

## Senate Bill No. 493

### CHAPTER 194

An act to add and repeal Article 3.8 (commencing with Section 349.100) of Chapter 2 of Part 1 of Division 1 of the Health and Safety Code, to amend, repeal, and add Section 30124 of the Revenue and Taxation Code, to repeal Sections 14148.95, 14148.96, and 14148.97 of the Welfare and Institutions Code, and to amend Section 54 of Chapter 195 of the Statutes of 1994, relating to health care, making an appropriation therefor, and declaring the urgency thereof, to take effect immediately.

[Approved by Governor July 27, 1995. Filed with  
Secretary of State July 27, 1995.]

#### LEGISLATIVE COUNSEL'S DIGEST

SB 493, Maddy. Health education and services.

The Tobacco Tax and Health Protection Act of 1988 (Proposition 99) was adopted by the voters at the general election held on November 8, 1988, establishing the Cigarette and Tobacco Products Surtax Fund, containing certain accounts, including the Hospital Services Account, the Physician Services Account, the Health Education Account, the Research Account, the Public Resources Account, and the Unallocated Account, and requiring that money in those accounts be used for specified purposes. The act provides that it may be amended, consistent with its purposes, by a  $\frac{4}{5}$  vote of the Legislature.

This bill would, until July 1, 1996, reallocate the amount of revenues derived from the surtax deposited into the Health Education Account, the Physician Services Account, the Research Account, and the Unallocated Account in the fund.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Services, pursuant to which medical benefits are provided to public assistance recipients and certain other low-income persons.

Existing law, until July 1, 1996, provides for perinatal program coordination, patient advocacy, expanded access, health, education, and outreach services in each county for low-income pregnant women under the Medi-Cal program.

This bill would repeal those provisions on the effective date of this act and would establish in the State Department of Health Services the Comprehensive Perinatal Outreach Program and would appropriate funds from the Unallocated Account in the Cigarette and Tobacco Products Surtax Fund for the purposes of the program for the 1995-96 fiscal year.

Existing provisions of Chapter 195 of the Statutes of 1994 appropriate money from specified accounts in the Cigarette and Tobacco Products Surtax Fund, including \$32,531,000 for health screening and education services through the Child Health and Disability Prevention Program and \$15,229,000 for allocation to local lead agencies for tobacco use health education, for the 1995–96 fiscal year.

This bill would repeal the appropriation of those funds for the Child Health and Disability Prevention Program and would reduce the amount appropriated for the tobacco use health education program administered by the State Department of Health Services.

Existing provisions of Chapter 195 of the Statutes of 1994 appropriate money from the Cigarette and Tobacco Products Surtax Fund for the 1995–96 fiscal year, and allocate specified amounts from the Research Account for various purposes.

This bill would repeal those appropriation allocations.

The bill would also appropriate funds for the 1995–96 fiscal year from the Physician Services Account in the fund for health screening and education under the Child Health and Disability Prevention Program, for clinic services under the Expanded Access to Primary Care Program, for the purposes of the California Children's Services Program, for the purposes of the Genetically Handicapped Persons Program, and for transfer to the continuously appropriated Perinatal Insurance Fund for the provision of perinatal and infant care.

The bill would appropriate funds for the 1995–96 fiscal year from the Health Education Account of the Cigarette and Tobacco Products Surtax Fund for operation of the Tobacco Education and Research Oversight Committee and for certain research and evaluation activities.

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

Appropriation: yes.

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

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

(a) A recent court decision enjoined the expenditure of cigarette and tobacco tax funds appropriated for the 1995–96 fiscal year in Chapter 195 of the Statutes of 1994 for certain preventive health programs for the medically indigent. For the reasons specified, the Legislature finds that it is necessary, appropriate, and consistent with the purposes of the Tobacco Tax and Health Protection Act of 1988 to continue to fund those programs at the levels authorized in Chapter 195 of the Statutes of 1994. Therefore, the provisions of the act are being amended for the 1995–96 fiscal year only to allow programs to continue at previously authorized levels.



(b) The State of California is experiencing more serious financial problems than were experienced at the time of the enactment of the act. Revenue shortages from a variety of sources combined with a continued demand for services have placed severe strains on government health care resources.

(c) According to recent estimates, employer provided health insurance coverage declined between 1989 and 1993 from 56 percent of the nonelderly population to 51.5 percent. This means that approximately 1.3 million fewer people were insured during this period.

