

AMENDED IN ASSEMBLY MARCH 28, 2016

CALIFORNIA LEGISLATURE—2015–16 REGULAR SESSION

ASSEMBLY BILL

No. 2399

Introduced by Assembly Member Nazarian

February 18, 2016

An act to amend Sections ~~123371~~ and 1627, 1630, 102247, 103625, 123371, 125055, and 125092 of the Health and Safety Code, relating to public health.

LEGISLATIVE COUNSEL'S DIGEST

AB 2399, as amended, Nazarian. Pregnancy: umbilical cord blood: blood testing.

~~Existing~~

(1) *Existing* law requires the State Department of Public Health to develop standardized, objective information about umbilical cord blood donation to enable a pregnant woman to make an informed decision regarding what she wants to do with the umbilical cord blood. Existing law requires that this information be made available in Cantonese, English, Spanish, and Vietnamese. Existing law prohibits public funds from being used by the department to provide awareness, assistance, and information regarding umbilical cord blood banking options and creates the Umbilical Cord Blood Education Account within the State Treasury, which is funded by private donations, to be used by the department for these purposes, as specified.

Existing law also requires a licensed physician and surgeon, or other person engaged in the prenatal care of a pregnant woman, to obtain a blood specimen from the woman for purposes of determining the presence of hepatitis B or human immunodeficiency virus (HIV). Existing law requires the ~~State Department of Public Health~~ *department*

to develop culturally sensitive informational material in English, Spanish, and other languages; languages to inform a pregnant woman about the purpose of obtaining this blood sample.

Existing law requires the department to develop an education program designed to educate physicians and the public concerning the uses of prenatal testing and the availability of the California Prenatal Screening Program. Existing law requires the department to include specified information in the patient educational information.

This bill would change the language requirements for the umbilical cord blood informational ~~material and material~~, the prenatal testing informational ~~material from those languages to material~~, and the patient educational information material to require the information to be provided in languages that meet a specified numeric threshold. The bill would also delete provisions that create the Umbilical Cord Blood Education Account and remove the prohibition against using public funds to provide information about umbilical cord blood banking.

(2) *Existing law requests the University of California to establish and administer the Umbilical Cord Blood Collection Program for the purpose of collecting units of umbilical cord blood for public use, as defined, in transplantation and 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 and that moneys in the fund shall be made available, upon appropriation by the Legislature, for purposes of the program. Existing law provides the program and the program fund shall conclude no later than January 1, 2018.*

This bill would extend the existence of the program and the program fund until January 1, 2023.

(3) *Existing law requires, until January 1, 2018, the collection of an \$18 fee for certified copies of birth certificates. Existing law requires \$2 of this \$18 fee to be paid to the Umbilical Cord Blood Collection Program Fund.*

This bill would extend the \$18 fee for certified copies of birth certificates until January 1, 2023. The bill would also extend the collection and deposit of the \$2 portion of the fee into the Umbilical Cord Blood Collection Program Fund until January 1, 2023.

(4) *Existing law creates the Health Statistics Special Fund which consists of revenues from several sources, including many funds collected by the State Registrar. Until January 1, 2018, Umbilical Cord Blood Program Fund fees are excluded from that fund. Existing law*

provides that moneys in the Health Statistics Special Fund shall be expended by the State Registrar, as specified, upon appropriation by the Legislature.

This bill would extend the existence of the fund until January 1, 2023.

This bill would include a change in state statute that would result in a taxpayer paying a higher tax within the meaning of Section 3 of Article XIII A of the California Constitution, and thus would require for passage the approval of $\frac{2}{3}$ of the membership of each house of the Legislature.

Vote: ~~majority~~ ^{$\frac{2}{3}$} . Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

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

1 *SECTION 1. Section 1627 of the Health and Safety Code is*
2 *amended to read:*

3 1627. (a) (1) On or before July 1, 2011, the University of
4 California is requested to develop a plan to establish and administer
5 the Umbilical Cord Blood Collection Program for the purpose of
6 collecting units of umbilical cord blood for public use in
7 transplantation and providing nonclinical units for research
8 pertaining to biology and new clinical utilization of stem cells
9 derived from the blood and tissue of the placenta and umbilical
10 cord. The program shall conclude no later than January 1, ~~2018~~.
11 2023.

