
29 cord blood can be stored frozen and made immediately available
30 upon need. This source of stem cells provides all races, ethnicities,
31 and multiracial individuals with an equal probability of a suitable
32 match.

33 (f) The goal of the California Umbilical Cord Blood Collection
34 Program is to increase the number of high quality umbilical cord
35 blood units from donors of diverse ethnic groups so that a suitable
36 match can be found for all patients in need of a transplant.

37 (g) The federal government established the C.W. Bill Young
38 Cell Transplantation Program (42 U.S.C. Sec. 274k) in part to
39 collect and maintain cord blood for public use in transplantation
40 and research. The goal of the federal program is to collect 150,000

1 genetically diverse units in an effort to provide patients of all
2 ethnicities an equal probability of receiving a clinical grade,
3 suitably matched unit of umbilical cord blood. The program,
4 implemented by the Health Resources and Services Administration
5 (HRSA) which is part of the United States Department of Health
6 and Human Services, has specified target collection goals for cord
7 blood units that will match patient populations that are
8 underrepresented in the national inventory.

9 (h) California has been a leader in stem cell research through a
10 number of previous and ongoing efforts. For example, California
11 pioneered the first sibling donor cord blood pilot project, and is a
12 world leader in the more general area of stem cell research and its
13 medical applications through the establishment and funding of the
14 California Institute of Regenerative Medicine (CIRM). This makes
15 California ideally situated to become the leader in harnessing the
16 therapeutic potential of nonhematopoietic cord blood-derived stem
17 and progenitor cells.

18 (i) Furthermore, California is home to the most ethnically diverse
19 population in the world with the highest birth rate in the nation of
20 550,000 per year. Cord blood donations from California will not
21 only serve the health needs of Californians, but help build a more
22 diverse inventory that can provide better matches for patients
23 throughout the world.

24 (j) In addition to directly saving lives, an increase in the
25 inventory of FDA-licensed cord blood stem cell units will save
26 the state, insurers, donors, and patients significant money now
27 being spent on lifetime treatments and relieve ongoing pain and
28 anguish of affected patients and their families.

29 SEC. 2. Section 1627 of the Health and Safety Code is amended
30 to read:

31 1627. (a) (1) On or before July 1, 2011, the University of
32 California is requested to develop a plan to establish and administer
33 the Umbilical Cord Blood Collection Program for the purpose of
34 collecting units of umbilical cord blood for public use in
35 transplantation and providing nonclinical units for research
36 pertaining to biology and new clinical utilization of stem cells
37 derived from the blood and tissue of the placenta and umbilical
38 cord. The program shall conclude no later than ~~December 31, 2021~~
39 *January 1, 2018*.

1 (2) For purposes of this article, “public use” means both of the
2 following:

3 (A) The collection of umbilical cord blood units from genetically
4 diverse donors that will be owned by the University of California.
5 This inventory shall be accessible by the National Registry and by
6 qualified California-based and other United States and international
7 registries and transplant centers to increase the likelihood of
8 providing suitably matched donor cord blood units to patients *or*
9 *research participants* who are in need of a transplant.

10 (B) Cord blood units with a lower number of cells than deemed
11 necessary for clinical transplantation and units that meet clinical
12 requirements, but for other reasons are ~~neither suitable nor likely~~
13 ~~to be transplanted~~ *unsuitable, unlikely to be transplanted, or*
14 *otherwise unnecessary for clinical use*, may be made available for
15 research.

16 (b) (1) In order to implement the collection goals of this
17 program, the University of California may, commensurate with
18 available funds appropriated to the University of California for
19 this program, contract with one or more selected applicant entities
20 that have demonstrated the competence to collect and ship cord
21 blood units in compliance with federal guidelines and regulations.

22 (2) It is the intent of the Legislature that, if the University of
23 California contracts with another entity pursuant to this subdivision,
24 the following shall apply:

25 (A) The University of California may use a competitive process
26 to identify the best proposals submitted by applicant entities to
27 administer the collection and research objectives of the program,
28 to the extent that the University of California chooses not to
29 undertake these activities itself.

