

Date of Hearing: June 30, 2021

ASSEMBLY COMMITTEE ON HUMAN SERVICES

Lisa Calderon, Chair

SB 65 (Skinner) – As Amended June 14, 2021

SENATE VOTE: 31-7

SUBJECT: Maternal care and services

SUMMARY: Establishes the “California Momnibus Act” to monitor and take steps to prevent maternal mortality, including, amongst other things, establishing the “California Pregnancy-Associated Review Committee” to review all pregnancy-related deaths and severe maternal morbidity, establishing a “Fetal and Mortality Review Committee”, extending Medi-Cal eligibility for pregnant individuals with diagnosed maternal mental health, expanding Medi-Cal benefits to include full-spectrum doula care, increasing the monthly supplement for a pregnant person receiving California Work Opportunity and Responsibility to Kids (CalWORKs) benefits, and establishing the “Momnibus Pilot Program” to distribute a monthly guaranteed income of \$1,000 to pregnant people and parents or relative caretakers of a child less than 24 months of age. Specifically, **this bill:**

- 1) Makes several Legislative findings and declarations related to maternal mortality and morbidity.
- 2) Makes a series of changes to Health and Safety code and Welfare and Institutions code pertaining to the California Pregnancy-Associated Review Committee, Local Fetal and Infant Mortality Review, Midwifery Workforce Training Act, Postpartum Medi-Cal coverage and Medi-Cal coverage for doulas, which are detailed in the Assembly Health Committee analysis of this bill dated June 22, 2021.
- 3) Establishes the Momnibus Pilot as a three-year pilot program to test the capacity of the CalWORKs program to serve as a distribution point for monthly guaranteed income payments to pregnant people and parents or relative caretakers of a child less than 24 months of age, with the goal of reducing prenatal and postnatal death and the incidence and impact of maternal depression, and improving short- and long-term health outcomes.
- 4) Provides that nothing in these provisions shall prevent the monthly guaranteed income payment from being a tax credit if established under the Revenue and Taxation Code.
- 5) Provides that the Momnibus Pilot is optional for counties, but must be administered by counties that choose to participate in the pilot. Further, requires a participating county to agree to any terms specified in the Momnibus Pilot or in any all-county letter or similar instruction.
- 6) Provides that, subject to an appropriation in the annual Budget Act, each participating county shall issue a monthly guaranteed income payment of \$1,000 to participants through the electronic benefit transfer system.
- 7) Provides that to the extent permitted by federal law, the guaranteed income payment shall not be considered as income for the purposes of determining eligibility and benefit amount for

any means-tested program, including, but not limited to, CalWORKs, CalFresh, General Assistance, and Medi-Cal.

- 8) Provides that for taxable years beginning on or after January 1, 2022, gross income does not include monetary benefits provided through the Momnibus Pilot Program. Further, for taxable years beginning on or after January 1, 2022, monetary benefits provided through the Momnibus Pilot Program shall not be considered earned income for purposes of eligibility for the California Earned Income Tax Credit.
- 9) Provides that a person is eligible to participate in the Momnibus Pilot if they would otherwise be considered eligible to participate in the CalWORKs Home Visiting Program, regardless of whether or not their county of residence or the assistance unit participates in that program.
- 10) Prohibits a noncustodial parent from participating in the Momnibus Pilot.
- 11) Requires a participant to be enrolled in the first six months of the Momnibus Pilot in order to ensure that the program is able to capture the full impact of the guaranteed income payment on the full range of prenatal and postnatal conditions and outcomes, and to agree to stay enrolled throughout the three-year term of the Momnibus Pilot, despite changes in income, circumstances, and CalWORKs eligibility. Further requires the California Department of Social Services (CDSS) and California Department of Health Care Services (DHCS) to establish the enrollment months.
- 12) Requires each participating county to establish target population priorities, consistent with any guidance provided in an all-county letter or similar instruction if the established target population priorities do not undermine the research purpose of the Momnibus Pilot or violate the rights of any participant.
- 13) Requires CDSS to form and consult with a stakeholder workgroup, as specified. Further, requires the workgroup to be maintained throughout the entirety of the three-year term of the Momnibus Pilot and the entire period of time necessary to finalize the report to be submitted to the Legislature.
- 14) Requires CDSS to convene a meeting twice annually commencing upon the implementation of the Momnibus Pilot, open to any workgroup stakeholder, whereby participating counties shall meet to share challenges, lessons learned, and best practices for issuing the monthly guaranteed income payment, and unintended impacts on the administration of other safety net programs.
- 15) Requires CDSS, in collaboration with DHCS, to collect, and participating counties to provide, data necessary to administer the Momnibus Pilot and data related to the outcomes of participants and infants, including by race, ethnicity, national origin, primary and secondary language, and county. Further requires the data to include pregnancy outcomes and health outcomes for the pregnant people, parents, relative caretakers, and infants served under the Momnibus Pilot, and these data components shall be identified in consultation with the stakeholder workgroup.
- 16) Requires CDSS to work with at least one independent, research-based institution to identify existing, and establish additional, outcome measurements, as specified, that shall inform an