(d) The most recent data indicates that California has 6.5 million people who have no health insurance.

(e) The growing percentage of uninsured persons in California has put increasing burdens to provide indigent medical care on public systems of health care, including Medi-Cal, county indigent care programs, and clinic programs.

(f) Since the purposes of the act include research, health, education, and medical care and treatment of indigents, it is critical that the cigarette and tobacco tax funds be allocated in ways that will serve the interests of all Californians in a manner consistent with the purposes specified in the act.

(g) Efforts to reduce overall smoking in California have led to a significant reduction in the consumption of tobacco. Overall tobacco consumption in California declined 27 percent between 1988 and 1993.

(h) While overall smoking declined between 1988 and 1993, smoking levels among adolescents stayed constant.

(i) As a result of the decline in tobacco consumption, revenues received from the taxation of tobacco have been decreasing.

(j) Although all Californians may benefit from tobacco education, declining revenues compel placing a higher priority on prevention activities that reach our most vulnerable populations such as children, adolescents, and pregnant women.

(k) It is vital that scarce revenues be used to meet demands for services in the most efficient way possible. The Legislature finds that cigarette and tobacco tax funds can be most effectively used in programs that address more than one of the purposes specified in the act. Thus, efforts to curb tobacco use among medically indigent adolescents can be accomplished through an integrated system of health screening and tobacco education. Efforts to educate pregnant women and children about the dangers of tobacco use can be effectively conducted by programs that provide health screenings or provide outreach services to these populations.

(l) The antitobacco education component of health screening and outreach programs cannot be readily segregated from other program activities and need not be segregated under the act so long as the screening and outreach activities are for patients who cannot afford



to pay for services and for whom payment will not be made through any private coverage or by any program funded in whole or in part by the federal government.

(m) The availability of funds under the act was the basis for expansion of the Child Health and Disability Prevention Program to serve children and adolescents who are between the ages of 6 and 18. It is particularly important to continue health screening and tobacco education for this group, which between 1988 and 1993 had no significant reduction in tobacco use.

(n) The availability of funds under the act also allowed for the expansion of the Child Health and Disability Prevention Program to serve children from birth to 6 years of age who have family incomes between 185 and 200 percent of the federal poverty level. It is equally important to continue health screening and tobacco education for this group because they are particularly susceptible to the hazards of environmental tobacco smoke.

(o) Outreach is needed to ensure that pregnant women seek prenatal care and receive education about the dangers of smoking, such as the following:

(1) Pregnant women who smoke place their unborn children at greatly increased risk of low birth weight. Babies born to smoking mothers weigh, on average, 200 grams less than babies born to nonsmokers.

(2) Pregnant women who smoke are at higher risk for miscarriages and stillbirths.

(3) Smoking during pregnancy has been linked with increased risk of ectopic pregnancy and sudden infant death syndrome.

(p) The act specifically empowers the Legislature by a vote of  $\frac{4}{5}$  of the membership of both houses to adopt amendments consistent with the purposes of the act.

(q) The purposes for which Cigarette and Tobacco Products Surtax Fund revenue may be appropriated are clearly and specifically stated in subdivision (a) of Section 30122 of the Revenue and Taxation Code.

(r) In order to continue to effectively carry out the purposes of the act under current circumstances, it is necessary to revise the percentage of Cigarette and Tobacco Products Surtax Fund revenues that are deposited in the accounts described in subdivision (b) of Section 30122 of the Revenue and Taxation Code.

(s) It is appropriate to reallocate for the 1995–96 fiscal year only, revenues intended for the Health Education Account established in paragraph (1) of subdivision (b) of Section 30122 of the Revenue and Taxation Code to the Physician Services Account and the Unallocated Account established in paragraphs (3) and (6) because most of the programs to be paid for with the revenues so reallocated include a tobacco use education component in addition to outreach or medical screening for indigent persons and because there was a



\$24,900,000 reserve in the Health Education Account from cigarette and tobacco tax revenues at the end of the 1993–94 fiscal year. Thus, the reallocation of current Health Education Account revenues does not impact the availability of funds to continue the level of current health education efforts.

