AMENDED IN SENATE JANUARY 25, 2016 AMENDED IN SENATE JUNE 4, 2015 AMENDED IN SENATE JUNE 2, 2015 AMENDED IN SENATE MAY 5, 2015 AMENDED IN SENATE APRIL 21, 2015

SENATE BILL

No. 22

Introduced by Senator Roth

December 1, 2014

An act to add Chapter 6 (commencing with Section 128590) to Part 3 of Division 107 Article 7 (commencing with Section 128590) to Chapter 5 of Part 3 of Division 107 of the Health and Safety Code, relating to health care, and making an appropriation therefor.

LEGISLATIVE COUNSEL'S DIGEST

SB 22, as amended, Roth. Residency training.

Existing law, the Song-Brown Health Care Workforce Training Act, declares the intent of the Legislature to increase the number of students and residents receiving quality education and training in the specialty of family practice and as primary care physician's assistants and primary care nurse practitioners. Existing law establishes, for this purpose, a state medical contract program with accredited medical schools, programs that train primary care physician's assistants, programs that train primary care physician's assistants, and other health care delivery systems.

Existing law establishes the California Healthcare Workforce Policy Commission and requires the commission, among other things, to identify specific areas of the state where unmet priority needs for

primary care family physicians and registered nurses exist, establish standards for family practice training programs, family practice residency programs, primary care physician assistants programs, and programs that train primary care nurse practitioners, and review and make recommendations to the Director of Statewide Health Planning and Development concerning the funding of those programs that are submitted to the Healthcare Workforce Development Division for participation in the state medical contract program.

Existing law requires the Office of Statewide Health Planning and Development to establish the Health Professions Education Foundation to solicit and receive funds for the purpose of providing financial assistance in the form of scholarships or loans to medical students from underrepresented groups. Under existing law, the foundation also administers other programs for the advancement of health professions, including the Registered Nurse Education Program.

This bill would-require the Office of Statewide Health Planning and Development to establish a nonprofit public benefit corporation, to be known as the California Medical Residency Training Foundation, to be governed by a board of trustees establish the Medical Residency Training Advisory Panel, consisting of a total of 13-members, members to be appointed as-specified specified, within the Health Professions Education Foundation.

The bill would create the Medical Residency Training Fund in the State Treasury, a continuously appropriated fund, and would require the foundation panel to solicit and accept funds from business, industry, foundations, and other private or public sources for the purpose of establishing and funding new graduate medical residency training programs in specified areas of the state, including medically underserved areas. By creating a continuously appropriated fund, the bill would make an appropriation. The bill would require the Office of Statewide Health Planning and Development, among other responsibilities, foundation to provide technical support and financial management for the foundation, and panel and to approve and send panel recommendations for new residency programs to the Office of Statewide Health Planning and Development for implementation if specified requirements are met, including sufficient funding. The bill would *require the office* to enter into contracts with public and private sector institutions and other health agencies and organizations in order to fund and establish recommended residency positions. The bill would authorize the Governor to include in the annual budget proposal an amount, as

he or she deems reasonable, to be appropriated for this purpose. The bill, if the Legislature appropriates money for this purpose, would require the office to hold the funds and distribute them into the fund, upon request of the foundation, *panel*, in an amount matching the amount deposited into the fund by the foundation. *fund*, *as specified*. The bill would require money that was appropriated, but that has not been distributed to the fund at the end of each fiscal year, to be returned to the General Fund.

Existing constitutional provisions require that a statute that limits the right of access to the meetings of public bodies or the writings of public officials and agencies be adopted with findings demonstrating the interest protected by the limitation and the need for protecting that interest.

This bill would make legislative findings to that effect.

Vote: majority. Appropriation: yes. Fiscal committee: yes. State-mandated local program: no.

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

1	SECTION 1. Chapter 6 (commencing with Section 128590)
2	is added to Part 3 of Division 107 of the Health and Safety Code,
3	to read:
4	
5	Chapter 6. California Medical Residency Training
6	Foundation
7	
8	128590. As used in this chapter:
9	(a) "Board" means the Board of Trustees of the California
10	Medical Residency Training Foundation.
11	(b) "Commission" means the California Healthcare Workforce
12	Policy Commission.
13	(c) "Director" means the Director of Statewide Health Planning
14	and Development.
15	(d) "Foundation" means the California Medical Residency
16	Training Foundation.
17	(e) "Fund" means the Medical Residency Training Fund.
18	(f) "Office" means the Office of Statewide Health Planning and
19	Development.
20	(g) "Primary care" means the medical practice areas of family
21	medicine, general surgery, internal medicine, obstetrics and