evaluation report that shall be provided to the Legislature six months after the conclusion of each year of the pilot program.

- 17) Requires each report to include but not be limited to, all of the following information:
 - a) Starting income of the participant before receiving monthly guaranteed income payments under the Momnibus Pilot;
 - b) Geographic indicators, including county of residence, city, and ZIP Code;
 - c) Rate of maternal mortality and morbidity amongst participants;
 - d) Rate of infant mortality and morbidity amongst those being cared for by participants;
 - e) Number of participants who experienced traumatic birthing experiences, as reported by the participants;
 - f) Number of infants who had failure to thrive or failed to meet other developmental thresholds while participating in the Momnibus Pilot;
 - g) Child welfare referrals and outcomes; and,
 - h) Additional descriptive and outcome indicators, as appropriate.
- 18) Requires CDSS and DHCS to jointly implement, interpret, or make specific the Momnibus Pilot by means of all-county letter or similar instructions, without taking any regulatory action.
- 19) Requires that implementation of the Momnibus Pilot be subject to both of the following:
 - a) The Directors of CDSS and DHCS certifying to the Legislature that federal law and guidance authorizes the state to exempt the monthly guaranteed income payments under the Momnibus Pilot from being considered as income for the purposes of determining eligibility and benefit amount for federally funded means-tested programs administered under CDSS or DHCS, respectively; and,
 - b) If the monthly guaranteed income issued through the Momnibus Pilot is deemed to be a tax credit, the Directors of CDSS and DHCS certifying to the Legislature that they have received any additional required authority from the Franchise Tax Board.
- 20) Requires the Momnibus Pilot to become operative on January 1, 2022, provided that an appropriation in the Budget Act has been made, or on the date the Legislature receives the certification, whichever is later.
- 21) Requires, subject to an appropriation in the annual Budget, CDSS to award funds to participating counties to provide the Momnibus Pilot monthly payments to any assistance unit that meets the requirements and to participate in the stakeholder group.
- 22) Provides that Momnibus Pilot benefits are not entitlement services and participating counties may limit the number of families participating in the program to ensure that the costs do not exceed the amount of funds awarded to the county.

- 23) Deletes provisions that exempt a pregnant person, under specified circumstances, from participating in welfare-to-work (WTW) activities and instead authorizes a pregnant recipient to volunteer to participate in WTW activities.
- 24) Deletes the requirement that CalWORKs aid be paid to a pregnant person in a family that does not include a needy child for the month in which the birth is anticipated and for the six-month period immediately prior to the month in which the birth is anticipated, as specified. Requires, instead, that if a family does not include a needy child qualified for aid, aid shall be paid to a pregnant person as of the date of the application for aid, in the amount that would otherwise be paid to one person if the pregnant person and the child, if born, would have qualified for aid.
- 25) Requires that the aid be paid to a pregnant person who is 18 years of age or younger only when the Cal-Learn Program is operative.
- 26) Increases the monthly amount to be paid to a pregnant person qualified for CalWORKs aid to meet special needs resulting from pregnancy if the pregnant person and child, if born, would have qualified for aid from \$47 to \$82.
- 27) Requires that amount, commencing January 1, 2023, and each year thereafter, to be adjusted annually to reflect any increases in the cost-of-living. Requires the annual cost-of-living adjustment to be based on the increase in the California Necessities Index for the year in which the adjustment becomes effective.
- 28) Requires that a family that is eligible for temporary and permanent homeless assistance and includes a pregnant person not be subject to the maximum benefit limits specified pertaining to temporary shelter assistance and permanent housing assistance. Further, requires verification of pregnancy as a condition of eligibility for this extended aid.