30 (B) In order to qualify for selection under this section to receive,
31 process, cryopreserve, or bank cord blood units, the entity shall,
32 at a minimum, have obtained an investigational new drug (IND)
33 exemption from the FDA or a biologic license from the FDA, as
34 appropriate, to manufacture clinical grade cord blood stem cell
35 units for clinical indications.

36 (C) In order to qualify to receive appropriate cord blood units
37 and placental tissue to advance the research goals of this program,
38 an entity shall, at a minimum, be a laboratory recognized as having
39 performed peer-reviewed research on stem and progenitor cells,

1 including those derived from placental or umbilical cord blood
2 and postnatal tissue.

3 (3) A medical provider or research facility shall comply with,
4 and shall be subject to, existing penalties for violations of all
5 applicable state and federal laws with respect to the protection of
6 any medical information, as defined in subdivision (g) of Section
7 56.05 of the Civil Code, and any personally identifiable information
8 contained in the umbilical cord blood inventory.

9 (c) The University of California is encouraged to make every
10 effort to avoid duplication or conflicts with existing and ongoing
11 programs and to leverage existing resources.

12 (d) (1) All information collected pursuant to the program shall
13 be confidential, and shall be used solely for the purposes of the
14 program, including research. Access to confidential information
15 shall be limited to authorized persons who are bound by appropriate
16 institutional policies or who otherwise agree, in writing, to maintain
17 the confidentiality of that information.

18 (2) Any person who, in violation of applicable institutional
19 policies or a written agreement to maintain confidentiality,
20 discloses any information provided pursuant to this section, or
21 who uses information provided pursuant to this section in a manner
22 other than as approved pursuant to this section, may be denied
23 further access to any confidential information maintained by the
24 University of California, and shall be subject to a civil penalty not
25 exceeding one thousand dollars (\$1,000). The penalty provided
26 for in this section shall not be construed to limit or otherwise
27 restrict any remedy, provisional or otherwise, provided by law for
28 the benefit of the University of California or any other person
29 covered by this section.

30 (3) Notwithstanding the restrictions of this section, an individual
31 to whom the confidential information pertains shall have access
32 to his or her own personal information.

33 (e) *It is the intent of the Legislature that the plan and*
34 *implementation of the program provide for both of the following:*

35 (1) *Limit fees for access to cord blood units to the reasonable*
36 *and actual costs of storage, handling, and providing units, as well*
37 *as for related services such as donor matching and testing of cord*
38 *blood and other programs and services typically provided by cord*
39 *blood banks and public use programs.*

1 (2) *The submittal of the plan developed pursuant to subdivision*
2 *(a) to the health and fiscal committees of the Legislature.*

3 (f) *It is additionally the intent of the Legislature that the plan*
4 *and implementation of the program attempt to provide for all of*
5 *the following:*

6 (1) *Development of a strategy to increase voluntary participation*
7 *by hospitals in the collection and storage of umbilical cord blood*
8 *and identify funding sources to offset the financial impact on*
9 *hospitals.*

10 (2) *Consideration of a medical contingency response program*
11 *to prepare for and respond effectively to biological, chemical, or*
12 *radiological attacks, accidents, and other public health*
13 *emergencies where victims potentially benefit from treatment.*

14 (3) *Exploration of the feasibility of operating the program as*
15 *a self-funding program, including the potential for charging users*
16 *a reimbursement fee.*

17 SEC. 3. Section 1628 of the Health and Safety Code is amended
18 to read:

19 1628. (a) The University of California may accept public and
20 private funds for the purpose of implementing this article.

21 (b) Any fees collected pursuant to Section 103625 shall be
22 deposited into the Umbilical Cord Blood Collection Program Fund,
23 which is hereby created in the State Treasury. Moneys in the fund
24 shall be available, upon appropriation by the Legislature, for
25 purposes of this article.

26 (c) The fund may include additional federal, state, and private
27 funds made available for purposes of the program, including, but
28 not limited to, the fees collected for the fund pursuant to Section
29 103625, and, notwithstanding Section 16305.7 of the Government
30 Code, any interest earned on moneys in the fund.

31 (d) Nothing in this section shall preclude the University of
32 California from establishing and administering an additional fund
33 independent of the State Treasury in support of the program or
34 associated clinical research activities.