gynecology, pediatrics, psychiatry, and related specialties and 1 2 subspecialties as the office deems appropriate. 3 (h) "Residency position" means a graduate medical education 4 residency position in the field of primary care. 5 128591. (a) (1) The office shall establish a nonprofit public benefit corporation to be known as the California Medical 6 7 **Residency Training Foundation.** 8 (2) The foundation shall be governed by a board of trustees 9 consisting of a total of 13 members. Seven members shall be 10 appointed by the Governor, one member shall be appointed by the Speaker of the Assembly, one member shall be appointed by the 11 12 Senate Committee on Rules, two members of the Medical Board 13 of California shall be appointed by the Medical Board of California, and two members of the Osteopathic Medical Board of California 14 15 shall be appointed by the Osteopathic Medical Board of California. (3) The members of the foundation board appointed by the 16 17 Governor, the Speaker of the Assembly, and the Senate Committee 18 on Rules shall consist of representatives of designated and 19 nondesignated public hospitals, private hospitals, community elinics, public and private health insurance providers, the 20 21 pharmaceutical industry, associations of health care practitioners, 22 and other appropriate members of health or related professions. 23 (4) All persons considered for appointment shall have an interest 24 in increasing the number of medical residencies in the state, an 25 interest in increasing access to health care in underserved areas of 26 California, and the ability and desire to solicit funds for the 27 purposes of this chapter, as determined by the appointing power. 28 (5) The chairperson of the commission shall also be a nonvoting, 29 ex officio member of the board. 30 (b) The Governor shall appoint the president of the board from 31 among those members appointed by the Governor, the Speaker of 32 the Assembly, the Senate Committee on Rules, the Medical Board 33 of California, and the Osteopathic Medical Board of California. 34 (c) Of the members of the board first appointed by the Governor, 35 three members shall be appointed to serve a one-year term, three 36 members shall be appointed to serve a two-year term, and one 37 member shall be appointed to serve a three-year term. 38 (d) Of the members of the board first appointed by the Speaker 39 of the Assembly and the Senate Committee on Rules, each member

40 shall be appointed to serve a three-year term.

1 (e) The members appointed by the Medical Board of California 2 and the Osteopathic Medical Board of California shall be appointed 3 to serve a four-year term. 4 (f) Upon the expiration of the initial appointments to the board 5 by the Governor, the Speaker of the Assembly, the Senate 6 Committee on Rules, the Medical Board of California, and the 7 Osteopathic Medical Board of California, each member shall be 8 appointed to serve a four-year term. 9 (g) The director, after consultation with the president of the 10 board, may appoint a council of advisers comprised of up to nine 11 members. The council shall advise the director and the board on 12 technical matters and programmatic issues related to the 13 foundation. 14 (h) (1) Members of the board appointed by the Governor, the 15 Speaker of the Assembly, and the Senate Committee on Rules, 16 and members of the council shall serve without compensation, but 17 shall be reimbursed for any actual and necessary expenses incurred 18 in connection with his or her duties as a member of the board or 19 the council. 20 (2) The members appointed by the Medical Board of California 21 and the Osteopathic Medical Board of California shall serve 22 without compensation, but shall be reimbursed by the Medical 23 Board of California and the Osteopathic Medical Board of 24 California, respectively, for any actual and necessary expenses 25 incurred in connection with his or her duties as a member of the 26 foundation board. 27 (i) Notwithstanding any law relating to incompatible activities, 28 no member of the foundation board shall be considered to be 29 engaged in activities inconsistent and incompatible with his or her 30 duties solely as a result of membership on the Medical Board of 31 California or the Osteopathic Medical Board of California. 32 (i) The foundation shall be subject to the Nonprofit Public 33 Benefit Corporation Law (Part 2 (commencing with Section 5110) 34 of Division 2 of Title 2 of the Corporations Code), except that if there is a conflict with this chapter and the Nonprofit Public Benefit 35 36 Corporation Law (Part 2 (commencing with Section 5110) of 37 Division 2 of Title 2 of the Corporations Code), this chapter shall 38 prevail. 39 128592. The foundation shall do the following:

1 (a) Solicit and accept funds from business, industry, foundations, 2 and other private or public sources for the purpose of establishing 3 and funding new residency positions in areas of the state described 4 in subdivision (c). 5 (b) Encourage public and private sector institutions, including hospitals, colleges, universities, community clinics, and other 6 7 health agencies and organizations to identify and provide locations 8 for the establishment of new residency positions in areas of the 9 state described in subdivision (c). The foundation shall solicit proposals for medical residency programs, as described in 10 subdivision (c), and provide the office a copy of all proposals it 11 12 receives. 13 (c) Upon the sufficient solicitation of funds and at the 14 foundation's discretion, approve proposals and recommend to the 15 office the establishment of new residency positions. A recommendation shall include all pertinent information necessary 16 17 for the office to enter into the necessary contracts to establish the 18 residency positions. The foundation shall only approve and 19 recommend to the office proposals that would establish residency 20 positions that will serve in any of the following medical service 21 areas: 22 (1) A service area that is designated as a primary care shortage 23 area by the office. (2) A service area that is designated as a health professional 24 25 shortage area for primary care, by either population or geographic designation, by the Health Resources and Services Administration 26 27 of the United States Department of Health and Human Services. 28 (3) A service area that is designated as a medically underserved 29 area or medically underserved population by the Health Resources 30 and Services Administration of the United States Department of 31 Health and Human Services. 32 (d) Upon office approval of a recommendation, deposit into the 33 fund necessary moneys as required to establish and fund the 34 residency position. 35 (e) Recommend to the director that a portion of the funds 36 solicited from the private sector be used for the administrative 37 requirements of the foundation. 38 (f) Prepare and submit an annual report to the Legislature

- 39 documenting the amount of money solicited, the amount of money
- 40 deposited from the foundation into the fund, the recommendations

- for the location and fields of practice of residency positions, total 1
- 2 expenditures for the year, and prospective fundraising goals.
- 3 128593. The office shall do all of the following:
- 4 (a) Provide technical and staff support to the foundation in 5 meeting all of its responsibilities.
- 6 (b) Provide financial management for the foundation.
- 7 (c) Upon receipt of a recommendation made by the foundation
- 8 pursuant to subdivision (c) of Section 128592, approve the
- 9 recommendation if the recommendation fulfills the requirements
- 10 of subdivision (c) of Section 128592 and the recommendation
- 11 fulfills the goals of this chapter. Upon sufficient funds being
- 12 available, an approval shall signal the office's intent to establish
- 13 the residency position.
- 14 (d) Establish a uniform process by which the foundation may
- 15 solicit proposals from public and private sector institutions,
- 16 including hospitals, colleges, universities, community clinics, and
- 17 other health agencies and organizations that train primary care
- 18 residents. The office shall require that these proposals contain all
- 19 necessary and pertinent information, including, but not limited to,
- 20 all of the following:
- 21 (1) The location of the proposed residency position.
- 22 (2) The medical practice area of the proposed residency position.
- 23 (3) Information that demonstrates the area's need for the
- 24 proposed residency position and for additional primary care 25
- practitioners.
- 26 (4) The amount of funding required to establish and operate the 27 residency position.
- 28 (e) Enter into contracts with public and private sector
- 29 institutions, including hospitals, colleges, universities, community
- 30 elinies, and other health agencies and organizations in order to
- 31 fund and establish residency positions at, or in association with,
- 32 these institutions.
- 33 (f) Ensure that the residency position has been, or will be,
- 34 approved by the Accreditation Council for Graduate Medical
- 35 Education.
- 36 (g) Provide all of the following information to the board:
- 37 (1) The areas of the state that are deficient in primary care
- 38 services.