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

14 (A) The collection of umbilical cord blood units from genetically
15 diverse donors that will be owned by the University of California.
16 This inventory shall be accessible by the National Registry and by
17 qualified California-based and other United States and international
18 registries and transplant centers to increase the likelihood of
19 providing suitably matched donor cord blood units to patients or
20 research participants who are in need of a transplant.

21 (B) Cord blood units with a lower number of cells than deemed
22 necessary for clinical transplantation and units that meet clinical
23 requirements, but for other reasons are unsuitable, unlikely to be
24 transplanted, or otherwise unnecessary for clinical use, may be
25 made available for research.

26 (b) (1) In order to implement the collection goals of this
27 program, the University of California may, commensurate with

1 available funds appropriated to the University of California for
2 this program, contract with one or more selected applicant entities
3 that have demonstrated the competence to collect and ship cord
4 blood units in compliance with federal guidelines and regulations.

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

8 (A) The University of California may use a competitive process
9 to identify the best proposals submitted by applicant entities to
10 administer the collection and research objectives of the program,
11 to the extent that the University of California chooses not to
12 undertake these activities itself.

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

19 (C) In order to qualify to receive appropriate cord blood units
20 and placental tissue to advance the research goals of this program,
21 an entity shall, at a minimum, be a laboratory recognized as having
22 performed peer-reviewed research on stem and progenitor cells,
23 including those derived from placental or umbilical cord blood
24 and postnatal tissue.

25 (3) A medical provider or research facility shall comply with,
26 and shall be subject to, existing penalties for violations of all
27 applicable state and federal laws with respect to the protection of
28 any medical information, as defined in Section 56.05 of the Civil
29 Code, and any personally identifiable information contained in the
30 umbilical cord blood inventory.

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

34 (d) (1) All information collected pursuant to the program shall
35 be confidential, and shall be used solely for the purposes of the
36 program, including research. Access to confidential information
37 shall be limited to authorized persons who are bound by appropriate
38 institutional policies or who otherwise agree, in writing, to maintain
39 the confidentiality of that information.

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

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

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

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

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

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

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

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

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

SEC. 2. Section 1630 of the Health and Safety Code is amended to read:

1 1630. This article shall remain in effect only until January 1,
2 2018; 2023, and as of that date is repealed, unless a later enacted
3 statute, that is enacted before January 1, 2018; 2023, deletes or
4 extends that date.

5 *SEC. 3. Section 102247 of the Health and Safety Code, as*
6 *amended by Section 169 of Chapter 296 of the Statutes of 2011,*
7 *is amended to read:*

8 102247. (a) There is hereby created in the State Treasury the
9 Health Statistics Special Fund. The fund shall consist of revenues,
10 including, but not limited to, all of the following:

11 (1) Fees or charges remitted to the State Registrar for record
12 search or issuance of certificates, permits, registrations, or other
13 documents pursuant to Chapter 3 (commencing with Section
14 26801) of Part 3 of Division 2 of Title 3 of the Government Code,
15 and Chapter 4 (commencing with Section 102525), Chapter 5
16 (commencing with Section 102625), Chapter 8 (commencing with
17 Section 103050), and Chapter 15 (commencing with Section
18 103600) of Part 1 of Division 102 of this code.

19 (2) Funds remitted to the State Registrar by the federal Social
20 Security Administration for participation in the enumeration at
21 birth program.

22 (3) Funds remitted to the State Registrar by the National Center
23 for Health Statistics pursuant to the federal Vital Statistics
24 Cooperative Program.

