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**SENATE COMMITTEE ON LABOR, PUBLIC EMPLOYMENT AND RETIREMENT**  
**Senator Lola Smallwood-Cuevas, Chair**  
**2025 - 2026 Regular**

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**Bill No:** AB 2292 **Hearing Date:** June 10, 2026  
**Author:** Ward  
**Version:** April 16, 2026  
**Urgency:** No **Fiscal:** No  
**Consultant:** Alma Perez-Schwab

**SUBJECT:** Disability benefits: certificates

**KEY ISSUE**

This bill prohibits a physician or practitioner from charging an administrative fee to complete forms required to certify eligibility for paid family or medical leave, but specifies that this does not prohibit a physician or practitioner from billing for medical services provided in connection with an examination or collecting an applicable copayment or deductible, as specified.

**ANALYSIS**

**Existing law:**

- 1) Establishes the State Disability Insurance (SDI) program, funded entirely by employees through a mandatory state payroll tax, to provide short-term wage replacement benefits to eligible workers who are unable to work due to a non-work-related illness or injury for a maximum of 52 weeks. SDI benefits can be used for an illness or injury, either physical or mental, which prevents an employee from performing their regular and customary work and includes elective surgery, pregnancy, childbirth, or other medical conditions.  
(Unemployment Insurance Code §2601-3308)
- 2) Provides that a disabled individual is eligible to receive SDI benefits for each full day during which the individual is unemployed due to a disability only if:
  - a) The individual has made a claim for disability benefits as required by regulations.
  - b) The individual has been unemployed and disabled for a waiting period of seven consecutive days during each disability benefit period, with respect to which waiting period no disability benefits are payable.
  - c) The individual has submitted to reasonable examinations as the director may require for the purpose of determining their disability.
  - d) The individual has filed a certificate of a treating physician or practitioner that establishes the sickness, injury, or pregnancy of the employee or their family member, as specified, establishing medical eligibility for SDI benefits.  
(Unemployment Insurance Code §2627 & §2708)
- 3) Provides, through the Paid Family Leave (PFL) program, a component of SDI, eligible employees up to eight weeks of wage replacement benefits within a 12-month period to workers who need to take time off work to care for a seriously ill child, spouse, parent, grandparent, grandchild, sibling, or domestic partner; to bond with a minor child within one year of the birth or placement of the child in connection with foster care or adoption; or to

participate in a qualifying event because of a family member's military deployment. (Unemployment Insurance Code §3301)

- 4) Pursuant to the SDI or PFL program, provides a weekly benefit amount based on the individual's wages, with a minimum weekly benefit amount of \$50 and a maximum weekly benefit amount of \$1,765. (Unemployment Insurance Code §2655(f) & §3301)
- 5) Provides that, except as specified, an individual is not eligible for SDI benefits for any day of unemployment and disability for which the individual has received or is entitled to receive "other benefits" in the form of cash payments, including temporary disability indemnity under any workers' compensation law, temporary disability benefits under any employer's liability law, and permanent disability benefits for the same injury or illness under any workers' compensation law. (Unemployment Insurance Code §2629)
- 6) Prohibits a health care provider from charging a fee to a patient for filling out forms or providing information responsive to forms that support a claim or appeal regarding eligibility for a public benefit program, as specified. (Health and Safety Code §123114)

**This bill:**

- 1) Prohibits a physician or practitioner from charging a person an administrative fee to complete a form for a certificate to establish medical eligibility for SDI or PFL benefits.
- 2) Prohibits a physician or practitioner from charging an administrative fee for a subsequent recertification examination or for completing a form required to maintain continued eligibility for disability benefits.
- 3) Clarifies that these provisions do not prohibit a physician or practitioner from billing for medical services provided in connection with an examination, or from collecting any applicable copayment, coinsurance, or deductible, if those charges are consistent with charges for a comparable medical examination or service and are not imposed solely for the completion of a certificate or form required to receive SDI or PFL benefits.

**COMMENTS**

**1. Background:**

*State Disability Insurance and the Paid Family Leave Program*

The State Disability Insurance program, administered by the Employment Development Department (EDD), was created in 1946 to provide monetary benefits to workers unable to work due to non-work-related illness, injury, or pregnancy. The SDI program is financed solely by worker contributions and covers approximately 18 million individuals across the state. The payroll deduction and maximum benefit amount are determined annually by EDD. As of January 1, 2026, the employee payroll deduction is set at 1.3% of the employee's wages.