1 (2) The areas of the state that have the highest number of 2 Medi-Cal enrollees and persons eligible to enroll in Medi-Cal, by 3 proportion of population. 4 (3) Other information that the office or board finds relevant to 5 assist the board in making its recommendations on possible 6 locations for new residency positions. 7 (h) Monitor the residencies established pursuant to this chapter. 8 (i) (1) Prepare and submit an annual report to the foundation 9 and the Legislature documenting the amount of money contributed 10 to the fund by the foundation, the amount of money expended from 11 the fund, the purposes of those expenditures, the number and 12 location of residency positions established and funded, and 13 recommendations for the location of future residency positions. (2) The report pursuant to paragraph (1) shall be made to the 14 15 Legislature pursuant to Section 9795 of the Government Code. 128594. (a) The Medical Residency Training Fund is hereby 16 17 created within the State Treasury. 18 (b) The primary purpose of the fund is to allocate funding for 19 new residency positions throughout the state. Money in the fund 20 shall also be used to pay for the cost of administering the goals of 21 the foundation, and for any other purpose authorized by this 22 chapter. 23 (c) The level of expenditure by the office for the administrative 24 support of the foundation is subject to review and approval annually 25 through the state budget process. 26 (d) The office and foundation may solicit and accept public and 27 private donations to be deposited into the fund. All money in the 28 fund is continuously appropriated to the office for the purposes of 29 this chapter. The office shall manage this fund prudently in 30 accordance with applicable laws. 31 128595. Any regulations the office adopts to implement this 32 chapter shall be adopted as emergency regulations in accordance with Section 11346.1 of the Government Code, except that the 33 34 regulations shall be exempt from the requirements of subdivisions (e), (f), and (g) of that section. The regulations shall be deemed to 35 36 be emergency regulations for the purposes of Section 11346.1 of 37 the Government Code. 38 128596. Notwithstanding any other law, the office may exempt

39 from public disclosure any document in the possession of the office

that pertains to a donation made pursuant to this chapter if the 1 2 donor has requested anonymity. 3 128597. (a) The Governor may include in the annual budget 4 proposal an amount, as he or she deems reasonable, to be 5 appropriated to the office to be used as provided in this chapter. 6 (b) If the Legislature appropriates money for purposes of this 7 chapter, the money shall be appropriated to the office, which shall 8 hold the money for distribution to the fund. 9 (c) Funds appropriated to the office shall be paid into the fund, 10 upon request of the foundation, in an amount matching the amount 11 deposited into the fund by the foundation for the purposes of this 12 chapter. Any money that was appropriated to the office and that 13 has not been distributed to the fund at the end of each fiscal year 14 shall be returned to the General Fund. 15 SECTION 1. Article 7 (commencing with Section 128590) is added to Chapter 5 of Part 3 of Division 107 of the Health and 16 17 Safety Code, to read: 18 19 Article 7. California Medical Residency Training Program 20 21 128590. As used in this article: 22 (a) "Director" means the Director of Statewide Health Planning 23 and Development. 24 (b) "Foundation" means the Health Professions Education 25 Foundation. 26 (c) "Fund" means the Medical Residency Training Fund. 27 (d) "Office" means the Office of Statewide Health Planning 28 and Development. 29 (e) "Panel" means the Medical Residency Training Advisory 30 Panel, established pursuant to Section 128591. 31 (f) "Primary care" means the medical practice areas of family 32 medicine, general surgery, internal medicine, obstetrics and 33 gynecology, pediatrics, psychiatry, and related specialties and 34 subspecialties as the office deems appropriate. 35 (g) "Residency position" means a graduate medical education 36 residency position in the field of primary care. 37 128591. (a) (1) There is established within the foundation the 38 Medical Residency Training Advisory Panel.

39 (2) The panel shall consist of 13 members. Seven members shall

40 *be appointed by the Governor, one member shall be appointed by*

1 the Speaker of the Assembly, one member shall be appointed by 2 the Senate Committee on Rules, two members of the Medical Board 3 of California shall be appointed by the Medical Board of 4 California, and two members of the Osteopathic Medical Board 5 of California shall be appointed by the Osteopathic Medical Board 6 of California. 7 (3) The members of the panel appointed by the Governor, the 8 Speaker of the Assembly, and the Senate Committee on Rules shall 9 consist of representatives of designated and nondesignated public hospitals, private hospitals, community clinics, public and private 10 health insurance providers, the pharmaceutical industry, 11 associations of health care practitioners, and other appropriate 12 13 members of health or related professions. 14 (4) All persons considered for appointment shall have an interest 15 in increasing the number of medical residencies in the state, an interest in increasing access to health care in underserved areas 16

of California, and the ability and desire to solicit funds for the
purposes of this article, as determined by the appointing power.
(b) The Governor shall appoint the president of the panel from

among those members appointed by the Governor, the Speaker of the Assembly, the Senate Committee on Rules, the Medical Board

22 of California, and the Osteopathic Medical Board of California.

23 (c) (1) Of the members of the panel first appointed by the

24 Governor, three members shall be appointed to serve a one-year

25 term, three members shall be appointed to serve a two-year term,

26 and one member shall be appointed to serve a three-year term.

(2) Each member of the panel first appointed by the Speaker of
the Assembly and the Senate Committee on Rules shall be
appointed to serve a three-year term.

