

Date of Hearing: April 19, 2023

ASSEMBLY COMMITTEE ON APPROPRIATIONS

Chris Holden, Chair

AB 470 (Valencia) – As Amended March 13, 2023

Policy Committee: Business and Professions

Vote: 18 - 0

Urgency: No

State Mandated Local Program: No

Reimbursable: No

SUMMARY:

This bill updates continuing medical education (CME) standards to further promote cultural and linguistic competency and enhance the quality of physician-patient communication.

Specifically, this bill:

- 1) Adds, as an example criterion for educational activities that may be applied to CME, improvement of the quality of physician-patient communication.
- 2) Requires that an advisory group working with a CME accreditation association to update cultural and linguistic competency standards be informed of federal and state statutory threshold language requirements.
- 3) Requires the updated standards for cultural and linguistic competency to prioritize languages in proportion to primary languages spoken by at least 10% of the state population, meet the needs of California's changing demographics, and address language disparities as they emerge.

FISCAL EFFECT:

No state costs.

COMMENTS:

- 1) **Purpose.** According to the author:

Patients whose primary language is not English should receive appropriate and culturally competent medical care. AB 470 would ensure Limited English Proficient (LEP), and English as a Second Language (ESL) individuals receive high quality care by improving communications with their physicians. Our State has a disparity between the number of our physicians who speak foreign languages and patient populations whose first language is not English. According to a report released by the UCLA Latino Policy and Politics Initiative, there are only 62.1 Spanish-speaking physicians per 100,000 [LEP] individuals. This bill will address language barriers by providing physicians

with expanded access to foreign language courses at institutions that accredit [CME] courses, so that our healthcare professionals can effectively interact with their patients from diverse backgrounds. Additionally, CME standards may be updated to meet the needs of California's changing demographics as they emerge. This will have a positive impact in communities whose languages are currently underserved by the physician workforce, and allow these healthcare workers to provide culturally competent care.

2) **Background.**

- a) **CME for Physicians.** Every physician licensed by the Medical Board of California (MBC) must complete at least 50 hours of approved CME during each two-year license renewal cycle. A variety of approved CME courses can be used to meet the requirement. When determining which CME courses to approve, the MBC's Division of Licensing currently considers programs accredited by specific organizations, such as the American Medical Association. The MBC also has broad authority to consider other programs offered by organizations and institutions acceptable to the MBC.

Since 2006, all CME courses approved by accrediting associations have been required under the Medical Practice Act to contain curriculum that includes cultural and linguistic competency in the practice of medicine.

3) **Prior Legislation.**

- a) AB 241 (Kamlager-Dove), Chapter 417, Statutes of 2019, required all continuing medical education courses to contain curriculum that includes the understanding of implicit bias.
- b) AB 801 (Diaz), Chapter 510, Statutes of 2003, establishes the Cultural and Linguistic Physician Competency Program, to be operated by local medical societies of the California Medical Association and monitored by the MBC.

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