(t) It is also appropriate to reallocate for the 1995–96 fiscal year only revenues intended for the Research Account established in paragraph (4) of subdivision (b) of Section 30122 of the Revenue and Taxation Code to the Physician Services Account established in paragraph (3) because research to date has already sufficiently demonstrated the relationship between tobacco use to various diseases such as cancer, emphysema, coronary heart disease, and cerebrovascular disease, such that continued funding of research at the levels originally enacted would yield little additional insights regarding the effects of tobacco use sufficient to warrant continued expenditure level for research instead of expenditures for health care, screening, and outreach. Thus, under current circumstances it is more important, at this time, to ensure that health education and indigent care programs are continued than it is to initiate new tobacco-related disease research.

(u) The decline in overall tobacco use since 1988, the resulting decline in cigarette and tobacco tax revenues and the decline in the number of Californians with health insurance, such that 6.5 million people are uninsured, make it critically important to reallocate revenue for one year to meet urgent health care needs in a manner consistent with the purposes of the act.

SEC. 2. Article 3.8 (commencing with Section 349.100) of Chapter 2 of Part 1 of Division 1 is added to the Health and Safety Code, to read:

Article 3.8. Comprehensive Perinatal Outreach Program

349.100. There is established in the state department a comprehensive perinatal outreach program.

349.101. A county or city and county may contract with the state department to provide perinatal program coordination, patient advocacy, and expanded access services for low-income pregnant and postpartum women and women of childbearing age who are likely to become pregnant integrated with the county’s perinatal program.

349.102. A county that contracts with the state department for the provision of public health services may contract with the state department for the services described in Section 349.101.

349.103. A county contracting with the state department pursuant to this program shall supply, at a minimum, the following information:

- (a) The county’s perinatal statistics.



(b) A description of current outreach, coordination, antismoking, antialcohol, antidrug, and other related program activities, including those funded through the Cigarette and Tobacco Products Surtax Fund, relating to indigent pregnant women and women of childbearing age in the county.

(c) A description of the additional activities and services to be undertaken, and the number of women in each target subgroup which the county proposes to reach with these funds.

(d) The proposed measures of success and a description of how the county’s overall effort, and this particular effort, will be evaluated.

349.104. A county participating in this program shall maintain the following services, supported by this program or from other sources, to the extent funds are available:

(a) A coordinated and integrated system providing early outreach, pregnancy screening, patient advocacy, targeted case management, health education, and referral to drug and alcohol treatment and perinatal care services to pregnant women.

(b) (1) A patient advocacy and education component that will reach women from all target populations at least six months prior to, and in the earliest states of pregnancy, and provide information, health screenings, and assistance in obtaining appropriate services.

(2) Patient advocates may arrange for prenatal care for eligible pregnant women.

(c) In developing and implementing the program described in this section each county shall obtain the involvement and participation of local community organizations, including clinics and schools with special expertise in the provision of health education, perinatal care, and alcohol and drug treatment.

349.105. (a) Health education services shall be an integral part of each county’s program pursuant to 349.104 to provide coordinated services to pregnant and postpartum women.

(b) Services may be funded through the Unallocated Account in the Cigarette and Tobacco Surtax Fund for purposes of this article, including, but not limited to, all of the following:

(1) Outreach.

(2) Assessment of smoking status and exposure to secondhand smoke.

(3) Development and implementation of an individualized strategy to prevent smoking and exposure to smoke during pregnancy and the postpartum period, including counseling and advocacy services, public health nursing services, provision of motivational messages, cessation services, nonmonetary incentives to maintain a healthy lifestyle, and other cessation or tobacco use prevention activities, including child care or transportation in conjunction with those activities.

(4) Provision of followup, reassessment, maintenance, and relapse prevention services.



(c) The services provided pursuant to this section shall expand and enhance the health education services provided under the comprehensive perinatal services program and shall be coordinated with other services provided to pregnant and postpartum women.

349.106. Funds from the Cigarette and Tobacco Products Surtax Fund may be used in combination with funds from other sources if the services provided to each person are documented and there is an auditable connection to services.

349.107. The program shall develop protocols, procedures, instructional materials, inservice training, data collection formats and requirements, and reimbursement schedules where applicable for the provision of tobacco education to pregnant and postpartum women.

349.108. For purposes of this article, “outreach” includes, but is not limited to, coordinated local systems of care-providing pregnancy testing, screening for risk factors, care coordination, referral to appropriate services such as alcohol and drug treatment, transportation, child care, patient incentives, and assurance of continuous prenatal care including recruitment and retention of physicians.