30 (3) Each member of the panel appointed by the Medical Board

of California and the Osteopathic Medical Board of California
shall be appointed to serve a four-year term.

33 (4) Upon the expiration of the initial appointments to the panel

34 by the Governor, the Speaker of the Assembly, the Senate

35 Committee on Rules, the Medical Board of California, and the

36 Osteopathic Medical Board of California, each member shall be

37 appointed to serve a four-year term.

38 (d) (1) Members of the panel appointed by the Governor, the

39 Speaker of the Assembly, and the Senate Committee on Rules shall

40 serve without compensation, but shall be reimbursed for any actual

and necessary expenses incurred in connection with their duties
 as members of the panel.

3 (2) The members appointed by the Medical Board of California 4 and the Osteopathic Medical Board of California shall serve 5 without compensation, but shall be reimbursed by the Medical 6 Board of California and the Osteopathic Medical Board of 7 California, respectively, for any actual and necessary expenses 8 incurred in connection with their duties as members of the panel. 9 (e) Notwithstanding any law relating to incompatible activities, 10 no member of the panel shall be considered to be engaged in

11 activities inconsistent and incompatible with his or her duties

solely as a result of membership on the Medical Board ofCalifornia or the Osteopathic Medical Board of California.

15 Caujornia or the Osleopainic Medical Board of Caujornia.

14 *(f)* The panel shall be subject to the Nonprofit Public Benefit 15 Corporation Law (Part 2 (commencing with Section 5110) of

15 Corporation Law (1art 2 (commencing with Section 5110) of 16 Division 2 of Title 2 of the Corporations Code), except that if there

17 is a conflict with this article and the Nonprofit Public Benefit

18 Corporation Law (Part 2 (commencing with Section 5110) of

19 Division 2 of Title 2 of the Corporations Code), this article shall

20 prevail.

21 *128592. The panel shall do all of the following:*

22 (a) Solicit and accept funds from business, industry, foundations,

and other private or public sources for the purpose of establishing
 and funding new residency positions in areas of the state described

25 in subdivision (c).

26 (b) Encourage public and private sector institutions, including 27 hospitals, colleges, universities, community clinics, and other 28 health agencies and organizations to identify and provide locations 29 for the establishment of new residency positions in areas of the 30 state described in subdivision (c). The panel shall solicit proposals 31 for medical residency programs, as described in subdivision (c), 32 and shall provide to the foundation a copy of all proposals it 33 receives. 34 (c) Upon the sufficient solicitation of funds and at the panel's

35 discretion, recommend to the foundation the establishment of new

36 residency positions. A recommendation shall include all pertinent

37 information required to enter into the necessary contracts to

38 establish the residency positions. The panel shall only approve

39 and recommend to the foundation proposals that would establish

residency positions that will serve in any of the following medical service areas:
(1) A service area that is designated as a primary care shortage
area by the office.
(2) A service area that is designated as a health professional
shortage area for primary care, by either population or geographic
designation, by the Health Resources and Services Administration
of the United States Department of Health and Human Services.
(3) A service area that is designated as a medically underserved
area or medically underserved population by the Health Resources
and Services Administration of the United States Department of
Health and Human Services.
(d) Upon foundation approval of a recommendation, deposit
into the fund necessary moneys required to establish and fund the
residency position.
(e) Recommend to the director that a portion of the funds
solicited from the private sector be used for the administrative
requirements of the panel and the foundation. (f) Prepare and submit an annual report to the Legislature
documenting the amount of money solicited, the amount of money
deposited by the panel into the fund, the recommendations for the
location and fields of practice of residency positions, total
expenditures for the year, and prospective fundraising goals.
128593. The foundation shall do all of the following:
(a) Provide technical and staff support to the panel in meeting
all of its responsibilities.
(b) Upon receipt of a recommendation made by the panel
pursuant to subdivision (c) of Section 128592, approve the
recommendation if the recommendation fulfills the requirements
of subdivision (c) of Section 128592 and the recommendation
fulfills the goals of this article. Upon sufficient funds being
available, an approval shall be sent to the office for implementation
pursuant to Section 128594.
128594. The office shall do all of the following:
(a) Establish a uniform process by which the panel may solicit
proposals from public and private sector institutions, including
hospitals, colleges, universities, community clinics, and other
health agencies and organizations that train primary care
residents. The office shall require that the proposals contain all
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necessary and pertinent information, including, but not limited to,
 all of the following:

3 (1) The location of the proposed residency position.

