
SENATE COMMITTEE ON APPROPRIATIONS

Senator Anna Caballero, Chair
2025 - 2026 Regular Session

AB 1440 (Committee on Environmental Safety and Toxic Materials) - Pesticide testing

Version: February 21, 2025

Urgency: No

Hearing Date: July 14, 2025

Policy Vote: E.Q. 8 - 0

Mandate: No

Consultant: Ashley Ames

Bill Summary: This bill would extend the sunset, from January 1, 2027, to January 1, 2029, on the data reporting and medical supervisor registration requirements of the agricultural pesticide worker protection program.

Fiscal Impact:

- Annual costs in the low hundreds of thousands of dollars for 2027 and 2028 (Department of Pesticide Regulation Fund) for the Department of Pesticide Regulation (DPR) and the Office of Environmental Health Hazard Assessment (OEHHA) to continue administering program requirements for two years when they would have otherwise sunset absent this bill.

Background:

California Medical Supervision Program (CMSP). Established in 1974, the CMSP is intended to protect pesticide handlers from excessive exposure to Toxicity Category 1 and 2 OP/CB pesticides.

Under the CMSP, employers must contract with a licensed physician as a “medical supervisor” to test the blood cholinesterase level of workers who regularly handle these pesticides. To monitor each employee, the medical supervisor establishes baseline values of cholinesterase during non-exposure periods, and then periodically measure cholinesterase activity levels while the worker handles OPs/CBs. If the employee's cholinesterase drops below certain levels, the employer must take certain actions immediately, such as promptly retesting the employee, evaluating the employee's work practices, or immediately removing the employee from further exposure to pesticides.

Report Card – 2015. DPR and OEHHA submitted a statutorily-required report to the Legislature in December 2015, which found overall, the CMSP appeared effective at protecting agricultural workers who handle cholinesterase-inhibiting pesticides.

The report did find, however, that based on the data submitted from 2011-2013, the usefulness of the data analysis was hampered by including thousands of records from people not in the CMSP (e.g., those tested for other reasons). Plus, many tests didn't include information about the physician or the employee being tested, which DPR needs to identify individual workers and to track and compare an individual employee's cholinesterase activity level after handling pesticides to their pre-exposure levels. DPR and OEHHA laid out specific actions to improve the CMSP and asked the Legislature to both extend the cholinesterase reporting mandate through December 31,

2018, and transfer reporting responsibilities from the laboratories to the medical supervisors.

The Legislature, through AB 2892 (Assembly Environmental & Toxic Materials Committee, Chapter 475, Statutes of 2016):

- Extended the reporting requirement through January 1, 2021;
- Updated the information required to be reported;
- Transferred some of the responsibility of reporting cholinesterase test results and related information from laboratories to medical supervisors;
- Required OEHHA to establish a procedure for registering and deregistering medical supervisors and to establish performance requirements;
- Codified the requirement that employers of workers who regularly handle OPs/CB pesticides must contract with a medical supervisor registered with OEHHA; and
- Required DPR and OEHHA to prepare and publicly post an update on the effectiveness of the medical supervision program and the utility of laboratory-based reporting of cholinesterase testing for illness surveillance and prevention by January 1, 2021.

Subsequent CMSP Extensions & A 2022 Report Card. AB 3220 (Assembly Environmental & Toxic Materials Committee, Chapter 296, Statutes of 2020) again extended the sunset on the data reporting requirements and the medical supervisor registration provisions of the CMSP, this time to January 1, 2023.

Then in January 2022, DPR and OEHHA reported the CMSP still appeared effective in protecting agricultural workers who are handling cholinesterase-inhibiting pesticides. However, the utility of the data analysis was still hampered by including test records from people not in the CMSP and by missing information about the purpose of the test, the physician's name, and information about the patient.

Another Extension & CMSP Improvements. Following the release of the 2022 report, AB 1787 (Quirk, Chapter 108, Statutes of 2022) was enacted to:

- Require reporting laboratories to submit additional identifying information for the patient and medical supervisor so DPR can better identify, track, and protect the health of workers in the CMSP; and
- Extend the sunset on the data reporting and medical supervisor registration requirements of the CMSP from January 1, 2023, to January 1, 2027.

Proposed Law: This bill would extend the sunset, from January 1, 2027, to January 1, 2029, on the data reporting and medical supervisor registration requirements of the CMSP.

Related Legislation:

AB 1787 (Quirk, Chapter 108, Statutes of 2022) extended the sunset, from January 1, 2023, to January 1, 2027, on the data reporting and medical supervisor registration requirements of the Program, and required laboratories to submit additional information

to the State to help identify workers, and medical supervisors of workers, in the Program.

AB 3220 (ESTM Committee, Chapter 296, Statutes of 2020) extended the sunset, from January 1, 2021, to January 1, 2023, on the data reporting and medical supervisor registration provisions of the Program.

AB 2892 (ESTM Committee, Chapter 475, Statutes of 2016) updated and enhanced the Program by extending the sunset on the requirement for laboratories to transmit cholinesterase test results to the State; requiring OEHHA to register medical supervisors; requiring medical supervisors to report depressions in cholinesterase levels as a pesticide illness; and, requiring DPR and OEHHA to prepare and publicly post an update on the effectiveness of the medical supervision program and the utility of laboratory-based reporting of cholinesterase testing for illness surveillance and prevention.

AB 1963 (Nava, Chapter 369, Statutes of 2010) required clinical laboratories that perform cholinesterase testing for the purpose of determining workers' pesticide exposure to electronically report test results to DPR.

AB 1530 (Lieber, 2007) would have required clinical laboratories that perform cholinesterase testing for the purpose of determining workers' pesticide exposure to electronically report test results to DPR. This bill was held in this committee.

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