

Date of Hearing: April 14, 2026

Chief Counsel: Andrew Ironside

ASSEMBLY COMMITTEE ON PUBLIC SAFETY

Nick Schultz, Chair

AB 1607 (Mark González) – As Amended March 26, 2026

**SUMMARY:** Extends the sunset date until January 1, 2037, for the Maddy Emergency Medical Services (EMS) Fund, which authorizes each county to levy an additional \$2 for every \$10, or part of \$10, upon criminal fines to support an emergency medical services fund for reimbursement of costs related to patients who do not make payment for emergency medical services.

**EXISTING LAW:**

- 1) States that for the purposes of supporting emergency medical services as specified, in addition to other specified criminal penalties, the county board of supervisors may elect to levy an additional penalty in the amount of \$2 for every \$10, or part of \$10, upon every fine, penalty, or forfeiture imposed and collected by the courts for all criminal offenses. (Gov. Code, § 76000.5, subd. (a)(1).)
- 2) Specifies that the additional penalty for emergency medical services does not apply to the restitution fine, parking violations, the state surcharge and specified penalty assessments. (Gov. Code, § 76000.5, subd., (a)(2).)
- 3) Provides that the emergency medical services funds shall be collected only if the county board of supervisors provides that the increased penalties do not offset or reduce the funding of other programs from other sources, but that these additional revenues result in increased funding to those programs. (Gov. Code, § 76000.5, subd. (b).)
- 4) States that moneys collected for the emergency medical services fund shall be taken from fines and forfeitures deposited with the county treasurer prior to any division. (Gov. Code, § 76000.5, subd. (c).)
- 5) Specifies that funds collected pursuant to this section shall be deposited into the Maddy EMS Fund. (Gov. Code, § 76000.5, subd. (d).)
- 6) States the EMS Fund sunsets on January 1, 2027. (Gov. Code, § 76000.5, subd. (e).)
- 7) Provides that each county may establish an emergency medical services fund, upon the adoption of a resolution by the board of supervisors. (Health & Saf. Code, § 1797.98a, subd. (b)(1).)
- 8) Specifies that the costs of administering the fund shall be reimbursed by the fund in an amount that does not exceed the actual administrative costs or 10 percent of the amount of

the fund, whichever amount is lower. (Health & Saf. Code, § 1797.98a, subd. (b)(2).)

- 9) States that all interest earned on moneys in the fund shall be deposited in the fund for disbursement as specified in this section. (Health & Saf. Code, § 1797.98a, subd. (b)(3).)
- 10) States that the amount in the fund, reduced by the amount for administration and the reserve, shall be utilized to reimburse physicians and surgeons and hospitals for patients who do not make payment for emergency medical services and for other emergency medical services purposes as determined by each county according to the following schedule:
  - a) Fifty-eight percent of the balance of the fund shall be distributed to physicians and surgeons for emergency services provided by all physicians and surgeons, except those physicians and surgeons employed by county hospitals, in general acute care hospitals that provide basic, comprehensive, or standby emergency services, as specified, up to the time the patient is stabilized. (Health & Saf. Code, § 1797.98a, subd. (b)(5)(A).)
  - b) Twenty-five percent of the fund shall be distributed only to hospitals providing disproportionate trauma and emergency medical care services. (Health & Saf. Code, § 1797.98a, subd. (b)(5)(B).)
  - c) Seventeen percent of the fund shall be distributed for other emergency medical services purposes as determined by each county, including, but not limited to, the funding of regional poison control centers. Funding may be used for purchasing equipment and for capital projects only to the extent that these expenditures support the provision of emergency services and are consistent with the intent of this chapter. (Health & Saf. Code, § 1797.98a, subd. (b)(5)(C).)
- 11) States that the source of the moneys in the fund shall derive from the penalty assessment made for this purpose. (Health & Saf. Code, § 1797.98a, subd. (c).)
- 12) Specifies that of the money deposited into the fund as specified, 15 percent shall be utilized to provide funding for all pediatric trauma centers throughout the county, both publicly and privately owned and operated. (Health & Saf. Code, § 1797.98a, subd. (e).)
- 13) States that counties that do not maintain a pediatric trauma center shall utilize the money deposited into the fund to improve access to, and coordination of, pediatric trauma and emergency services in the county, with preference for funding given to hospitals that specialize in services to children, and physicians and surgeons who provide emergency care for children. (Health & Saf. Code, § 1797.98a, subd. (e).)