35 (e) (1) *It is the intent of the Legislature that the University of*
36 *California implement the program when the Controller determines,*
37 *by not later than _____, that at least _____ dollars (\$_____),*
38 *including both federal and private moneys and the fees collected*
39 *pursuant to Section 103625 for the program, is available in the*
40 *fund. No moneys shall be expended from the Umbilical Cord Blood*

1 Collection Program Fund to implement the program unless and
 2 until the University of California accepts the request and develops
 3 the plan described in paragraph (1) of subdivision (a) of Section
 4 1627, and the Controller determines, by not later than _____, that
 5 at least _____ dollars (\$_____), including both federal and private
 6 ~~moneys~~, that the funding, as specified pursuant to this paragraph,
 7 is available in the fund.

8 ~~(f) The Controller shall determine whether there is at least _____~~
 9 ~~dollars (\$_____)~~ available for implementation of the program. Once

10 (2) Once the Controller has determined that at least _____ dollars
 11 (\$_____) is available to implement the program, he or she shall
 12 distribute these funds, *contingent upon the appropriation of the*
 13 *funds to implement the program by the Legislature*. If the
 14 Controller has not made a determination on or before _____, that
 15 at least _____ dollars (\$_____) is available to implement the program,
 16 the amount in the fund shall be immediately distributed to each
 17 private contributor or the federal government in the amount
 18 contributed. The fund shall cease to exist thereafter.

19 (3) *Moneys appropriated by the Legislature to implement the*
 20 *program shall be available to the University of California for*
 21 *encumbrance or expenditure for three fiscal years beginning with*
 22 *the fiscal year in which the appropriation is made.*

23 (f) (1) *Funds shall be appropriated for the purposes of this*
 24 *article to the extent the plan the University of California is*
 25 *requested to develop pursuant to subdivision (a) of Section 1627*
 26 *and the implementation of the plan are consistent with the goals*
 27 *and intent of this article.*

28 (2) *In the event that funds are not appropriated for the program*
 29 *as described in this article, it is the intent of the Legislature that*
 30 *the University of California shall not implement the program.*

31 SEC. 4. Section 1630 of the Health and Safety Code is amended
 32 to read:

33 1630. ~~(a)~~ This article shall remain in effect only until January
 34 1, ~~2022~~ 2018, and as of that date is repealed, unless a later enacted
 35 statute, that is enacted before January 1, ~~2022~~ 2018, deletes or
 36 extends that date.

37 ~~(b) This article shall be implemented only to the extent that~~
 38 ~~adequate funding for its implementation, as determined by the~~
 39 ~~University of California, is appropriated to the University of~~
 40 ~~California in the annual Budget Act or another statute.~~

1 SEC. 5. Section 102247 of the Health and Safety Code is
2 amended to read:

3 102247. (a) There is hereby created in the State Treasury the
4 Health Statistics Special Fund. The fund shall consist of revenues,
5 including, but not limited to, all of the following:

6 (1) Fees or charges remitted to the State Registrar for record
7 search or issuance of certificates, permits, registrations, or other
8 documents pursuant to Chapter 3 (commencing with Section
9 26801) of Part 3 of Division 2 of Title 3 of the Government Code,
10 and Chapter 4 (commencing with Section 102525), Chapter 5
11 (commencing with Section 102625), Chapter 8 (commencing with
12 Section 103050), and Chapter 15 (commencing with Section
13 103600) of Part 1 of Division 102.

14 (2) Funds remitted to the State Registrar by the federal Social
15 Security Administration for participation in the enumeration at
16 birth program.

17 (3) Funds remitted to the State Registrar by the National Center
18 for Health Statistics pursuant to the federal Vital Statistics
19 Cooperative Program.

20 (4) Any other funds collected by the State Registrar, except
21 Children's Trust Fund fees collected pursuant to Section 18966 of
22 the Welfare and Institutions Code, Umbilical Cord Blood
23 Collection Program Fund fees collected pursuant to Section 1628,
24 fees allocated to the Judicial Council pursuant to Section 1852 of
25 the Family Code, and fees collected pursuant to Section 103645,
26 all of which shall be deposited into the General Fund.