25 (4) Any other funds collected by the State Registrar, except
26 Children's Trust Fund fees collected pursuant to Section 18966 of
27 the Welfare and Institutions Code, Umbilical Cord Blood
28 Collection Program Fund fees collected pursuant to Section
29 103625, and fees allocated to the Judicial Council pursuant to
30 Section 1852 of the Family Code, all of which shall be deposited
31 into the General Fund.

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

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

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

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

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

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

(e) This section shall remain in effect only until January 1, ~~2018~~, 2023, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, ~~2018~~, 2023, deletes or extends that date.

SEC. 4. Section 102247 of the Health and Safety Code, as amended by Section 170 of Chapter 296 of the Statutes of 2011, is amended to read:

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

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

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

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

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

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

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

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

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

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

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

(e) This section shall become operative on January 1, ~~2018~~ 2023.

SEC. 5. Section 103625 of the Health and Safety Code, as amended by Section 5 of Chapter 402 of the Statutes of 2011, is amended to read:

103625. (a) A fee of twelve dollars (\$12) shall be paid by the applicant for a certified copy of a fetal death or death record.

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

(2) The board of supervisors of any county that has established a county children's trust fund may increase the fee for a certified

1 copy of a birth certificate by up to three dollars (\$3) for deposit in
2 the county children's trust fund in conformity with Article 5
3 (commencing with Section 18965) of Chapter 11 of Part 6 of
4 Division 9 of the Welfare and Institutions Code.

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

16 (d) A fee of three dollars (\$3) shall be paid by a public agency
17 applicant for a certified copy of a marriage dissolution record
18 obtained from the State Registrar that the agency is required to
19 obtain in the ordinary course of business. A fee of six dollars (\$6)
20 shall be paid by any other applicant for a certified copy of a
21 marriage dissolution record obtained from the State Registrar.

22 (e) Each local registrar, county recorder, or county clerk
23 collecting a fee pursuant to subdivisions (a) to (d), inclusive, shall
24 do the following:

25 (1) Transmit 15 percent of the fee for each certified copy to the
26 State Registrar by the 10th day of the month following the month
27 in which the fee was received.

28 (2) Retain 85 percent of the fee for each certified copy solely
29 to support the issuing agency for all activities related to the
30 issuance of certified copies of records pursuant to subdivisions (a)
31 to (d), inclusive.

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

37 (g) The local public official charged with the collection of the
38 additional fee established pursuant to subdivision (f) may create
39 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 nine dollar (\$9) increase to the base fee authorized in
4 subdivision (a) for a certified copy of a fetal death record or death
5 record and subdivision (b) for a certified copy of a birth certificate
6 shall be applied incrementally as follows:

7 (1) A five dollar (\$5) increase applied as of January 1, 2012.

8 (2) An additional two dollar (\$2) increase applied as of January
9 1, 2013.

10 (3) An additional two dollar (\$2) increase applied as of January
11 1, 2014.

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

16 (n) This section shall remain in effect only until January 1, ~~2018~~,
17 2023, and as of that date is repealed, unless a later enacted statute,
18 that is enacted before January 1, ~~2018~~, 2023, deletes or extends
19 that date.

20 *SEC. 6. Section 103625 of the Health and Safety Code, as*
21 *amended by Section 6 of Chapter 402 of the Statutes of 2011, is*
22 *amended to read:*

23 103625. (a) A fee of twelve dollars (\$12) shall be paid by the
24 applicant for a certified copy of a fetal death or death record.

25 (b) (1) A fee of twelve dollars (\$12) shall be paid by a public
26 agency or licensed private adoption agency applicant for a certified
27 copy of a birth certificate that the agency is required to obtain in
28 the ordinary course of business. A fee of sixteen dollars (\$16) shall
29 be paid by any other applicant for a certified copy of a birth
30 certificate. Four dollars (\$4) of any sixteen-dollar (\$16) fee is
31 exempt from subdivision (e) and shall be paid either to a county
32 children's trust fund or to the State Children's Trust Fund, in
33 conformity with Article 5 (commencing with Section 18965) of
34 Chapter 11 of Part 6 of Division 9 of the Welfare and Institutions
35 Code.