349.109. This article shall remain operative only until July 1, 1996, shall remain in effect only until January 1, 1997, and as of the date is repealed, unless a later enacted statute, which is enacted before January 1, 1997, deletes or extends that date.

SEC. 3. Section 30124 of the Revenue and Taxation Code is amended to read:

30124. (a) With the exception of payments of refunds made pursuant to Article 1 (commencing with Section 30361) of Chapter 6, and reimbursement of the State Board of Equalization for expenses incurred in the administration and collection of the tax imposed by Section 30123, pursuant to its powers vested by this part, all moneys raised pursuant to the taxes imposed by Section 30123 shall be deposited into the fund as provided in subdivision (b).

(b) Moneys shall be deposited in the fund according to the following formula:

(1) Ten percent shall be deposited in the Health Education Account.

(2) Thirty-five percent shall be deposited in the Hospital Services Account.

(3) Twenty-two and one-half percent shall be deposited in the Physician Services Account.

(4) One percent shall be deposited in the Research Account.

(5) Five percent shall be deposited in the Public Resources Account.

(6) Twenty-six and one-half percent shall be deposited in the Unallocated Account.



(c) Any amounts appropriated from any account specified in subdivision (b) which is not encumbered within the period prescribed by law shall revert to the account from which it was appropriated.

(d) This section shall remain operative only until July 1, 1996, shall remain in effect only until January 1, 1997, and as of that date is repealed, unless a later enacted statute, which is enacted before January 1, 1997, deletes or extends that date.

SEC. 4. Section 30124 is added to the Revenue and Taxation Code, to read:

30124. (a) With the exception of payments of refunds made pursuant to Article 1 (commencing with Section 30361) of Chapter 6, and reimbursement of the State Board of Equalization for expenses incurred in the administration and collection of the tax imposed by Section 30123, pursuant to its powers vested by this part, all moneys raised pursuant to the taxes imposed by Section 30123 shall be deposited into the fund as provided in subdivision (b).

(b) Moneys shall be deposited in the fund according to the following formula:

(1) Twenty percent shall be deposited in the Health Education Account.

(2) Thirty-five percent shall be deposited in the Hospital Services Account.

(3) Ten percent shall be deposited in the Physician Services Account.

(4) Five percent shall be deposited in the Research Account.

(5) Five percent shall be deposited in the Public Resources Account.

(6) Twenty-five percent shall be deposited in the Unallocated Account.

(c) Any amounts appropriated from any account specified in subdivision (b) which is not encumbered within the period prescribed by law shall revert to the account from which it was appropriated.

(d) This section shall become operative July 1, 1996.

SEC. 5. Section 14148.95 of the Welfare and Institutions Code is repealed.

SEC. 6. Section 14148.96 of the Welfare and Institutions Code is repealed.

SEC. 7. Section 14148.97 of the Welfare and Institutions Code is repealed.

SEC. 8. The provisions of this act shall be subject to Sections 55, 56, and 63 of Chapter 195 of the Statutes of 1994.

SEC. 9. Section 54 of Chapter 195 of the Statutes of 1994, is amended to read:

Sec. 54. For the 1995-96 fiscal year, the sum of three hundred seventeen million two hundred ninety-nine thousand dollars



(\$317,299,000) is appropriated from the Cigarette and Tobacco Products Surtax Fund for the purposes of this act according to the following schedule:

(a) Sixteen million seven hundred fifty-seven thousand dollars (\$16,757,000) to the State Department of Education as follows:

(1) Five hundred forty-two thousand dollars (\$542,000) for state administration.

(2) One million two hundred thirty-three thousand dollars (\$1,233,000) for county offices of education.

(3) Fourteen million nine hundred eighty-two thousand dollars (\$14,982,000) for local assistance.

(b) Thirty-two million eight hundred thirty thousand dollars (\$32,830,000) from the Health Education Account to the State Department of Health Services, as follows:

(1) Seven hundred twenty-six thousand dollars (\$726,000) for state administration.

(2) Twelve million one hundred ninety-seven thousand dollars (\$12,197,000) to the health education media campaign pursuant to Section 24164 of the Health and Safety Code.

(3) Nine million seven hundred fifty-four thousand dollars (\$9,754,000) for establishment of competitive grants pursuant to Section 24165 of the Health and Safety Code.