EXISTING LAW:

- 1) Establishes the “California Department of Public Health” (CDPH) to be vested with all the duties, powers, purposes, functions, responsibilities, and jurisdiction as they relate to public health and licensing and certification of health facilities, as specified. Requires CDPH to maintain a program of maternal and child health. Requires CDPH to develop a plan to identify causes of infant mortality and morbidity in California and to study recommendations on the reduction of infant mortality and morbidity in California. Requires CDPH to track and publish data on severe maternal morbidity and on pregnancy-related deaths, as specified. (Health and Safety Code Section [HSC] 131050, 123225, 123650, and 123630.4)
- 2) Establishes the “Office of Office of Statewide Health Planning and Development” (OSHPD) to, among other functions, collect, analyze, and publish data about healthcare workforce and health professional training, identify areas of health workforce shortages, and provide scholarships, loan repayments, and grants to students, graduates, and institutions providing direct patient care in areas of unmet need. (HSC 127750, *et seq.* and 128335)
- 3) Establishes the “Medi-Cal” program, administered by DHCS, under which low-income individuals are eligible for medical coverage. Makes an individual eligible for Medi-Cal, to the extent required by federal law, as though the individual was pregnant, for all pregnancy-

related and postpartum services for a 60-day period beginning on the last day of pregnancy. (Welfare and Institutions Code Section [WIC] 14000, *et seq.*, 1400.18, and 15840)

- 4) Establishes in federal law the “Temporary Assistance for Needy Families” (TANF) program, which provides block grants to states to develop and implement their own state WTW programs designed to provide cash assistance and other supports and services to low-income families. (42 United States Code Section 601 *et seq.*)
- 5) Establishes the state's TANF program, the CalWORKs program. CalWORKs provides cash assistance and other supports and services to low-income families and is administered by the counties. (WIC 11200 *et seq.*)
- 6) Prohibits a pregnant person for whom it has been medically verified that the pregnancy impairs the person’s ability to be regularly employed or participate in WTW activities or the county has determined that, at that time, participation will not readily lead to employment or that a training activity is not appropriate, from being required to participate in WTW. If a pregnant person is unable to secure this medical verification, but is otherwise eligible for an exemption from WTW requirements, including good cause for temporary illness related to the pregnancy, the pregnant person shall be exempt from participation. (WIC 11320.3. (b)(7))
- 7) Establishes the CalWORKs Home Visiting Program as a voluntary program for the purpose of supporting positive health, development, and well-being outcomes for eligible pregnant and parenting people, families, and infants born into poverty. (WIC 11330.6 *et seq.*)
- 8) Requires, if a family does not include a needy child qualified for aid, CalWORKs aid to be paid to a pregnant child who is 18 years of age or younger at any time after verification of pregnancy in the amount that would otherwise be paid to one person if the pregnant child and the child, if born, would have qualified for CalWORKs aid. Requires verification of pregnancy as a condition of eligibility for aid. (WIC 11450(b)(1))
- 9) Requires, if a family does not include a needy child qualified for aid, CalWORKs aid to be paid to a pregnant person for the month in which the birth is anticipated and for the six-month period immediately prior to the month in which the birth is anticipated in the amount that would otherwise be paid to one person, as specified, if the pregnant person and child, if born, would have qualified for aid. Requires verification of pregnancy as a condition of eligibility for aid under this subdivision. (WIC 11450(b)(2))
- 10) Requires that aid for a pregnant child who is 18 years of age or younger shall apply only when the Cal-Learn Program is operative. (WIC 11450(b)(1) and (3))
- 11) Requires the amount of \$47 per month to be paid to a pregnant person qualified for CalWORKs aid to meet special needs resulting from pregnancy if the pregnant person and child, if born, would have qualified for aid. (WIC 11450(c))
- 12) Limits CalWORKs temporary shelter assistance and permanent housing assistance to 16 cumulative calendar days of temporary assistance and one payment of permanent assistance every 12 months. (WIC 11450(3)(E)(1))

