CONCURRENCE IN SENATE AMENDMENTS
AB 1307 (Ávila Farías)
As Amended August 28, 2026
Majority vote

SUMMARY

Reestablishes the Licensed Dentists from Mexico Pilot Program and revises various requirements contained within the existing pilot program relating to the temporary state licensure of dental professionals from Mexico.

Senate Amendments

1) Clarify the requirements for an applicant to receive a three-year nonrenewable license to practice dentistry from the Dental Board of California (DBC).

2) Revises the course curriculum that must be provided to applicants and specifies that the instruction must be provided by an instructor who is affiliated with a California dental school accredited by the Commission on Dental Accreditation (CODA).

3) Authorize the DBC to terminate a license if a participant is denied a visa.

4) Specify that the fee for a license shall be the lesser of $957 or the reasonable regulatory costs of administering the pilot program.

5) Require applicants to pass the California Dental Law and Ethics Examination.

6) Delete the requirement for participants to complete at least two hours of specified courses per year.

7) Provide that a license shall not carry any designation that the participant is a participant in the program.

8) Limit eligibility to serve as a program evaluator to a dental school in California and the National Autonomous University of Mexico.

9) Declare that it is the intent of the Legislature that the DBC implement the program within six months of receiving philanthropic funds equal to or greater than $200,000.

10) Make additional technical and clarifying changes.

COMMENTS

Mexico Pilot Programs. The concept of allowing health professionals from Mexico to temporarily practice in California was first proposed in 1998 by the Clinica de Salud del Valle de Salinas (CSVS), a federally qualified health center (FQHC) located in Monterey County. As described in reporting by the CHCF, "the clinic was having a hard time finding enough physicians to work in Salinas, let alone doctors who spoke Spanish and understood the culture." CSVS's chief executive officer worked with a policy consultant to develop and advocate for the proposal, which reportedly received "pushback from some California medical school officials, physicians, and the California Medical Association."

In 2000, the Legislature enacted Assembly Bill 2394 by Assemblymember Marco A. Firebaugh, sponsored by the California Hispanic Healthcare Association. As amended in the Senate, the bill established the Task Force on Culturally and Linguistically Competent Physicians and Dentists. The bill briefly included language that would have created a Doctors and Dentists from Mexico Exchange Pilot Program; however, this language was subsequently removed from the bill. Instead, a Subcommittee of the Task Force, chaired by the Director of Health Services, was charged with examining "the feasibility of establishing a pilot program that would allow Mexican and Caribbean licensed physicians and dentists to practice in nonprofit community health centers in California's medically underserved areas."

AB 2394 required the Subcommittee to make its report to the full Task Force by March 1, 2001, and then the full Task Force was required to forward the report to the Legislature, with any comments, by April 1, 2001. The practicality of this timeline was questioned by the Senate Committee on Business and Professions; the committee analysis noted that the Subcommittee was only allotted three months after the effective date of the bill to deliver its report to the Task Force. This due date was considered even more challenging in view of the fact that the sponsor of the bill had indicated a desire that the Subcommittee visit Mexico as part of its study.

In 2001, Assemblymember Firebaugh introduced Assembly Bill 1045, again sponsored by the California Hispanic Health Care Association. The bill initially proposed to simply require that the Subcommittee's recommendations be incorporated into the Medical Practice Act by statute—despite the fact that those recommendations had not yet been made. As predicted, the Subcommittee's report had not been accomplished by the dates prescribed in the prior bill. When AB 1045 was first considered by the Assembly Committee on Health, the first meeting of the Subcommittee was scheduled to take place days later on May 10, 2001. Additional amendments to the bill proposed to push out the Subcommittee's deadline to report to the Task Force until June 15, 2001, with the final report due on August 15, 2001. AB 1045 subsequently stalled following passage to the Senate, remaining pending in the Senate Committee on Business and Professions with multiple hearings postponed over the course of the following year.

In the meantime, the Subcommittee finally met on July 10, 2001. During this meeting, the Subcommittee discussed comments and proposals it had received from seven organizations, including the California Medical Association, the California Dental Association, the Medical Board of California, the California Hispanic Health Care Association, the California Latino Medical Association, the Latino Coalition for a Healthy California, and the chief executive officer of CSVS (the FQHC in Monterey County). The proposal submitted by the California Hispanic Health Care Foundation comprised of language creating a Licensed Doctors and Dentists from Mexico Pilot Program that was briefly amended into AB 1045 (and removed just two days later). The draft proposal was subsequently revised based on comments from CSVS.