27 (b) Moneys in the Health Statistics Special Fund shall be
28 expended by the State Registrar for the purpose of funding its
29 existing programs and programs that may become necessary to
30 carry out its mission, upon appropriation by the Legislature.

31 (c) Health Statistics Special Fund moneys shall be expended
32 only for the purposes set forth in this section and Section 102249,
33 and shall not be expended for any other purpose or for any other
34 state program.

35 (d) It is the intent of the Legislature that the Health Statistics
36 Special Fund provide for the following:

37 (1) Registration and preservation of vital event records and
38 dissemination of vital event information to the public.

1 (2) Data analysis of vital statistics for population projections,
2 health trends and patterns, epidemiologic research, and
3 development of information to support new health policies.

4 (3) Development of uniform health data systems that are
5 integrated, accessible, and useful in the collection of information
6 on health status.

7 (e) This section shall remain in effect only until January 1, ~~2022~~
8 ~~2018~~, and as of that date is repealed, unless a later enacted statute,
9 that is enacted before January 1, ~~2022~~ ~~2018~~, deletes or extends
10 that date.

11 SEC. 6. Section 102247 is added to the Health and Safety Code,
12 to read:

13 102247. (a) There is hereby created in the State Treasury the
14 Health Statistics Special Fund. The fund shall consist of revenues,
15 including, but not limited to, all of the following:

16 (1) Fees or charges remitted to the State Registrar for record
17 search or issuance of certificates, permits, registrations, or other
18 documents pursuant to Chapter 3 (commencing with Section
19 26801) of Part 3 of Division 2 of Title 3 of the Government Code,
20 and Chapter 4 (commencing with Section 102525), Chapter 5
21 (commencing with Section 102625), Chapter 8 (commencing with
22 Section 103050), and Chapter 15 (commencing with Section
23 103600) of Part 1 of Division 102.

24 (2) Funds remitted to the State Registrar by the federal Social
25 Security Administration for participation in the enumeration at
26 birth program.

27 (3) Funds remitted to the State Registrar by the National Center
28 for Health Statistics pursuant to the federal Vital Statistics
29 Cooperative Program.

30 (4) Any other funds collected by the State Registrar, except
31 Children's Trust Fund fees collected pursuant to Section 18966 of
32 the Welfare and Institutions Code, fees allocated to the Judicial
33 Council pursuant to Section 1852 of the Family Code, and fees
34 collected pursuant to Section 103645, all of which shall be
35 deposited into the General Fund.

36 (b) Moneys in the Health Statistics Special Fund shall be
37 expended by the State Registrar for the purpose of funding its
38 existing programs and programs that may become necessary to
39 carry out its mission, upon appropriation by the Legislature.

1 (c) Health Statistics Special Fund moneys shall be expended
2 only for the purposes set forth in this section and Section 102249,
3 and shall not be expended for any other purpose or for any other
4 state program.

5 (d) It is the intent of the Legislature that the Health Statistics
6 Special Fund provide for the following:

7 (1) Registration and preservation of vital event records and
8 dissemination of vital event information to the public.

9 (2) Data analysis of vital statistics for population projections,
10 health trends and patterns, epidemiologic research, and
11 development of information to support new health policies.

12 (3) Development of uniform health data systems that are
13 integrated, accessible, and useful in the collection of information
14 on health status.

15 (e) This section shall become operative on January 1, ~~2022~~
16 2018.

17 SEC. 7. Section 103605 of the Health and Safety Code is
18 amended to read:

19 103605. (a) The money collected by the State Registrar shall
20 be deposited with the Treasurer for credit to the Health Statistics
21 Special Fund, except for the Children’s Trust Fund fees collected
22 pursuant to Section 18966 of the Welfare and Institutions Code,
23 the Umbilical Cord Blood Collection Program Fund fees collected
24 pursuant to Section 1628, the fees allocated to the Judicial Council
25 pursuant to Section 1852 of the Family Code, and the fees collected
26 pursuant to Section 103645, all of which shall be deposited in the
27 General Fund.

28 (b) This section shall remain in effect only until January 1, ~~2022~~
29 2018, and as of that date is repealed, unless a later enacted statute,
30 that is enacted before January 1, ~~2022~~ 2018, deletes or extends
31 that date.

