

AMENDED IN ASSEMBLY JUNE 13, 2019

AMENDED IN SENATE APRIL 8, 2019

SENATE BILL

No. 24

Introduced by Senator Leyva

(Principal coauthor: Assembly Member Carrillo)

**(Coauthors: Senators Atkins, Beall, Dodd, Galgiani, Hill, Jackson,
Skinner, Stern, Umberg, and Wiener)**

*(Coauthors: Assembly Members Aguiar-Curry, Berman, Friedman,
Kamlager-Dove, and Wicks)*

December 3, 2018

An act to add Chapter 5.5 (commencing with Section 99250) to Part 65 of Division 14 of Title 3 of the Education Code, relating to public health, and making an appropriation therefor.

LEGISLATIVE COUNSEL'S DIGEST

SB 24, as amended, Leyva. Public health: public university student health centers: abortion by medication techniques.

Existing law establishes the University of California, under the administration of the Regents of the University of California, and the California State University, under the administration of the Trustees of the California State University, as 2 of the segments of public postsecondary education in this state.

This bill would express findings and declarations of the Legislature relating to the availability of abortion by medication techniques at on-campus student health centers at public postsecondary educational institutions in the state.

The bill would require, on and after January 1, 2023, each student health care services clinic on a California State University or University of California campus to offer abortion by medication techniques, as

specified. The bill would require the Commission on the Status of Women and Girls to administer the College Student Health Center Sexual and Reproductive Health Preparation Fund, which the bill would establish. The bill would continuously appropriate the moneys in that fund to the commission for grants to these student health care clinics for specified activities in preparation for providing abortion by medication techniques, thereby making an appropriation. The bill would provide that its requirements would be implemented only if, and to the extent that, a total of at least \$10,290,000 in private moneys is made available to the fund in a timely manner on or after January 1, 2020.

The bill would require the commission to submit a report to the Legislature, on or before December 31, 2021, and on or before December 31 of every year thereafter, until December 31, 2026, that includes, but is not necessarily limited to, specified information relating to abortion by medication techniques at these student health clinics.

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. The Legislature finds and declares all of the
- 2 following:
- 3 (a) Abortion care is a constitutional right and an integral part
- 4 of comprehensive sexual and reproductive health care.
- 5 (b) More than 400,000 students classified as female are educated
- 6 at California's public university campuses, and it is central to the
- 7 mission of California's public university student health centers to
- 8 minimize the negative impact of health concerns on students'
- 9 studies and to facilitate retention and graduation.
- 10 (c) The state has an interest in ensuring that every pregnant
- 11 person in California who wants to have an abortion can obtain
- 12 access to that care as easily and as early in pregnancy as possible.
- 13 When pregnant young people decide that abortion is the best option
- 14 for them, having early, accessible care can help them stay on track
- 15 to achieve their educational and other aspirational life plans.
- 16 (d) All California public university campuses have on-campus
- 17 student health centers, but none of these health centers currently
- 18 provide abortion by medication techniques. Abortion by medication
- 19 techniques is extremely safe, highly effective, and cost effective.
- 20 Abortion by medication techniques is an essential part of

1 comprehensive sexual and reproductive health care, and should
2 be accessible at on-campus student health centers.

3 (e) Staff at on-campus student health centers include health
4 professionals who are licensed to provide abortion by medication
5 techniques. Under current California law, all residency programs
6 in obstetrics and gynecology include training in abortion.
7 Physicians, nurse practitioners, physician assistants, and certified
8 nurse-midwives are legally authorized to perform abortions by
9 medication techniques. Any clinician legally authorized to provide
10 abortion, but not currently trained to provide abortion by
11 medication techniques, can be trained inexpensively to do so, and
12 such training falls within the requirements of continuing education
13 for medical providers.

14 (f) The National Academies of Sciences, Engineering, and
15 Medicine have found that prescribing abortion by medication
16 techniques is no different from prescribing other medications, and
17 have also found that the risks of providing abortion by medication
18 techniques, including via telehealth, are low and similar to the
19 risks of serious adverse effects of taking commonly used
20 prescription and over-the-counter medications.

21 (g) Students seeking early pregnancy termination, especially
22 those enrolled at institutions outside of major urban centers, face
23 prohibitively expensive travel, often without reliable means of
24 transportation, to a clinic that may require hours of travel from
25 their campus, out of their city, county, or even geographic region.
26 These financial and time burdens negatively impact academic
27 performance and mental health.

28 (h) California law recognizes abortion as a basic health service
29 that must be covered by Medi-Cal and by private, managed care
30 insurance plans regulated by the state.

31 (i) It is the intent of the Legislature that public university student
32 health centers make abortion by medication techniques as
33 accessible and cost effective for students as possible, and thus
34 public university student health centers should treat abortion by
35 medication techniques as a basic health service.

36 SEC. 2. Chapter 5.5 (commencing with Section 99250) is added
37 to Part 65 of Division 14 of Title 3 of the Education Code, to read:

CHAPTER 5.5. STUDENT HEALTH CARE SERVICES

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99250. For the purposes of this chapter, the following definitions apply:

(a) “Commission” means the Commission on the Status of Women and Girls established by Section 8241 of the Government Code.