**FISCAL EFFECT:** Unknown

**COMMENTS:**

- 1) **Author's Statement:** According to the author, "California's Emergency Departments are the health care safety net and the front lines of any public health emergency. With numbers on the rise, over 15 million Californians visit an ED across the state each year. The Maddy Fund was designed to support patients and providers, ensuring those who need care can receive it and those who provide care can be reimbursed for it. Without the Maddy Fund, we will see

ED across this state, including at rural hospitals, shutter their doors.”

- 2) **Maddy EMS Fund:** In 1987, the Legislature approved the establishment of the Maddy EMS Fund, and although counties are not required to establish EMS Funds, almost all counties have done so. The Legislature intended the EMS Funds to reimburse physicians, hospitals, and other providers of emergency services, specifically for patients who do not have health insurance coverage for emergency services and care, cannot afford to pay for those services, and for whom payment will not be made through any private coverage or by any program funded in whole or in part by the federal government, as specified.

SB 1773 (Alarcon), Chapter 841, Statutes of 2006, further authorized county Boards of Supervisors to levy an additional penalty in the amount of \$2 for every \$10, or part of \$10 for criminal offenses, violations relating to the Vehicle Code and alcohol beverages. Under SB 1773, 15% of the funds collected must be utilized to fund pediatric trauma centers in the county, both publicly and privately owned and operated. The expenditure of money is limited to reimbursement to physicians and surgeons, and to hospitals for patients who do not make payment for emergency care services in hospitals up to the point of stabilization, or to hospitals for expanding the services provided to pediatric trauma patients at trauma centers, other hospitals providing care to pediatric trauma patients, or at pediatric trauma centers, including the purchase of equipment. The remaining 75% of these funds are distributed in accordance with the specified formula. SB 1773 was set to originally sunset in 2009, but was extended to January 1, 2014 under SB 1236 (Padilla), Chapter 60, Statutes of 2008. SB 191 (Padilla), Chapter 600, Statutes of 2013, extended the sunset date until January 1, 2017. SB 867 (Roth), Chapter 147, Statutes of 2016, extended the sunset date until January 1, 2027. This bill extends the sunset date for the Maddy EMS Fund until January 1, 2027.

- 3) **Existing Penalty Assessments:** There are penalty assessments and fees added on the base fine the court imposes on a defendant for a criminal conviction. The penalty for the Maddy EMS Fund is one of several additional fees added to a defendant’s base fine. In the past several years, numerous changes to the law have eliminated penalty assessments on convictions as these fees can create a cycle of poverty for historically marginalized communities.<sup>1</sup> Currently, penalty assessments may amount to thousands of dollars and ultimately act as a bar to services, and may even result in a violation of probation, resulting in jail time. Assuming a defendant was fined \$1000, the following penalty assessments could be imposed pursuant to the Penal Code and the Government Code:

Penal Code § 1464 state penalty on fines	\$1,000 (\$10 for every \$10).
Penal Code § 1465.7 state surcharge	\$200 (20%)
Penal Code § 1465.8 court operations assessment	\$40 (\$40 per criminal offense)
Government Code § 70372 court construction penalty	\$500 (\$5 for every \$10).
Government Code § 70373 assessment	\$30 (\$30 for any felony or misdemeanor)

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<sup>1</sup> *Ending Criminal Administrative Fees in California* (December, 2024) University of California, Berkeley, School of Law, Policy Advocacy Clinic <<https://www.law.berkeley.edu/experiential/clinics/policy-advocacy-clinic/adult-fees/>> [as of Apr. 6, 2026].

Government Code §76000 penalty	\$700 (\$7 for every \$10)
Government Code §76000.5 EMS penalty	\$200 (\$2 for every \$10)
Government Code §76104.6 DNA fund penalty	\$100 (\$1 for every \$10)
Government Code §76104.7 additional DNA fund penalty	\$400 (\$4 for every \$10)
<b>Total Fine with Assessments:</b>	\$4,170.

It should be noted that this figure does not include victim restitution, or the restitution fine, and that other fines and fees, such as the jail booking fee, attorney fees, and probation department fees.