36 (2) The board of supervisors of any county that has established
37 a county children's trust fund may increase the fee for a certified
38 copy of a birth certificate by up to three dollars (\$3) for deposit in
39 the county children's trust fund in conformity with Article 5

1 (commencing with Section 18965) of Chapter 11 of Part 6 of
2 Division 9 of the Welfare and Institutions Code.

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

14 (d) A fee of three dollars (\$3) shall be paid by a public agency
15 applicant for a certified copy of a marriage dissolution record
16 obtained from the State Registrar that the agency is required to
17 obtain in the ordinary course of business. A fee of six dollars (\$6)
18 shall be paid by any other applicant for a certified copy of a
19 marriage dissolution record obtained from the State Registrar.

20 (e) Each local registrar, county recorder, or county clerk
21 collecting a fee pursuant to subdivisions (a) to (d), inclusive, shall
22 do the following:

23 (1) Transmit 15 percent of the fee for each certified copy to the
24 State Registrar by the 10th day of the month following the month
25 in which the fee was received.

26 (2) Retain 85 percent of the fee for each certified copy solely
27 to support the issuing agency for all activities related to the
28 issuance of certified copies of records pursuant to subdivisions (a)
29 to (d), inclusive.

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

35 (g) The local public official charged with the collection of the
36 additional fee established pursuant to subdivision (f) may create
37 a local vital and health statistics trust fund. The fees collected by
38 local public officials pursuant to subdivision (f) shall be distributed
39 as follows:

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

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

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

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

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

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

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

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

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

1 (l) In providing for the expiration of the surcharge on birth
2 certificate fees on June 30, 1999, the Legislature intends that
3 juvenile dependency mediation programs pursue ancillary funding
4 sources after that date.

5 (m) This section shall become operative on January 1, ~~2018~~.
6 2023.

7 ~~SECTION 1.~~

8 SEC. 7. Section 123371 of the Health and Safety Code is
9 amended to read:

10 123371. (a) (1) The State Department of Public Health shall
11 develop standardized, objective information about umbilical cord
12 blood donation that is sufficient to allow a pregnant woman to
13 make an informed decision on whether to participate in a private
14 or public umbilical cord blood banking program. The information
15 developed by the department shall enable a pregnant woman to be
16 informed of her option to do any of the following:

17 (A) Discard umbilical cord blood.

18 (B) Donate umbilical cord blood to a public umbilical cord
19 blood bank.

20 (C) Store the umbilical cord blood in a family umbilical cord
21 blood bank for the use by immediate and extended family members.

22 (D) Donate umbilical cord blood to research.

23 (2) The information developed pursuant to paragraph (1) shall
24 include, but not be limited to, all of the following:

25 (A) The current and potential future medical uses of stored
26 umbilical cord blood.

27 (B) The benefits and risks involved in umbilical cord blood
28 banking.

29 (C) The medical process involved in umbilical cord blood
30 banking.

31 (D) Medical or family history criteria that can impact a family's
32 consideration of umbilical cord banking.

33 (E) An explanation of the differences between public and private
34 umbilical cord blood banking.

35 (F) The availability and costs of public or private umbilical cord
36 blood banks.

37 (G) Medical or family history criteria that can impact a family's
38 consideration of umbilical cord blood banking.

1 (H) An explanation that the practices and policies of blood banks
2 may vary with respect to accreditation, cord blood processing and
3 storage methods, costs, and donor privacy.

4 (I) An explanation that pregnant women are not required to
5 donate their umbilical cord blood for research purposes.

6 (b) The information provided by the department pursuant to
7 subdivision (a) shall be made available in the languages that meet
8 the numeric threshold described in Section 14029.91 of the Welfare
9 and Institutions Code, and shall be updated by the department as
10 needed.

11 (c) The information provided by the department pursuant to
12 subdivision (a) shall be made available on the Internet Web sites
13 of the licensing boards that have oversight over primary prenatal
14 care providers.