FISCAL EFFECT: According to the Senate Appropriations Committee on May 17, 2021, the Senate Budget Committee estimates the MediCal Costs of this bill to be \$9 million annually. Other provisions can only be broadly estimated to be in the multi-millions of dollars in cost pressures to the General Fund and other possible other sources.

COMMENTS:

Maternal mortality and morbidity: The Centers for Disease Control and Prevention (CDC) defines maternal morbidity as unexpected outcomes of labor and delivery that result in significant short- or long-term consequences to a woman's health and maternal mortality as the death of a woman during pregnancy, at delivery, or soon after delivery. The CDC conducts national pregnancy-related mortality surveillance to better understand the risk factors for and causes of pregnancy-related deaths in the United States through the Pregnancy Mortality Surveillance System (PMSS). Since the PMSS was implemented, the number of reported pregnancy-related deaths in the United States steadily increased from 7.2 deaths per 100,000 live births in 1987 to 17.3 deaths per 100,000 live births in 2017. The reasons for the overall increase in pregnancy-related mortality are unclear, but the CDC suggest a combination of improved data systems and errors in reporting might account for the increased reported deaths. In recent years, the pregnancy-related mortality ratios have been relatively stable.

Data collected from 2008-17 by the CDC show that approximately 24% of pregnancy-related deaths occurred during pregnancy, 34% occurred on the day of delivery or within a week after delivery, 19% occurred between 7-42 days postpartum, and 24% occurred in the later postpartum period (43-365 days postpartum). The CDC also notes that considerable racial/ethnic disparities in pregnancy-related mortality exist. Data from 2014–2017 found 41.7 deaths per 100,000 live births for non-Hispanic Black women; 28.3 deaths per 100,000 live births for non-Hispanic American Indian or Alaska Native women; 13.8 deaths per 100,000 live births for non-Hispanic Asian or Pacific Islander women; 13.4 deaths per 100,000 live births for non-Hispanic White women; and, 11.6 deaths per 100,000 live births for Hispanic or Latina women. Variability in the risk of death by race/ethnicity may be due to several factors including access to care, quality of care, prevalence of chronic diseases, structural racism, and implicit biases.

The CDC reports that in California in 2018, there were 11.7 maternal deaths per 100,000 live births and 5.7 late maternal deaths per 100,000 live births. Maternal deaths include deaths of women while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and the site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management, but not from accidental or incidental causes. Late maternal deaths include deaths of women from direct or indirect obstetric causes more than 42 days but less than one year after termination of pregnancy.

California Work Opportunity and Responsibility to Kids: The CalWORKs program, which implements the federal TANF program, provides eligible low-income families with cash grants and supportive services aimed at helping them to secure education, training, and employment. CDSS is charged with program supervision at the state level, and counties administer the caseloads at the local level. CalWORKs is funded largely through the federal TANF block grant and state maintenance-of-effort contributions. Families participating in CalWORKs have access to a range of services that can include child care and services aimed at addressing mental health needs, substance use disorders, experiences of domestic violence, and learning disabilities, among other issues. Unless deemed exempt or otherwise not required to participate per

CalWORKs rules, parents are required to develop and participate in a WTW plan. CalWORKs-approved WTW activities can include public or private sector subsidized or unsubsidized employment; on-the-job training; community service; secondary school, adult basic education and vocational education and training when the education is needed for the recipient to become employed; specific mental health, substance abuse, or domestic violence services if they are necessary to obtain or retain employment; and a number of other activities necessary to assist a recipient in obtaining unsubsidized employment.