(4) Ten million one hundred fifty-three thousand dollars (\$10,153,000) for allocation to local lead agencies upon the approval of the local plans by the State Department of Health Services pursuant to Section 24165.5 of the Health and Safety Code.

(c) One hundred twenty-nine million four hundred ninety-eight thousand dollars (\$129,498,000) from the Hospital Services Account to the State Department of Health Services, as follows:

(1) One million seventy-eight thousand dollars (\$1,078,000) for allocation to children's hospitals pursuant to Chapter 6 (commencing with Section 16996) of Part 4.7 of Division 9 of the Welfare and Institutions Code.

(2) Four million nine hundred sixty-one thousand dollars (\$4,961,000) for allocation to CMSP counties for expansion of services.

(3) One hundred sixteen million five hundred ninety-five thousand dollars (\$116,595,000) for allocation to counties participating in the California Healthcare for Indigents Program pursuant to Chapter 5 (commencing with Section 16940) of Part 4.7 of Division 9 of the Welfare and Institutions Code.

(4) One million three hundred seventy thousand dollars (\$1,370,000) for allocation to counties for uncompensated rural health services under Chapter 4 (commencing with Section 16930) of Part 4.7 of Division 9 of the Welfare and Institutions Code.

(5) Nine hundred sixty-two thousand dollars (\$962,000) to the State Department of Health Services for state administration.



(6) One million nine hundred eighty-one thousand dollars (\$1,981,000) for expansion of perinatal services pursuant to Section 14148.5 of the Welfare and Institutions Code.

(7) Two million five hundred fifty-one thousand dollars (\$2,551,000) for allocation to the counties participating in the California Healthcare for Indigents Program pursuant to Chapter 5 (commencing with Section 16940) of Part 4.7 of Division 9 of the Welfare and Institutions Code.

(d) Four million nine hundred thirty-nine thousand dollars (\$4,939,000) from the Hospital Services Account for transfer to the Perinatal Insurance Fund for the implementation of Part 6.3 (commencing with Section 12695) of Division 2 of the Insurance Code.

(e) Eighteen million eight hundred fifty-six thousand dollars (\$18,856,000) from the Physicians Services Account to the State Department of Health Services, as follows:

(1) One million nine hundred four thousand dollars (\$1,904,000) for clinic services pursuant to Part 6.9 (commencing with Section 1189.101) of Division 1 of the Health and Safety Code.

(2) One million nine hundred eighty-one thousand dollars (\$1,981,000) for expansion of perinatal services pursuant to Section 14148.5 of the Welfare and Institutions Code.

(3) One million nine hundred eighty-six thousand dollars (\$1,986,000) for allocation to CMSP counties for expansion of health services.

(4) Twelve million ninety thousand dollars (\$12,090,000) for allocation to counties participating in the California Healthcare for Indigents Program pursuant to Chapter 5 (commencing with Section 16940) of Part 4.7 of Division 9 of the Welfare and Institutions Code.

(5) Six hundred fifty-eight thousand dollars (\$658,000) for allocation to counties for rural health services pursuant to Chapter 4 (commencing with Section 16930) of Part 4.7 of Division 9 of the Welfare and Institutions Code.

(6) Two hundred thirty-seven thousand dollars (\$237,000) to the State Department of Health Services for state administration.

(f) Thirteen million six hundred seventy-six thousand dollars (\$13,676,000) from the Physician Services Account for transfer to the Perinatal Insurance Fund for the implementation of Part 6.3 (commencing with Section 12695) of Division 2 of the Insurance Code.

(g) Fifty-seven million four hundred thirty thousand dollars (\$57,430,000) from the Unallocated Account to the State Department of Health Services, as follows:

(1) Eight million two hundred twenty-seven thousand dollars (\$8,227,000) for clinic services pursuant to Part 6.9 (commencing with Section 1189.101) of Division 1 of the Health and Safety Code.



(2) Five million seventy-one thousand dollars (\$5,071,000) for allocation to CMSP counties for expansion of health services.

(3) Thirty-one million seven hundred ninety-seven thousand dollars (\$31,797,000) for allocation to counties participating in the California Healthcare for Indigents Program pursuant to Chapter 5 (commencing with Section 16940) of Part 4.7 of Division 9 of the Welfare and Institutions Code.