The Subcommittee compared each proposal in an element matrix and then discussed potential models for a pilot program during its meeting. According to the Subcommittee meeting minutes:

> Although many members agreed on a number of the proposed elements, there was significant disagreement upon the time frame for implementing a pilot project, the temporary or permanent nature of licensure, education requirements for licensure, placements of doctors and dentists who participate in a pilot project, and how to determine cultural linguistic competency.

After extensive discussion of the different proposals and the identified areas of disagreement, it was eventually determined that the Subcommittee should disband, with members arguing that "the Subcommittee has come as far as it can with decisions and proposals." A decision was made to simply forward the element matrix and the various proposals to the full Task Force without making any specific recommendation for adoption. The chairs of the Task Force subsequently submitted the Subcommittee's report to the Legislature on September 7, 2001. The report's cover letter noted that while its transmittal fulfilled the Task Force's commitment to forward the Subcommittee's report, the contents of the report were still being discussed by the full Task Force and the submission did not constitute adoption of the report or any recommendations by the Task Force. As a result, no conclusive recommendations were ever submitted to the Legislature for consideration, but rather a collection of unresolved discussion topics and conflicting proposals.

Amendments were ultimately made to AB 1045 in May 2002 that reflected the revised language proposed to the Subcommittee by the California Hispanic Health Care Association, the bill's sponsor. By the time AB 1045 was heard by the Senate Committee on Business and Professions in August 2002, it had been amended several additional times but was still formally opposed by the California Medical Association, the California Dental Association, and the Federation of State Medical Boards, all of whom raised concerns that the proposed pilot program could result in undertrained, lower quality health care providers being allowed to practice in California. The committee analysis noted that further amendments were needed to clarify the author's intent and resolve outstanding questions about how the program would be implemented.

Despite the opposition to the legislation, AB 1045 ultimately passed the Legislature and was signed into law by Governor Gray Davis on September 30, 2002. The final amended version of the bill repealed the statute establishing the Subcommittee and established the Licensed Physicians and Dentists from Mexico Pilot Program. The bill allowed up to 30 physicians and 30 dentists from Mexico to participate in the program for three-year periods—a compromise from the 150 physicians and 100 dentists that were previously proposed. Participants in the pilot program were required to hold a license in good standing in Mexico, pass a board review course, complete a six-month orientation program, and enroll in adult English-as-a-second-language (ESL) classes. The bill additionally required the Medical Board of California (MBC) and Dental Board of California (DBC) to provide oversight, in consultation with other entities, to provide oversight of these entities and submit reports to the Legislature.

While AB 1045 was enacted in 2002, its vision was not effectuated for over two decades. This substantial delay is attributable to several factors. First, the bill required that the pilot program could only be implemented "if the necessary amount of nonstate resources are obtained" and that "General Fund moneys shall not be used for these programs." Sponsors of the bill would have to secure private philanthropic donations to fund the pilot program. Additionally, the bill required the identification of medical schools and hospitals that would accept foreign physicians, which was reportedly a challenging task.

Supporters of the pilot program ultimately succeeded in overcoming the administrative hurdles to implementing AB 1045. Philanthropic dollars were collected and placed into a Special Deposit Fund to support the MBC's implementation of the bill, with $333,000 from that fund appropriated in the Budget Act of 2020. Similar funding has continued to be appropriated in subsequent budget bills, with an estimated $498,000 in philanthropic funds appropriated in Fiscal Year 2023-24 and $299,000 appropriated in Fiscal Year 2024-25.

Physicians from Mexico finally started serving patients under the pilot program in August 2021, beginning with physicians working at San Benito Health Foundation in August 2021. Additional physicians subsequently began serving patients at CSVS in Monterey County, Altura Centers for Health in Tulare County. From January to November 2023, additional physicians from Mexico began serving patients in the Alta Med Health Corporation in Los Angeles and Orange Counties.