4 (2) The medical practice area of the proposed residency 5 position.

6 (3) Information that demonstrates the area's need for the 7 proposed residency position and for additional primary care 8 practitioners.

9 (4) The amount of funding required to establish and operate 10 the residency position.

11 (b) Enter into contracts with public and private sector 12 institutions, including hospitals, colleges, universities, community 13 clinics, and other health agencies and organizations in order to

fund and establish residency positions at, or in association with,these institutions.

16 (c) Ensure that the residency position has been, or will be, 17 approved by the Accreditation Council for Graduate Medical 18 Education.

(d) Provide all of the following information to the panel andthe foundation as requested:

21 (1) The areas of the state that are deficient in primary care 22 services.

(2) The areas of the state that have the highest number of
 Medi-Cal enrollees and persons eligible to enroll in Medi-Cal, by
 proportion of population.

26 (3) Other information relevant to assist the panel and the
27 foundation in making recommendations on possible locations for
28 new residency positions.

29 (e) Monitor the residencies established pursuant to this article.

30 (f) (1) Prepare and submit an annual report to the panel, the

31 foundation, and the Legislature documenting the amount of money

32 contributed to the fund by the panel, the amount of money expended

33 from the fund, the purposes of those expenditures, the number and 34 location of residency positions established and funded, and

34 location of residency positions established and funded, and35 recommendations for the location of future residency positions.

36 (2) The report pursuant to paragraph (1) shall be made to the

37 Legislature pursuant to Section 9795 of the Government Code.

38 128595. (a) The Medical Residency Training Fund is hereby

created within the State Treasury. 39

1 (b) The primary purpose of the fund is to allocate funding for 2 new residency positions throughout the state. Money in the fund 3 shall also be used to pay for the cost of administering the goals of 4 the panel and the foundation as established by this article, and for 5 any other purpose authorized by this article.

6 (c) The level of expenditure by the office for the administrative 7 support of the panel and the foundation is subject to review and 8 approval annually through the state budget process.

9 (d) In addition to funds raised by the panel, the office and the

10 foundation may solicit and accept public and private donations to

11 be deposited into the fund. All money in the fund is continuously

appropriated to the office for the purposes of this article. The officeshall manage this fund prudently in accordance with applicable

13 shall manage this juna prudently in accordance with applicable 14 laws.

15 128596. Any regulations the office adopts to implement this 16 article shall be adopted as emergency regulations in accordance 17 with Section 11346.1 of the Government Code, except that the 18 regulations shall be exempt from the requirements of subdivisions 19 (e), (f), and (g) of that section. The regulations shall be deemed 20 to be emergency regulations for the purposes of Section 11346.1 21 of the Government Code.

128597. Notwithstanding any other law, the office may exempt
from public disclosure any document in the possession of the office
that pertains to a donation made pursuant to this article if the
donor has requested anonymity.

26 128598. (a) The Governor may include in the annual budget 27 proposal an amount, as he or she deems reasonable, to be 28 appropriated to the office to be used as provided in this article.

(b) If the Legislature appropriates money for purposes of this
article, the money shall be appropriated to the office, which shall
hold the money for distribution to the fund.

32 (c) Funds appropriated to the office shall be paid into the fund, 33 upon request of the panel, in an amount matching the amount 34 deposited into the fund by the panel or by the foundation and office 35 pursuant to subdivision (d) of Section 128595 for the purposes of 36 this article. Any money that was appropriated to the office and 37 that has not been distributed to the fund at the end of each fiscal 38 year shall be returned to the Ceneral Fund

38 year shall be returned to the General Fund.

39 SEC. 2. The Legislature finds and declares that Section 1 of 40 this act, which adds Chapter 6 *Article* 7 (commencing with Section

- 1 128590) to Chapter 5 of Part 3 of Division 107 of the Health and
- 2 Safety Code, imposes a limitation on the public's right of access
- 3 to the meetings of public bodies or the writings of public officials
- 4 and agencies within the meaning of Section 3 of Article I of the
- 5 California Constitution. Pursuant to that constitutional provision,
- 6 the Legislature makes the following findings to demonstrate the 7 interest protected by this limitation and the need for protecting
- 8 that interest:
- 9 The need to protect individual privacy of donations made by a
- 10 donor to fund new *medical* residency positions in underserved
- 11 areas of the state outweighs the interest in the public disclosure of
- 12 that information.

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