- 4) **Criminal Fines are Not a Reliable Funding Source:** Criminal fines and penalties have climbed steadily in recent decades, while these fines have realized diminishing returns from collection efforts. In a recent Legislative Analyst’s Office (LAO) report on criminal fines and fees, they report that, “total amount of fine and fee revenue distributed to state and local governments has steadily declined since 2010-11. This has resulted in the state taking various actions to address a number of state funds (and the programs they support) facing insolvency.”<sup>2</sup> The LAO report further finds:

The 2021-22 budget package eliminated about 17 fees generally related to diversion programs as well as to the collection of restitution and other criminal assessments as of January 2022. It also provided \$50 million annually to counties from the General Fund to backfill lost revenue. Additionally, the 2022-23 budget provided \$10.3 million annually to the judicial branch from the General Fund to backfill their share of lost revenue. The 2020-21 budget package eliminated about 20 criminal justice administrative fees generally related to arrest and booking, indigent criminal defense, and alternative to incarceration programs (such as work release or electronic monitoring) as of July 2021. It also provided \$65 million annually to counties from the General Fund for five years beginning in 2021-22 to backfill lost revenue.<sup>3</sup>

In a recent landmark decision by the California Second District Court of Appeal, the Court held that “[i]mposing unpayable fines on indigent defendants is not only unfair, it serves no rational purpose, fails to further the legislative intent, and may be counterproductive.” (*People v. Dueñas* (2019) 30 Cal.App.5th 1157, 1167.)

Further, in another recent decision by the California Supreme Court, the Court recognized that imposing significant fines and fees on indigent defendants raises serious due process concerns and may be inappropriate absent an ability-to-pay determination. (*People v. Kopp* (2019) 38 Cal.App.5th 47, 97.)

Given some of the problems identified by the LAO, and the California courts, the Legislature should consider whether continuing to use criminal fines and fees that individuals often

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<sup>2</sup> *Overview of Criminal Fine and Fee System and Notable Related Actions* (June 23, 2023) California’s Legislative Analyst’s Office (LAO) < <https://lao.ca.gov/handouts/crimjust/2023/Criminal-Fine-and-Fee-Actions-062323.pdf> > [as of Apr. 6, 2026].

<sup>3</sup> *Id.* at pg. 8.

struggle to pay is the best way to fund the Maddy EMS Fund and other important programs that generate revenues through assessment of criminal penalties.

- 5) **Argument in Support:** According to the *California Hospitals Association*, “California’s Emergency Departments (EDs) are experiencing unprecedented strain as a symptom of broader, systemwide challenges like limited inpatient capacity, discharge barriers and delays, shortages in post-acute and behavioral health placements, inadequate access to primary and preventive care, and increasing reliance on the 911 system for non-emergent needs. Despite these pressures, EDs remain open and provide care to all patients at all times. With ED visits at an all-time high — and approximately 2.1 million Californians estimated to lose health coverage by 2034 because of the One Big Beautiful Bill Act (OBBBA) — protecting emergency care is more challenging and essential than ever.

“The Maddy Fund is used to reimburse physicians and hospitals who treat uninsured patients in the ED, while also supporting other EMS-related efforts. In addition, 15% of the funds collected are allocated to the “Richie Fund,” which supports pediatric trauma centers. When uninsured patients are unable to pay for emergency services, a hospital or physician may submit a reimbursement request to their respective county’s Maddy Fund. While this funding does not cover the full cost of care, it helps EDs remain open and continue providing essential services to their communities. AB 1607 would make the Maddy Fund permanent, preserving a long-standing funding mechanism that supports emergency care delivery across California.”