15 (d) (1) A primary prenatal care provider of a woman who is
16 known to be pregnant may, during the first prenatal visit, provide
17 the information required by subdivision (a) to the pregnant woman.

18 (2) For purposes of this article, a “prenatal care provider” means
19 a health care provider licensed pursuant to Division 2 (commencing
20 with Section 500) of the Business and Professions Code, or
21 pursuant to an initiative act referred to in that division, who
22 provides prenatal medical care within his or her scope of practice.

23 *SEC. 8. Section 125055 of the Health and Safety Code is*
24 *amended to read:*

25 125055. The department shall:

26 (a) Establish criteria for eligibility for the prenatal testing
27 program. Eligibility shall include definition of conditions and
28 circumstances that result in a high risk of a detectable genetic
29 disorder or birth defect.

30 (b) (1) Develop an education program designed to educate
31 physicians and surgeons and the public concerning the uses of
32 prenatal testing and the availability of the program.

33 (2) (A) Include information regarding environmental health in
34 the California Prenatal Screening Program patient educational
35 information. This environmental health information shall include
36 the following statement:

37
38 “We encounter chemicals and other substances in everyday life
39 that may affect your developing fetus. Fortunately, there are steps
40 you can take to reduce your exposure to these potentially harmful

1 substances at home, in the workplace, and in the environment.
2 Many Californians are unaware that a number of everyday
3 consumer products may pose potential harm. Prospective parents
4 should talk to their doctor and are encouraged to read more about
5 this topic to learn about simple actions to promote a healthy
6 pregnancy.”

7
8 (B) The department shall include in the patient educational
9 information links to educational materials derived from
10 peer-reviewed materials based on the best available evidence
11 relating to environmental health and reproductive toxins.

12 (C) The department shall post the environmental health
13 information described in subparagraphs (A) and (B) on its Internet
14 Web site.

15 (D) The department shall send a notice to all distributors of the
16 patient educational information informing them of the change to
17 that information. In the notice, the department shall encourage
18 obstetrician-gynecologists and midwives to discuss environmental
19 health with their patients and to direct their patients to the
20 appropriate page or pages in the patient educational information
21 to provide their patients with additional information.

22 (E) In order to minimize costs, the environmental health
23 information described in this paragraph shall be included when
24 the patient educational information is otherwise revised and
25 reprinted.

26 (F) The department may modify the language in the patient
27 educational information after consultation with medical and
28 scientific experts in the field of environmental health and
29 reproductive toxins.

30 (G) *The patient educational information shall be made available*
31 *in the languages that meet the numeric threshold described in*
32 *Section 14029.91 of the Welfare and Institutions Code, and shall*
33 *be updated by the department as needed.*

34 (c) Ensure that genetic counseling be given in conjunction with
35 prenatal testing at the approved prenatal diagnosis centers.

36 (d) Designate sufficient prenatal diagnosis centers to meet the
37 need for these services. Prenatal diagnosis centers shall have
38 equipment and staff trained and capable of providing genetic
39 counseling and performing prenatal diagnostic procedures and

1 tests, including the interpretation of the results of the procedures
2 and tests.

3 (e) Administer a program of subsidy grants for approved
4 nonprofit prenatal diagnosis centers. The subsidy grants shall be
5 awarded based on the reported number of low-income women
6 referred to the center, the number of prenatal diagnoses performed
7 in the previous year at that center, and the estimated size of unmet
8 need for prenatal diagnostic procedures and tests in its service
9 area. This subsidy shall be in addition to fees collected under other
10 state programs.

11 (f) Establish any rules, regulations, and standards for prenatal
12 diagnostic testing and the allocation of subsidies as the director
13 deems necessary to promote and protect the public health and
14 safety and to implement the Hereditary Disorders Act (Section
15 27).

16 (g) (1) The department shall expand prenatal screening to
17 include all tests that meet or exceed the current standard of care
18 as recommended by nationally recognized medical or genetic
19 organizations, including, but not limited to, inhibin.