32 SEC. 8. Section 103605 is added to the Health and Safety Code,
33 to read:

34 103605. (a) The money collected by the State Registrar shall
35 be deposited with the Treasurer for credit to the Health Statistics
36 Special Fund, except for the Children’s Trust Fund fees collected
37 pursuant to Section 18966 of the Welfare and Institutions Code,
38 the fees allocated to the Judicial Council pursuant to Section 1852
39 of the Family Code, and the fees collected pursuant to Section
40 103645, all of which shall be deposited in the General Fund.

1 (b) This section shall become operative on January 1, ~~2022~~
2 2018.

3 SEC. 9. Section 103625 of the Health and Safety Code is
4 amended to read:

5 103625. (a) A fee of three dollars (\$3) shall be paid by the
6 applicant for a certified copy of a fetal death or death record.

7 (b) (1) A fee of three dollars (\$3) shall be paid by a public
8 agency or licensed private adoption agency applicant for a certified
9 copy of a birth certificate that the agency is required to obtain in
10 the ordinary course of business. A fee of nine dollars (\$9) shall be
11 paid by any other applicant for a certified copy of a birth certificate.
12 Four dollars (\$4) of any nine-dollar (\$9) fee is exempt from
13 subdivision (e) and shall be paid either to a county children's trust
14 fund or to the State Children's Trust Fund, in conformity with
15 Article 5 (commencing with Section 18965) of Chapter 11 of Part
16 6 of Division 9 of the Welfare and Institutions Code. Two dollars
17 (\$2) of any nine-dollar (\$9) fee is exempt from subdivision (e) and
18 shall be paid to the Umbilical Cord Blood Collection Program
19 Fund in conformity with Section 1628.

20 (2) The board of supervisors of any county that has established
21 a county children's trust fund may increase the fee for a certified
22 copy of a birth certificate by up to three dollars (\$3) for deposit in
23 the county children's trust fund in conformity with Article 5
24 (commencing with Section 18965) of Chapter 11 of Part 6 of
25 Division 9 of the Welfare and Institutions Code.

26 (c) A fee of three dollars (\$3) shall be paid by a public agency
27 applicant for a certified copy of a marriage record, that has been
28 filed with the county recorder or county clerk, that the agency is
29 required to obtain in the ordinary course of business. A fee of six
30 dollars (\$6) shall be paid by any other applicant for a certified
31 copy of a marriage record that has been filed with the county
32 recorder or county clerk. Three dollars (\$3) of any six-dollar (\$6)
33 fee is exempt from subdivision (e) and shall be transmitted monthly
34 by each local registrar, county recorder, and county clerk to the
35 state for deposit into the General Fund as provided by Section
36 1852 of the Family Code.

37 (d) A fee of three dollars (\$3) shall be paid by a public agency
38 applicant for a certified copy of a marriage dissolution record
39 obtained from the State Registrar that the agency is required to
40 obtain in the ordinary course of business. A fee of six dollars (\$6)

1 shall be paid by any other applicant for a certified copy of a
2 marriage dissolution record obtained from the State Registrar.

3 (e) Each local registrar, county recorder, or county clerk
4 collecting a fee pursuant to subdivisions (a) to (d), inclusive, shall
5 transmit 15 percent of the fee for each certified copy to the State
6 Registrar by the 10th day of the month following the month in
7 which the fee was received.

8 (f) In addition to the fees prescribed pursuant to subdivisions
9 (a) to (d), inclusive, all applicants for certified copies of the records
10 described in those subdivisions shall pay an additional fee of three
11 dollars (\$3), that shall be collected by the State Registrar, the local
12 registrar, county recorder, or county clerk, as the case may be.

13 (g) The local public official charged with the collection of the
14 additional fee established pursuant to subdivision (f) may create
15 a local vital and health statistics trust fund. The fees collected by
16 local public officials pursuant to subdivision (f) shall be distributed
17 as follows:

18 (1) Forty-five percent of the fee collected pursuant to subdivision
19 (f) shall be transmitted to the State Registrar.

20 (2) The remainder of the fee collected pursuant to subdivision
21 (f) shall be deposited into the collecting agency's vital and health
22 statistics trust fund, except that in any jurisdiction in which a local
23 vital and health statistics trust fund has not been established, the
24 entire amount of the fee collected pursuant to subdivision (f) shall
25 be transmitted to the State Registrar.