In 2020-21, the maximum monthly grant for a family of three on CalWORKs (one parent and two children), if the family has no other income and lives in a high cost-of-living county, is \$878. The same family living in a lower cost-of-living county would be eligible for up to \$834 per month. However, the average monthly cash grant for the family is \$583. Many families earn some income, or live in a lower cost-of-living county, and do not qualify for the maximum grant amount. More than 482,400 families are projected to receive CalWORKs benefits in Fiscal Year 2021-22.

Benefits for pregnant persons: A Pregnancy Special Need payment of \$47 is paid to an eligible pregnant person who provides medical verification of an estimated delivery date. A pregnant person who is not part of a family that qualifies for aid is allowed to obtain CalWORKs aid for six months prior to the baby's due date. An otherwise eligible pregnant person with one or more needy children is considered eligible for the pregnancy special need effective the first of the month in which the request for the pregnancy special need was received, up through the end of the payment period in which the child is expected to be born once required verification has been provided. In either situation, if the birth of the child is voluntarily reported mid-period, the pregnancy special need payment must be discontinued at the end of the month prior to the month in which the newborn is added into the assistance unit.

A pregnant person who is eligible for CalWORKs is subject to WTW participation requirements. Unless exempt from WTW, a pregnant person is expected to work an average weekly participation requirement of 20 hours to meet CalWORKs minimum standards. A pregnant person can be exempt from WTW requirements when the pregnancy impairs the person's ability to be employed or participate in WTW activities.

Cal-Learn: Cal-Learn is a statewide program designed to encourage pregnant and parenting teens in the CalWORKs program to graduate from high school or its equivalent, become independent, and form healthy families. Three coordinated services help teens become self-sufficient adults and responsible parents: intensive case management to assist teen parents to obtain education, health and social services; supportive services such as child care, transportation, educational expenses, to enable pregnant and parenting teens to attend school; and, bonuses (four \$100 bonuses per year based on report card results, and a one-time \$500 bonus for graduating or equivalent) and sanctions (applied if satisfactory grades are not maintained, and/or timely report cards are not submitted) to encourage school attendance and good grades. Pregnant and parenting teens who are receiving CalWORKs are required to participate in Cal-Learn if they are under the age of 19, they live in the same household as their child, they have not graduated from high school or its equivalent, and they are not in foster care. Cal-Learn serves approximately 6,400 teens monthly.

Home Visiting Program: The CalWORKs Home Visiting Program (HVP) is a voluntary program supervised by CDSS and administered by participating counties. The HVP is available to pregnant people, parents or caretaker relatives, and children for 24 months or until the child's

second birthday, whichever is later, that meet the needs of at-risk assistance units, including those in underserved, rural, tribal, impoverished, and other communities. The HVP aims to support positive health development and well-being outcomes for pregnant and parenting people, families, and infants born into poverty, expand their future educational, economic, and financial capability opportunities, and improve the likelihood that they will exit poverty.

The HVP pairs new parents with a nurse or trained professional who makes regular visits to the participant's home to provide guidance, coaching, and access to health and social services. The HVP supports and resources include, but are not limited to prenatal, infant and toddler care; infant and child nutrition; child developmental screening and assessments; parent education, parent and child interaction, child development, and child care; job readiness and barrier removal; and, domestic violence and sexual assault, mental health, and substance abuse treatment, as applicable.

The program is voluntary at the county level and not all counties offer HVP services to their CalWORKs recipients. Currently 42 of the state's 58 counties are participating in the HVP.

Universal Basic Income (UBI): Guaranteed income, sometimes referred to as UBI, involves providing people with direct, unconditional, recurring cash payments. According to the Stanford University Basic Income Lab,

“In the U.S., variants of the UBI proposal were very much alive in the early second half of the twentieth century – including through figures like Martin Luther King, Jr. and Milton Friedman – but the conversation did not pick up much in subsequent decades. This changed around 2016, when several American personalities wrote on the policy... The growth of income and wealth inequalities, the precariousness of labor, and the persistence of abject poverty have all been important drivers of renewed interest in UBI in the U.S. But it is without a doubt the fear that automation may displace workers from the labor market at unprecedented rates that primarily explains the revival of the policy, including by many in or around Silicon Valley.”