In 2004, California was the first state in the nation to implement a Paid Family Leave program (administered as part of SDI) that provides benefits to workers who need to take

time off to care for a seriously ill family member, or to bond with a new child either from birth, adoption, or foster care placement. Effective January 1, 2021, the PFL scope was expanded to include employees taking time off work to assist a military family member under covered active duty or call to covered active duty. PFL provides up to eight weeks of wage replacement benefits.

In 2022, SB 951 (Durazo, Chapter 878, Statutes of 2022) was adopted to, among other things, for claims commencing on or after January 1, 2025, revise the formula for determining benefits under both the SDI and PFL programs to provide an increased wage replacement rate ranging from 70-90 percent based on the individual's wages.

In Fiscal Year 2024-25, SDI paid out over 725,000 claims, a totaling over \$11 billion in benefits paid. These claims had an average weekly benefit amount of \$879, and an average claim duration of 17.78 weeks.<sup>1</sup> Depending on the claimant's typical wages, SDI can entitle the claimant to anywhere from \$50 to \$1,765 per week.

In Fiscal Year 2024-25, California paid out over 300,000 PFL claims, totaling over \$2 billion in benefits paid. These claims had an average weekly benefit amount of \$996, and an average claim duration of 7.1 weeks. Roughly 15% of PFL claims in FY 2024-25 were for caring for a seriously ill or disabled loved one.<sup>2</sup>

#### Establishing SDI/PFL Eligibility

Applying for SDI or PFL benefits requires the applicant to submit a claim with the EDD, either online or on paper, and file a medical certificate from a treating physician or practitioner that establishes the sickness, injury, or pregnancy of the employee or their family member, demonstrating medical eligibility. This may mean that the individual must undergo reasonable examinations by a physician or practitioner to establish such eligibility and get the required paperwork completed by the physician or practitioner.

According to EDD, existing law does not currently prohibit a physician or practitioner from charging a fee to complete an SDI form. Additionally, a nurse practitioner or physician assistant can certify an claimant for any medical conditions within their scope of practice. However, to certify a disability other than normal pregnancy and childbirth, the nurse practitioner or physician assistant must perform a physical examination and collaborate with a physician or surgeon.

According to information provided by the author, some SDI claimants report fees of up to \$300 for their providers to complete required claim forms, and some providers do not certify claims for extended durations, instead requiring claimants to obtain medical certifications through recurring appointments. As a result, some patients—particularly those already facing financial hardship due to temporary disability—are required to pay out-of-pocket fees simply to access benefits they are otherwise entitled to receive and for which they have already been taxed. These fees can create a financial barrier to accessing or maintaining disability benefits, reduce overall benefits, and exacerbate economic insecurity for vulnerable workers.

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<sup>1</sup> State Disability Insurance Program Statistics, California Employment Development Department, 2026.  
[https://edd.ca.gov/en/about\\_edd/quick\\_statistics/](https://edd.ca.gov/en/about_edd/quick_statistics/)

<sup>2</sup> Paid Family Leave Program Statistics, California Employment Development Department, 2026.  
[https://edd.ca.gov/siteassets/files/about\\_edd/quick-stats/qspfl\\_pfl\\_program\\_statistics.pdf](https://edd.ca.gov/siteassets/files/about_edd/quick-stats/qspfl_pfl_program_statistics.pdf)

*This bill* seeks to prohibit the practice of charging fees for the completion of SDI and PFL eligibility certificates necessary to establish a claim, in order to mitigate the hardship endured by those who cannot work due to disability or caretaking responsibilities.

*Existing Prohibitions on Administrative Fees for Public Benefit Programs*

In 2020, the California Legislature passed AB 2520 (Chiu, Chapter 101, Statutes of 2020), which, among other things, added Section 123114 to the Health & Safety Code prohibiting a health care provider from charging a fee to a patient for filling out forms or providing information responsive to forms that support a claim or appeal regarding eligibility for a *public benefit program*. This code section additionally requires a health care provider to provide information responsive to those portions of the form for which the health care provider has the information necessary to provide a medical opinion. If the health care provider does not have the information necessary to provide a medical opinion, the health care provider may inform the patient if an examination is necessary to obtain the information.