26 (3) Moneys transmitted to the State Registrar pursuant to this
27 subdivision shall be deposited in accordance with Section 102247.

28 (h) Moneys in each local vital and health statistics trust fund
29 shall be available to the local official charged with the collection
30 of fees pursuant to subdivision (f) for the applicable jurisdiction
31 for the purpose of defraying the administrative costs of collecting
32 and reporting with respect to those fees and for other costs as
33 follows:

34 (1) Modernization of vital record operations, including
35 improvement, automation, and technical support of vital record
36 systems.

37 (2) Improvement in the collection and analysis of health-related
38 birth and death certificate information, and other community health
39 data collection and analysis, as appropriate.

1 (i) Funds collected pursuant to subdivision (f) shall not be used
2 to supplant funding in existence on January 1, 2002, that is
3 necessary for the daily operation of vital record systems. It is the
4 intent of the Legislature that funds collected pursuant to subdivision
5 (f) be used to enhance service to the public, to improve analytical
6 capabilities of state and local health authorities in addressing the
7 health needs of newborn children and maternal health problems,
8 and to analyze the health status of the general population.

9 (j) Each county shall annually submit a report to the State
10 Registrar by March 1 containing information on the amount of
11 revenues collected pursuant to subdivision (f) in the previous
12 calendar year and on how the revenues were expended and for
13 what purpose.

14 (k) Each local registrar, county recorder, or county clerk
15 collecting the fee pursuant to subdivision (f) shall transmit 45
16 percent of the fee for each certified copy to which subdivision (f)
17 applies to the State Registrar by the 10th day of the month
18 following the month in which the fee was received.

19 (l) The additional three dollars (\$3) authorized to be charged to
20 applicants other than public agency applicants for certified copies
21 of marriage records by subdivision (c) may be increased pursuant
22 to Section 114.

23 (m) In providing for the expiration of the surcharge on birth
24 certificate fees on June 30, 1999, the Legislature intends that
25 juvenile dependency mediation programs pursue ancillary funding
26 sources after that date.

27 (n) This section shall remain in effect only until January 1, ~~2022~~
28 2018, and as of that date is repealed, unless a later enacted statute,
29 that is enacted before January 1, ~~2022~~ 2018, deletes or extends
30 that date.

31 SEC. 10. Section 103625 is added to the Health and Safety
32 Code, to read:

33 103625. (a) A fee of three dollars (\$3) shall be paid by the
34 applicant for a certified copy of a fetal death or death record.

35 (b) (1) A fee of three dollars (\$3) shall be paid by a public
36 agency or licensed private adoption agency applicant for a certified
37 copy of a birth certificate that the agency is required to obtain in
38 the ordinary course of business. A fee of seven dollars (\$7) shall
39 be paid by any other applicant for a certified copy of a birth
40 certificate. Four dollars (\$4) of any seven-dollar (\$7) fee is exempt

1 from subdivision (e) and shall be paid either to a county children's
2 trust fund or to the State Children's Trust Fund, in conformity with
3 Article 5 (commencing with Section 18965) of Chapter 11 of Part
4 6 of Division 9 of the Welfare and Institutions Code.

5 (2) The board of supervisors of any county that has established
6 a county children's trust fund may increase the fee for a certified
7 copy of a birth certificate by up to three dollars (\$3) for deposit in
8 the county children's trust fund in conformity with Article 5
9 (commencing with Section 18965) of Chapter 11 of Part 6 of
10 Division 9 of the Welfare and Institutions Code.

11 (c) A fee of three dollars (\$3) shall be paid by a public agency
12 applicant for a certified copy of a marriage record, that has been
13 filed with the county recorder or county clerk, that the agency is
14 required to obtain in the ordinary course of business. A fee of six
15 dollars (\$6) shall be paid by any other applicant for a certified
16 copy of a marriage record that has been filed with the county
17 recorder or county clerk. Three dollars (\$3) of any six-dollar (\$6)
18 fee is exempt from subdivision (e) and shall be transmitted monthly
19 by each local registrar, county recorder, and county clerk to the
20 state for deposit into the General Fund as provided by Section
21 1852 of the Family Code.