20 (2) The prenatal screening fee increase for expanding prenatal
21 screening to include those tests described in paragraph (1) is forty
22 dollars (\$40).

23 (3) The department shall report to the Legislature regarding the
24 progress of the program with regard to implementing prenatal
25 screening for those tests described in paragraph (1) on or before
26 July 1, 2007. The report shall include the costs of screening,
27 followup, and treatment as compared to costs and morbidity averted
28 by this testing under the program.

29 (4) (A) The expenditure of funds from the Genetic Disease
30 Testing Fund for the expansion of the Genetic Disease Branch
31 Screening Information System to include the expansion of prenatal
32 screenings, pursuant to paragraph (1), may be implemented through
33 the amendment of the Genetic Disease Branch Screening
34 Information System contracts, and shall not be subject to Chapter
35 2 (commencing with Section 10290) or Chapter 3 (commencing
36 with Section 12100) of Part 2 of Division 2 of the Public Contract
37 Code, Article 4 (commencing with Section 19130) of Chapter 5
38 of Part 2 of Division 5 of Title 2 of the Government Code, or
39 Sections 4800 to 5180, inclusive, of the State Administrative
40 Manual as they relate to approval of information technology

1 projects or approval of increases in the duration or costs of
2 information technology projects. This paragraph shall apply to the
3 design, development, and implementation of the expansion, and
4 to the maintenance and operation of the Genetic Disease Branch
5 Screening Information System, including change requests, once
6 the expansion is implemented.

7 (B) (i) The department may adopt emergency regulations to
8 implement and make specific the amendments to this section made
9 during the 2006 portion of the 2005–06 Regular Session in
10 accordance with Chapter 3.5 (commencing with Section 11340)
11 of Part 1 of Division 3 of Title 2 of the Government Code. For the
12 purposes of the Administrative Procedure Act, the adoption of
13 regulations shall be deemed an emergency and necessary for the
14 immediate preservation of the public peace, health and safety, or
15 general welfare. Notwithstanding Chapter 3.5 (commencing with
16 Section 11340) of Part 1 of Division 3 of Title 2 of the Government
17 Code, these emergency regulations shall not be subject to the
18 review and approval of the Office of Administrative Law.
19 Notwithstanding Sections 11346.1 and 11349.6 of the Government
20 Code, the department shall submit these regulations directly to the
21 Secretary of State for filing. The regulations shall become effective
22 immediately upon filing by the Secretary of State. Regulations
23 shall be subject to public hearing within 120 days of filing with
24 the Secretary of State and shall comply with Sections 11346.8 and
25 11346.9 of the Government Code or shall be repealed.

26 (ii) The Office of Administrative Law shall provide for the
27 printing and publication of these regulations in the California Code
28 of Regulations. Notwithstanding Chapter 3.5 (commencing with
29 Section 11340) of Part 1 of Division 3 of Title 2 of the Government
30 Code, the regulations adopted pursuant to this chapter shall not be
31 repealed by the Office of Administrative Law and shall remain in
32 effect until revised or repealed by the department.

33 ~~SEC. 2.~~

34 *SEC. 9.* Section 125092 of the Health and Safety Code is
35 amended to read:

36 125092. (a) The department, in consultation with the Office
37 of AIDS and with other stakeholders, including, but not limited
38 to, representatives of professional medical and public health
39 advocacy groups, providers of health care to women and infants
40 infected with or exposed to HIV, and women living with HIV,

1 shall develop culturally sensitive informational material adequate
2 to fulfill the requirements of subdivisions (c) and (d) of Section
3 ~~125090, in 125090.~~

4 *(b) This material shall be made available in the languages that*
5 *meet the numeric threshold described in Section 14029.91 of the*
6 *Welfare and Institutions Code when providing information to*
7 *clients under the Medi-Cal program. This program, and shall be*
8 *updated by the department as necessary.*

9 *(c) This material shall also include information on available*
10 *referral and consultation resources of experts in prenatal HIV*
11 *treatment.*