- 6) **Argument in Opposition:** According to *Debt Free Justice California (DFJC)*, “DFJC is a statewide coalition focused on ending the ways in which the criminal legal system extracts wealth and resources from people and communities. If passed, AB 1607 would authorize county boards of supervisors to assess an additional 20% penalty to all criminal legal system fines and fees to fund emergency medical services until 2037. DFJC wholeheartedly supports the accessibility of emergency medical services, and we oppose AB 1607 because the EMS Fund fee is an ineffective and regressive revenue source for these essential medical services, especially in light of the California Supreme Court’s recent holding in *People v. Kopp*.<sup>1</sup> *Kopp*—which held that fees assessed to individuals must consider those individuals’ ability to pay such fees—will drastically reduce any revenue previously generated from the EMS Fund fee and will necessitate additional funding for emergency medical services if such services are to operate at current capacity.<sup>2</sup>

“California’s persistent poverty crisis and the *People v. Kopp* decision will make collections for the EMS Fund increasingly unstable. Although the EMS Fund fee is discretionary, virtually all counties throughout California assess this tax.<sup>3</sup> Research demonstrates that criminal fees cause lasting financial and emotional harm to system-impacted people and their families, often forcing families to choose between putting food on the table and paying their debt.<sup>4</sup> This impossible choice has become the reality for an increasing number of low-income individuals as poverty rates in California have soared past pre-pandemic rates.<sup>5</sup> Moreover, because of *Kopp*, the California Supreme Court ruled that courts must consider individuals’ ability to pay fees like the EMS Fund fee.<sup>6</sup> As approximately 80% of criminal defendants in California are indigent, forcing California courts to consider an individual’s ability to pay such fees will necessarily decrease the amount of fees assessed, resulting in significantly less overall revenue available to counties that operate an EMS Fund.<sup>7</sup> Given the reality of California’s affordability crisis and post-*Kopp* collections, the legislature must

transition emergency medical services to more stable sources of funding that do not severely burden the very low-income Californians who are most in need of such essential services.

“Finally, there have been numerous efforts to reform California’s reliance on criminal fines and fees. Since 2018, California has repealed 46 criminal fees and discharged over \$6.9 billion.<sup>8</sup> We strongly believe that a broader discussion on California’s existing criminal fine and fee practices should take place among key legislators and a wide array of stakeholders to possibly identify a more comprehensive and balanced approach to this larger policy issue. We encourage this author and others to help bring us together for this convening.” (Citations omitted)

- 7) **Related Legislation:** AB 2428 (Rodriguez) would allow specified governing bodies to accept personal checks for court-ordered debt relating to a criminal proceeding. The bill also prohibits specified governing bodies from charging a fee for returned checks or insufficient funds, and eliminates returned check fees for payments for court-ordered debt relating to a criminal proceeding by declaring past fees unenforceable and uncollectible beginning January 1, 2027. AB 2428 is pending a hearing in this Committee.
- 8) **Prior Legislation:**
- a) AB 177 (2021) Chapter 257, Statutes of 2021, repealed the authority to collect many criminal penalty assessments, made the unpaid balance of many court-imposed costs unenforceable and uncollectible and required any portion of a judgment imposing those costs to be vacated, and ended the collection of 17 administrative fees charged to people who come into contact with the criminal justice system.
  - b) SB 144 (Mitchell) of the 2019-2020 Legislative Session, would have eliminated a number of administrative fees imposed on a person related to involvement in the criminal justice system. SB 144 was referred to, but never heard in this Committee.
  - c) SB 867 (Roth), Chapter 147, Statutes of 2016, extended counties’ authority to impose the penalty assessment on criminal fines to fund the EMS Fund, until January 1, 2027.
  - d) SB 191 (Padilla), Chapter 600, Statutes of 2013, extended the EMS Fund by continuing penalty assessments on criminal fines, until January 1, 2017.
  - e) SB 1773 (Alarcón), Chapter 841, Statutes of 2006, established the penalty assessment on criminal fines to create and fund the EMS Fund, until January 1, 2014.

## **REGISTERED SUPPORT / OPPOSITION:**

### **Support**

California Chapter of the American College of Emergency Physicians (Sponsor)  
 American Academy of Pediatrics, California  
 American College of Surgeons: Southern and San Diego Chapters  
 American Medical Response West  
 California Ambulance Association  
 California Children's Hospital Assn

California Hospital Association  
California State Sheriffs' Association  
Children's Specialty Care Coalition  
County Health Executives Association of California (CHEAC)  
County of Yolo  
County of Yuba - Office of Emergency Services  
Dignity Health Marian Regional Medical Center  
Napa County Board of Supervisors  
National Association of EMS Physicians  
Northern California Ems, INC.  
Sharp Healthcare  
Sierra - Sacramento Valley EMS Agency

**Opposition**

Debt Free Justice California

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