(b) “Fund” means the College Student Health Center Sexual and Reproductive Health Preparation Fund established by Section 99251.

(c) “Grantee” means any qualifying student health center at a public college or university.

(d) “Medication abortion readiness” includes, but is not limited to, assessment of each individual clinic to determine facility and training needs before beginning to provide abortion by medication techniques, purchasing equipment, making facility improvements, establishing clinical protocols, creating patient educational materials, and training staff. “Medication abortion readiness” does not include the provision of abortion by medication techniques.

(e) “Public university student health center” means a clinic providing primary health care services to students that is located on the campus of a university within the University of California or California State University systems.

99251. (a) On and after January 1, 2023, each public university student health center shall offer abortion by medication techniques onsite. This service may be performed by providers on staff at the student health center or by providers associated with a contracted external agency.

(b) (1) The commission shall administer the College Student Health Center Sexual and Reproductive Health Preparation Fund, which is established by this chapter for the purposes of providing private moneys in the form of grants to public university student health centers for medication abortion readiness. Notwithstanding any other law, the commission is authorized to receive moneys from nonstate entities, including, but not necessarily limited to, private sector entities and local and federal government agencies, and deposit these moneys in the fund.

(2) Notwithstanding Section 13340 of the Government Code, the moneys in the fund are continuously appropriated to the commission for allocation for purposes of this subdivision.

1 (3) The commission shall ~~utilize~~ *use* fund moneys to do all of
2 the following:

3 (A) Provide a grant of two hundred thousand dollars (\$200,000)
4 to each public university student health center to pay for the cost,
5 both direct and indirect, of medication abortion readiness.
6 Allowable expenses under these grants include, but are not limited
7 to, all of the following:

8 (i) Purchase of equipment used in the provision of abortion by
9 medication techniques.

10 (ii) Facility and security upgrades.

11 (iii) Costs associated with enabling the campus health center to
12 deliver telehealth services.

13 (iv) Costs associated with training staff in the provision of
14 abortion by medication techniques.

15 (v) Staff cost reimbursement and clinical revenue offset while
16 staff are in trainings.

17 (B) Provide a grant of two hundred thousand dollars (\$200,000)
18 to both the University of California and the California State
19 University, to pay for the cost, both direct and indirect, of the
20 following, for each university system:

21 (i) Providing 24-hour, backup medical support by telephone to
22 patients who have obtained abortion by medication techniques at
23 a public university student health center.

24 (ii) One-time fees associated with establishing a corporate
25 account to provide telehealth services.

26 (iii) Billing specialist consultation.

27 (C) ~~Maintaining~~ *Maintain* a system of financial reporting on all
28 aspects of the fund.

29 ~~(4) Each public university student health center grantee shall,~~
30 ~~as a condition of receiving a grant award from the fund, participate~~
31 ~~in an evaluation of its medication abortion readiness and its~~
32 ~~provision of abortion by medication techniques.~~

33 ~~(5)~~

34 (4) The requirements of this chapter shall be implemented only
35 if, and to the extent that, a total of at least ten million two hundred
36 ninety thousand dollars (\$10,290,000) in private funds is made
37 available to the fund in a timely manner on or after January 1,
38 2020.

39 ~~(6)~~

1 (5) Nothing in this chapter shall be interpreted as requiring a
2 public university to utilize General Fund moneys or student fees
3 for medication abortion readiness before January 1, 2023.

4 (c) The commission, working with the public university student
5 health centers, shall assist and advise on potential pathways for
6 those student health centers to access public and private payers to
7 provide funding for ongoing costs of providing abortion by
8 medication techniques.

9 (d) (1) On or before December 31, 2021, and on or before
10 December 31 of each year thereafter until December 31, 2026, the
11 commission shall submit a report to the Legislature that includes,
12 but is not necessarily limited to, all of the following information
13 for each reporting period, separately for the University of California
14 and the California State University:

15 (A) The number of student health centers that provide abortion
16 by medication techniques.

17 (B) The number of abortions by medication techniques
18 performed at student health centers, disaggregated, to the extent
19 possible, by student health center.

20 (C) The total amount of funds granted by the commission to the
21 university and the university’s student health centers that is
22 expended on medication abortion readiness, and, separately, the
23 total amount of any other funds expended on medication abortion
24 readiness and the source of those funds, disaggregated by function
25 and, to the extent possible, disaggregated by student health center.

26 (2) The report required in paragraph (1), and any associated
27 data collection, shall be conducted in accordance with state and
28 federal privacy law, including, but not necessarily limited to, the
29 state Confidentiality of Medical Information Act (Part 2.6
30 commencing with Section 56) of Division 1 of the Civil Code),
31 the federal Family Educational Rights and Privacy Act of 1974
32 (20 U.S.C. Sec. 1232g), and the federal Health Insurance Portability
33 and Accountability Act of 1996 (Public Law 104-191).

34 (3) The requirement for submitting reports under paragraph (1)
35 shall become inoperative on January 1, 2027, pursuant to Section
36 10231.5 of the Government Code.

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