22 (d) A fee of three dollars (\$3) shall be paid by a public agency
23 applicant for a certified copy of a marriage dissolution record
24 obtained from the State Registrar that the agency is required to
25 obtain in the ordinary course of business. A fee of six dollars (\$6)
26 shall be paid by any other applicant for a certified copy of a
27 marriage dissolution record obtained from the State Registrar.

28 (e) Each local registrar, county recorder, or county clerk
29 collecting a fee pursuant to subdivisions (a) to (d), inclusive, shall
30 transmit 15 percent of the fee for each certified copy to the State
31 Registrar by the 10th day of the month following the month in
32 which the fee was received.

33 (f) In addition to the fees prescribed pursuant to subdivisions
34 (a) to (d), inclusive, all applicants for certified copies of the records
35 described in those subdivisions shall pay an additional fee of three
36 dollars (\$3), that shall be collected by the State Registrar, the local
37 registrar, county recorder, or county clerk, as the case may be.

38 (g) The local public official charged with the collection of the
39 additional fee established pursuant to subdivision (f) may create
40 a local vital and health statistics trust fund. The fees collected by

1 local public officials pursuant to subdivision (f) shall be distributed
2 as follows:

3 (1) Forty-five percent of the fee collected pursuant to subdivision
4 (f) shall be transmitted to the State Registrar.

5 (2) The remainder of the fee collected pursuant to subdivision
6 (f) shall be deposited into the collecting agency's vital and health
7 statistics trust fund, except that in any jurisdiction in which a local
8 vital and health statistics trust fund has not been established, the
9 entire amount of the fee collected pursuant to subdivision (f) shall
10 be transmitted to the State Registrar.

11 (3) Moneys transmitted to the State Registrar pursuant to this
12 subdivision shall be deposited in accordance with Section 102247.

13 (h) Moneys in each local vital and health statistics trust fund
14 shall be available to the local official charged with the collection
15 of fees pursuant to subdivision (f) for the applicable jurisdiction
16 for the purpose of defraying the administrative costs of collecting
17 and reporting with respect to those fees and for other costs as
18 follows:

19 (1) Modernization of vital record operations, including
20 improvement, automation, and technical support of vital record
21 systems.

22 (2) Improvement in the collection and analysis of health-related
23 birth and death certificate information, and other community health
24 data collection and analysis, as appropriate.

25 (i) Funds collected pursuant to subdivision (f) shall not be used
26 to supplant funding in existence on January 1, 2002, that is
27 necessary for the daily operation of vital record systems. It is the
28 intent of the Legislature that funds collected pursuant to subdivision
29 (f) be used to enhance service to the public, to improve analytical
30 capabilities of state and local health authorities in addressing the
31 health needs of newborn children and maternal health problems,
32 and to analyze the health status of the general population.

33 (j) Each county shall annually submit a report to the State
34 Registrar by March 1 containing information on the amount of
35 revenues collected pursuant to subdivision (f) in the previous
36 calendar year and on how the revenues were expended and for
37 what purpose.

38 (k) Each local registrar, county recorder, or county clerk
39 collecting the fee pursuant to subdivision (f) shall transmit 45
40 percent of the fee for each certified copy to which subdivision (f)

1 applies to the State Registrar by the 10th day of the month
2 following the month in which the fee was received.

3 (l) The additional three dollars (\$3) authorized to be charged to
4 applicants other than public agency applicants for certified copies
5 of marriage records by subdivision (c) may be increased pursuant
6 to Section 114.

7 (m) In providing for the expiration of the surcharge on birth
8 certificate fees on June 30, 1999, the Legislature intends that
9 juvenile dependency mediation programs pursue ancillary funding
10 sources after that date.

11 (n) This section shall become operative on January 1, 2022
12 2018.

13 SEC. 11. This act is an urgency statute necessary for the
14 immediate preservation of the public peace, health, or safety within
15 the meaning of Article IV of the Constitution and shall go into
16 immediate effect. The facts constituting the necessity are:

17 In order to fund efforts aimed at curing disorders and diseases
18 at the earliest possible time, it is necessary that this act take effect
19 immediately.