For purposes of this prohibition, Health & Safety Code Section 123114(d) defines a public benefit program to **include** the Medi-Cal program, the In-Home Supportive Services Program (IHSS), the CalWORKs program, Social Security Disability Insurance benefits (SSDI), Supplemental Security Income/State Supplementary Program for the Aged, Blind and Disabled (SSI/SSP) benefits, federal veterans service-connected compensation and nonservice connected pension disability benefits, discharge of a federal student loan based on total and permanent disability, CalFresh, the Cash Assistance Program for Aged, Blind, and Disabled Legal Immigrants (CAPI), and a government-funded housing subsidy or tenant-based housing assistance program.

It is unclear whether this code section could apply to certificates and forms necessary for SDI and PFL claims since those programs are not specifically listed but the use of the term “includes” could suggest that the list is not exhaustive. However, EDD’s website specifically says that current law does not prohibit a physician or practitioner from charging a fee to complete an SDI form.

*This bill* would align the SDI and PFL medical claim certificates provisions with that of public benefit programs where health care providers are prohibited from charging a fee for completing these forms.

## 2. Need for this bill?

According to the author:

“Administrative fees can create a barrier for SDI claimants who file a claim. If an SDI claimant is unable to pay the fee to complete their claim form, this can result in a delay in filing or continuing their claim until the fee is paid. These fees also reduce the total amount of money available to claimants during their leave. There are currently no statutes or regulations requiring or prohibiting providers from charging an administrative fee for SDI claim forms. AB 2292 addresses this deficiency by explicitly prohibiting providers from charging administrative fees for completing initial certification forms, recertifications, or any documentation required to maintain eligibility for disability benefits. This ensures equitable access to benefits and removes unnecessary financial barriers during periods of medical hardship.”

**3. Proponent Arguments:**

None received.

**4. Opponent Arguments:**

The California Orthopaedic Association and the California Podiatric Medical Association are opposed to the measure unless it is amended to cap at between \$25 or \$50, rather than eliminate, the administrative fee physicians, podiatrists, and other health care providers may charge for completing disability certification and recertification forms. They write that this bill:

“fails to recognize that completing disability certification paperwork requires physician and staff time, review of medical records, professional judgment, and administrative resources. These forms are not simply clerical documents. Physicians must ensure that the information submitted is accurate, medically supported, and consistent with the patient’s condition, functional limitations, and expected duration of disability. That work takes time away from patient care and imposes real costs on medical practices.

If physicians are prohibited from charging any administrative fee, practices will be forced either to absorb those costs without compensation or decline to complete the forms altogether. Neither outcome serves patients. Patients seeking disability benefits need timely access to treating physicians who are willing and able to complete the required documentation. Eliminating any ability to recover the administrative cost of that work could make it more difficult for patients to obtain the certifications necessary to access benefits.

A more balanced approach would be to allow a modest administrative fee, as low as a modest \$25. This would protect patients from excessive charges while recognizing the time and resources required to complete disability-related forms. A reasonable fee ceiling provides a fair compromise: it preserves patient access, prevents abuse, and avoids imposing an uncompensated mandate on physician practices.”

**5. Prior/Related Legislation:**

AB 2054 (Gipson, 2026) would expand the definition of “covered active duty” for purposes of eligibility for PFL benefits to include duty during training, domestic deployments, and, for reservists and members of the National Guard, calls to state active duty. *This bill is pending hearing before this Committee.*

AB 2520 (Chiu, Chapter 101, Statutes of 2020) expands the ability of a patient or a patient’s representative to obtain a copy, at no charge, of the relevant portion of the patient’s medical records that are needed to support a claim or appeal regarding eligibility for certain benefit programs, as specified, and prohibiting a health care provider from charging a fee to a patient for filling out forms or providing information responsive to forms that support a claim or appeal for a public benefit program.

SB 1090 (Durazo, Chapter 876, Statutes of 2024) authorized workers to file a claim for SDI or PFL benefits up to 30 days in advance of the first compensable day of disability and requires EDD to issue payment on those claims within 14 days of receipt or as soon as eligibility begins for the claimant, whichever is later. This change becomes operative when

they are incorporated in EDD's integrated claims management system as part of the EDDNext Project.

SB 951 (Durazo, Chapter 878, Statutes of 2022), revised the formula for the computation of SDI and PFL benefits to increase the wage replacement available to claimants.

SB 1058 (Durazo, Chapter 317, Statutes of 2022), required EDD to collect demographic data, including race and ethnicity data and sexual orientation and gender identity data, for individuals who claim disability benefits under the SDI and PFL programs.

**SUPPORT**

None received

**OPPOSITION**

California Orthopaedic Association  
California Podiatric Medical Association

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