Early in the implementation of the pilot program, some barriers were identified in the process through which physicians from Mexico receive approval to participate in the pilot program. As noncitizens, applicants typically would not have an individual taxpayer identification number (ITIN) or social security number (SSN), which is required by all regulatory boards, including the MBC, as a condition of receiving a license. However, applicants typically cannot apply to receive a visa and accompanying SSN without proof that they may legally work in California, which they cannot demonstrate without a license from the MBC. To resolve this issue, Assembly Bill 1395 (Garcia) was signed into law in 2023 to resolve this issue for physicians who had been unable to finalize their participation in the pilot program.

Another issue identified was that some physicians from Mexico were unable to practice for significant portions of the three-year period to which their license was limited due to factors outside their control. To address this issue, language was included in SB 815 (Roth), the MBC's sunset bill, to authorize an extension of a license when the physician was unable to work due to a delay in the visa application process beyond the established time line by the federal Customs and Immigration Services. The MBC was also authorized to extend a license if the physician was unable to treat patients for more than 30 days due to an ongoing condition, including pregnancy, serious illness, credentialing by health plans, or serious injury. These extensions allowed those physicians from Mexico more time to serve patients under the pilot program.

The first annual progress report on the pilot program was submitted to the Legislature by the University of California, Davis in August of 2022. The report found that many patients had substantially positive experiences communicating with their doctor, and frequently felt welcome. While the overall efficacy of the pilot program was still under review, initial reports appeared positive. UC Davis submitted its second annual progress report on the pilot program to the Legislature in October of 2023. As stated in the report summary, the goal of the evaluation was to provide recommendations on the pilot program and opine on "whether it should be continued, expanded, altered, or terminated." The report summary concluded with a finding that the pilot program “has strong positive feedback from all. Physicians integrated seamlessly, making healthcare more accessible, and increasing patient trust. Staff reported excellent patient care processes and a supportive environment.” The report further concluded that physicians in the program “demonstrated a solid understanding of California Medical Standards.”

With early assessments of the pilot program producing undeniably positive findings, the original supporters of AB 1045 introduced new legislation in 2024 to revise and expand the program for physicians from Mexico, making a number of changes from the version that was negotiated back in 2001. AB 2860 (Garcia) extended the licenses of physicians currently participating in the pilot program by an additional three years and revised the requirements that physicians from Mexico must meet both prior to coming to California and upon arrival. The bill then allowed a newly codified Licensed Physicians from Mexico Program to gradually expand over fifteen years, with increases every four years to eventually reach a maximum of no more than 220 physicians from Mexico in the program, including up to 40 psychiatrists, commencing January 1, 2041.

Licensed Dentists from Mexico Pilot Program. In addition to making revisions to the Licensed Physicians from Mexico Program, AB 2860 reestablished the component of the prior pilot program relating to dentists from Mexico as the Licensed Dentists from Mexico Pilot Program. To date, no dentists from Mexico have been able to participate in the pilot program, with supporters of the program prioritizing physicians in the early stages of implementation. The intent of AB 2860 was to begin the process of allowing dentists to participate in a recodified pilot program within the Dental Practice Act.

While prior efforts to implement a pilot program for temporarily licensing health professionals from Mexico focused on California's primary care provider shortage, the state is facing a comparably urgent crisis in regards to its dental health professional workforce. While California has historically had the highest number of dentists per capita in the United States, the state nevertheless has struggled with dental care accessibility. Approximately 2.2 million Californians reside in areas designated as dental health professional shortage areas. This access gap is exacerbated by the underrepresentation of linguistically and culturally competent dentists; while 40 percent of California's population is Latino/x, only 8 percent of the state's dentists are identified as Latino/x or Black. The lack of Spanish-speaking dental professionals contributes to persistent access failures for vulnerable communities in California such as farmworkers. The Farmworker Health Survey conducted by researchers at the University of California, Merced found that only 35 percent of farmworkers had visited the dentist in the past year.

To enable the Licensed Dentists from Mexico Pilot Program to begin accepting applicants and deploying dentists to serve high-need populations in the state, this bill would replace existing statute establishing the pilot program with a substantially similar law. Among other changes, the bill would expands program eligibility to include graduates from any dental program accredited by Consejo Nacional de Educación Odontológica, A.C. or Comités Interinstitucionales para la Evaluación de la Educación Superior. The bill would also require certification from the Asociación Dental Mexicana to confirm competency in specified clinical experiences.