Several programs utilizing a guaranteed income model have been implemented throughout California in order to meet the needs of low-income individuals including the Stockton Economic Empowerment Demonstration (SEED) program founded in February 2019 by former Stockton Mayor Michael Tubbs. SEED provided randomly selected residents with \$500 per month for 24 months, and then conducted a study to measure participants' job opportunities, financial stability, and overall well-being. Recently, and partially in response to the economic impacts of the COVID-19 pandemic, a number of guaranteed income programs have launched, or are preparing to launch, throughout the state, including, among others:

Compton Pledge: Like SEED, the Compton Pledge distributes cash relief to low-income residents for two years. An estimated 800 Compton residents were expected to receive between \$300 and \$600 every month beginning in February 2021.

Oakland Resilient Families: On March 23, 2021, Oakland Mayor Libby Schaaf announced plans to implement a guaranteed income program for individuals who are Black, Indigenous, or part of other communities of color. To be eligible for the program, participants must have at least one child under 18, and have an income at or below 50% of the area median income – approximately \$59,000 a year for a family of three. The program, set to begin in spring of this year, will provide participants with \$500 for at least 18 months without conditions.

Santa Clara County foster youth: In June 2020, the Santa Clara County Board of Supervisors approved a guaranteed income program for young adults transitioning out of the foster care system. The program provides a \$1,000 monthly stipend for one year—beginning in September 2020 until September 2021—to former foster youth who are between the ages of 21 and 24.

Need for this bill: This bill makes a number of changes to health and human services programs to improve outcomes for pregnant and parenting persons. Several of those changes are within the CalWORKs program. This bill makes a pregnant person eligible for special needs aid at the time of application rather than after the first trimester or after medical verification. Additionally, this bill increases the special needs benefit from \$47 to \$82 per month and requires that amount to be adjusted annually. CalWORKs families that include a pregnant person are exempted from existing maximum benefit levels for CalWORKs homeless assistance and the mandatory requirement for pregnant people to work or participate in WTW is eliminated through this bill.

The bill also creates the “Momnibus Pilot”, a three-year pilot project to provide a monthly guaranteed income of \$1,000 to CalWORKs recipients who are eligible to participate in the CalWORKs HVP. The purpose of the pilot would be for testing the capacity of the CalWORKs program to serve as a distribution point for monthly guaranteed income payments to pregnant people and parents or relative caretakers of young children.

The goal of the pilot and other changes throughout this bill is to reduce prenatal and postnatal death and to improve short- and long-term health outcomes for pregnant persons, particularly by improving the socioeconomic determinants of health.

According to the author, “The United States is failing birthing people and babies – particularly women and babies of color. More birthing people and babies die in this country than in any other high-income countries– and many of these deaths are preventable. [This bill] takes a comprehensive approach to improve outcomes for birthing parents and babies by closing racial disparities in maternal and infant death and near-death experiences. It accomplishes this by requiring comprehensive investigations into maternal and infant mortality and morbidity, improving data collection and research on socio-economic factors that contribute to negative birth outcomes, expanding postpartum health care for parents and babies, and improving access to health options like doulas and midwives which have been proven to improve birthing outcomes for women and babies of color.”

Double referral: This bill passed out of the Assembly Health Committee on June 22, 2021, with an 11-2 vote.

PRIOR AND RELATED LEGISLATION:

AB 65 (Low) of 2021, creates the “Universal Basic Income Fund” and requires that each eligible recipient shall receive a UBI payment of \$1,000 per month from the UBI Fund. AB 65 was held on the Assembly Appropriations Committee suspense file.