(4) Seven hundred thirty-eight thousand dollars (\$738,000) for allocation to counties for uncompensated rural health services under Chapter 4 (commencing with Section 16930) of Part 4.7 of Division 9 of the Welfare and Institutions Code.

(5) Two million eight hundred thirty-six thousand dollars (\$2,836,000) for state administration.

(6) Eight million seven hundred sixty-one thousand dollars (\$8,761,000) for education and screening services provided through the Child Health Disability Prevention Program contained in Article 3.4 (commencing with Section 320) of Chapter 2 of Part 1 of Division 1 of the Health and Safety Code pursuant to Section 24165.3 of the Health and Safety Code.

(h) Thirty-nine million dollars (\$39,000,000) from the Unallocated Account for transfer to the Perinatal Insurance Fund for the implementation of Part 6.3 (commencing with Section 12695) of Division 2 of the Insurance Code.

(i) Three hundred thirteen thousand dollars (\$313,000) from the Unallocated Account to the State Department of Education for local assistance pursuant to Section 24167 of the Health and Safety Code.

(j) Four million dollars (\$4,000,000) from the Research Account to the University of California.

SEC. 11. For the 1995–96 fiscal year, the sum of five million seventy-six thousand (\$5,076,000) is appropriated from the Unallocated Account of the Cigarette and Tobacco Products Surtax Fund for the purposes of Article 3.8 (commencing with Section 349.100) of Chapter 2 of Part 1 of Division 1 of the Health and Safety Code. The State Department of Health Services shall ensure that tobacco education is delivered to recipients of services funded under this section.

SEC. 12. For the 1995–96 fiscal year, the sum of thirty-two million five hundred thirty-one thousand dollars (\$32,531,000) is appropriated from the the Physician Services Account of the Cigarette and Tobacco Products Surtax Fund for health screening and education services provided through the Child Health Disability Program contained in Article 3.4 (commencing with Section 320) of Chapter 2 of Part 1 of Division 1 of the Health and Safety Code pursuant to Section 24165.3 of the Health and Safety Code. The Department of Health Services shall ensure that tobacco education is delivered to recipients of services funded under this section.



SEC. 13. For the 1995–96 fiscal year, the sum of three million dollars (\$3,000,000) is appropriated from the Physician Services Account of the Cigarette and Tobacco Products Surtax Fund for clinic services pursuant to Part 6.9 (commencing with Section 1189.101) of Division 1 of the Health and Safety Code. The Department of Health Services shall ensure that tobacco education is delivered to recipients of services funded under this section.

SEC. 14. For the 1995–96 fiscal year, the sum of five million dollars (\$5,000,000) is appropriated from the Physician Services Account of the Cigarette and Tobacco Products Surtax Fund for the California Children’s Services Program pursuant to Article 2 (commencing with Section 248) of Chapter 2 of Part 1 of Division 1 of the Health and Safety Code.

SEC. 15. For the 1995–96 fiscal year, the sum of four million dollar (\$4,000,000) is appropriated from the Physician Services Account of the Cigarette and Tobacco Products Surtax Fund for the Genetically Handicapped Persons Program pursuant to Article 3.6 (commencing with Section 340) of Chapter 2 of Part 1 of Division 1 of the Health and Safety Code.

SEC. 16. For the 1995–96 fiscal year, the sum of eleven million dollars (\$11,000,000) is appropriated from the Physician Services Account of the Cigarette and Tobacco Products Surtax Fund for transfer to the Perinatal Insurance Fund for implementation of Part 6.3 (commencing with Section 12695) of Division 2 of the Insurance Code.

SEC. 17. For the 1995–96 fiscal year, the sum of three million one hundred eighteen thousand dollars (\$3,118,000) is appropriated from the Health Education Account of the Cigarette and Tobacco Products Surtax Fund for operation of the Tobacco Education and Research Oversight Committee under Section 24162 of the Health and Safety Code and for a systematic and independent research and evaluation conducted pursuant to Section 24164 of the Health and Safety Code and Section 58 of Chapter 195 of the Statutes of 1994.

SEC. 18. This act is an urgency statute necessary for the immediate preservation of the public peace, health, or safety within the meaning of Article IV of the Constitution and shall go into immediate effect. The facts constituting the necessity are:

In order to continue critical programs for women and children at risk of ending due to a recent court order, it is necessary that this act take effect immediately.