Up to 30 dentists in the pilot program would be limited to practicing in FQHCs that meet accreditation and quality assurance requirements and that have at least one health professional shortage area or dental professional shortage area within their service area. Just as with prior pilot program implementations, all costs for administering the pilot program will be fully paid for by funds provided by philanthropic foundations. Once this funding is secured and the DBC has established its framework for the program, the author believes that a dental professional workforce will become available to low-access communities in California, with the likely added benefit of linguistic and cultural competency for practitioners who are expected to routinely engage with Spanish-speaking and immigrant patient populations.

According to the Author
"California is home to one of the largest dentist workforces in the nation, yet over 2.7 million Californians live in areas that have limited access to dental health professionals. The majority of which live in rural, low-income communities that are predominantly Latino. AB 1307 expands access to dental health professional by establishing the Licensed Dentists from Mexico Pilot Program, allowing 30 qualified dentists from Mexico to obtain a time-limited license and visa to practice in federally qualified health centers. These dentists must meet rigorous educational, licensing, and language standards to ensure high-quality, culturally competent care. This bill is modeled after a successful physician pilot program and reflects our state's commitment to health

equity. AB 1307 offers a targeted, cost-neutral solution to reduce disparities and improve oral health outcomes for some of California's most vulnerable populations."

Arguments in Support
CPCA Advocates, the advocacy affiliate of the California Primary Care Association, writes in support of this bill: "In March 2024, California had 30,280 active dentists, one of the most in the US, yet we also had 532 dental health professional shortage areas (DHPSA), in which 2.7 million Californians reside, creating massive inequities in healthcare, often on the basis of class and race. California's Latino population is over 40%, and in 2021 approximately 10.4 million Californians spoke Spanish as their first language. Yet California's academic and professional institutions in dentistry have not structurally addressed the cultural and linguistic barriers for such a large portion of our population to access dental care. AB 1307 builds on the success of a sister program that is bringing physicians from Mexico to provide care to needy Californians across the state."

Arguments in Opposition
There is no opposition on file for the most recently amended version of this bill.

FISCAL COMMENTS

According to the Senate Committee on Appropriations, the DBC estimates a one-time cost of $300,000 to contract with a vendor to conduct the required program evaluation, along with one-time workload impact to promulgate regulations, as well as ongoing workload to process applications and issue licenses. The Office of Information Services estimates costs of $72,000 to create a new license type in the BreEZe system; OIS notes these costs will also be paid for by philanthropic funds.

VOTES:

ASM BUSINESS AND PROFESSIONS: 17-0-1
YES: Berman, Flora, Ahrens, Alanis, Bains, Caloza, Chen, Elhawary, Hadwick, Haney, Irwin, Jackson, Krell, Lowenthal, Macedo, Nguyen, Pellerin
ABS, ABST OR NV: Bauer-Kahan

ASM APPROPRIATIONS: 13-1-1
YES: Wicks, Arambula, Calderon, Caloza, Elhawary, Fong, Mark González, Hart, Pacheco, Pellerin, Solache, Ta, Tangipa
NO: Dixon
ABS, ABST OR NV: Sanchez

ASSEMBLY FLOOR: 72-4-3
YES: Addis, Aguiar-Curry, Ahrens, Alanis, Alvarez, Arambula, Ávila Farías, Bains, Bauer-Kahan, Bennett, Berman, Boerner, Bonta, Bryan, Calderon, Caloza, Carrillo, Castillo, Chen, Connolly, Davies, Elhawary, Flora, Fong, Gabriel, Garcia, Gipson, Jeff Gonzalez, Mark González, Hadwick, Haney, Harabedian, Hart, Hoover, Irwin, Jackson, Kalra, Krell, Lackey, Lee, Lowenthal, Macedo, Muratsuchi, Nguyen, Ortega, Pacheco, Papan, Patel, Pellerin, Petrie-Norris, Quirk-Silva, Ramos, Ransom, Celeste Rodriguez, Michelle Rodriguez, Rogers, Blanca Rubio, Schiavo, Schultz, Sharp-Collins, Solache, Soria, Stefani, Ta, Tangipa, Valencia, Wallis, Ward, Wicks, Wilson, Zbur, Rivas
NO: DeMaio, Dixon, Ellis, Sanchez
ABS, ABST OR NV: Gallagher, McKinnor, Patterson

UPDATED

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