SB 739 (Cortese) of 2021, requires CDSS to administer the California UBI for Transition Age Youth pilot project, under which a California resident who is 21 years of age who exited foster care upon reaching 21 years of age would receive a UBI payment of \$1,000 per month for three years, as specified. SB 739 is set to be heard by the Assembly Human Services Committee on June 30, 2021.

SB 492 (Hurtado) of 2021, renames the California Pregnancy-Associated Mortality Review Committee under CDPH to the Maternal Mortality Review Committee and set the purposes of the committee as identifying and reviewing all pregnancy-related deaths and severe maternal morbidity and investigating contributing factors to pregnancy-related deaths, as specified. SB 492 is on the Senate inactive file.

AB 2258 (Reyes) of 2020, would have required DHCS to establish a full-spectrum doula care pilot program to operate for 3 years for pregnant and postpartum Medi-Cal beneficiaries residing in 14 specified counties and would have provided that any Medi-Cal beneficiary who is pregnant and residing in a pilot program county, is entitled to doula care. AB 2258 was referred to the Assembly Health Committee but was not set for a hearing.

SB 464 (Mitchell), Chapter 533, Statutes of 2019, required hospitals and alternative birth centers to implement an implicit bias program for all health care providers involved in the perinatal care of patients within those facilities, including requiring these healthcare providers to complete initial basic training through the implicit bias program and a refresher course every two years thereafter. SB 464 required CDPH to track and publish data on maternal death and severe morbidity. SB 464 also added, to the list of written information a hospital is required to provide to each patient upon admission, information on how to file a discrimination complaint with CDPH or the Medical Board of California if the patient feels that they were discriminated against.

SB 104 (Committee on Budget and Fiscal Review), Chapter 67, Statutes of 2019, extended Medi-Cal eligibility from 60 days to 12 months after delivery for women in pregnancy-related Medi-Cal programs who are diagnosed with a maternal mental health condition.

REGISTERED SUPPORT / OPPOSITION:

Support

Black Women for Wellness Action Project (Co-Sponsor)
California Nurse Midwives Association (Co-Sponsor)
March of Dimes, California (Co-Sponsor)
NARAL Pro-Choice California (Co-Sponsor)
National Health Law Program (Co-Sponsor)
Western Center on Law & Poverty (Co-Sponsor)
Women's Foundation of California, Women's Policy Institute (Co-Sponsor)
2020 Mom
ACLU California Action
Advancement Project
Alliance of Californians for Community Empowerment (ACCE) Action
Anthem Blue Cross (a Subsidiary of Wellpoint, Inc.)
Birthwork for All
Black Wellness & Prosperity Center
Black Women Organized for Political Action (BWOPA)
BreastfeedLA
Business & Professional Women of Nevada County
California Association for Nurse Practitioners
California Black Health Network
California Healthy Nail Salon Collaborative

California Latinas for Reproductive Justice
California Pan-Ethnic Health Network
California Physicians Alliance
California Rural Legal Assistance Foundation
California Rural Legal Assistance Foundation, INC.
CaliforniaHealth+ Advocates
Causes to Care About
Children Now
Citizens for Choice
Community Clinic Association of Los Angeles County (CCALAC)
Community Health Councils
County of Los Angeles Board of Supervisors
Courageous Resistance of The Desert
Disability Rights Education and Defense Fund
Essential Access Health
Every Mother Counts
Family Violence Law Center
First 5 Association of California
First 5 California
First 5 Fresno County
Generation Blue
Having Our Say Coalition
Health Access California
Health Net and Its Affiliated Companies
LA Best Babies Network
Maternal and Child Health Access
Momma Fit Santa Maria
National Association of Social Workers, California Chapter
National Council of Jewish Women CA
National Council of Negro Women, Sacramento Valley Section
Oakland Better Birth Foundation
Providence St. Joseph Health
Public Law Center
Religious Coalition for Reproductive Choice California
Santa Barbara Women's Political Committee
SMV Doula Collective
The Fresno Center
The Women's Foundation of California, Women's Policy Institute
United Ways of California (UWCA)
Women's Foundation California
Women's Health Specialists
Women's Wisdom Art

Opposition

None on file

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