CONCURRENCE IN SENATE AMENDMENTS AB 341 (Arambula) As Amended September 3, 2025 Majority vote

SUMMARY

Requires, subject to an appropriation by the Legislature, the Department of State Department of Developmental Services (DDS) to contract with a public or private California dental school or college to administer the Oral Health for People with Disabilities Technical Assistance Center Program to improve dental care services for people with developmental and intellectual disabilities by reducing or eliminating the need for dental treatment using sedation and general anesthesia.

Senate Amendments

Amendments taken in the Senate:

- 1) Requires the DDS will contract with a public or private California dental school or college to administer the Oral Health for People with Disabilities Technical Assistance Center Program, requires DDS to prioritize contracting with a public California dental school or college to administer the program, and requires the contract to expire on June 30, 2032;
- 2) Specifies that, if the contracted California dental school or college elects to partner with another dental school or college, the contracted California dental school or college will prioritize partnering with a public California dental school or college;
- 3) Requires all partner public or private schools be located in California, and be approved by the Dental Board of California or the Commission on Dental Accreditation of the American Dental Association and requires the contracted school, and requires DDS to engage up to 21 regional centers to participate in the program; and,
- 4) Specifies that the annual reporting will begin one year after the contract, as specified, commences and continue until June 30, 2033.

COMMENTS

Background. The Lanterman Developmental Disabilities Act (Lanterman Act) originally became statute in 1969. The Lanterman Act provides entitlement to services and supports for individuals three years of age and older who have a qualifying developmental disability. Qualifying disabilities include autism, epilepsy, cerebral palsy, intellectual disabilities, and other conditions closely related to intellectual disabilities that require similar treatment. To qualify, an individual must have a disability that is substantial that began before they attained 18 years of age and is expected to be lifelong. There are no income-related eligibility criteria. Direct responsibility for implementation of the Lanterman Act's service system is shared by DDS and a statewide network of 21 regional centers, which are private, community-based nonprofit entities, that contract with DDS to carry out many of the state's responsibilities.

As of August 2023, the 21 regional centers served 459,395 consumers, providing services such as: information and referral; assessment and diagnosis; counseling; lifelong individualized

planning and service coordination; purchase of necessary services included in the individual program plan (IPP); resource development; outreach; assistance in finding and using community and other resources; advocacy for the protection of legal, civil, and service rights; early intervention services for at risk infants and their families; genetic counseling; family support; planning, placement, and monitoring for 24-hour out-of-home care; training and educational opportunities for individuals and families; and, community education about developmental disabilities. Regional centers services vary at each location. One location might offer one program and the next might offer what they consider an alternative or offer nothing comparable. Geographically, regional centers' spending also varies.

Dental Care for Individuals with Developmental Disorders. Dental services are coordinated through regional centers just like other services. Most regional centers employ a "dental coordinator." Dental coordinators are responsible for expanding the network of dental providers willing to serve DDS consumers, helping providers with the Medi-Cal Dental Program (Denti-Cal) administration, conducting consumer case reviews, helping individual consumers find providers, training consumers and residential care providers on oral hygiene, and coordinating desensitization.

Regional center consumers receive less dental services than the general population which causes more complex dental problems due to neglect of addressing early problems. Dentists and dental hygienists receive limited training in school and through continuing education courses on how to serve individuals with developmental disabilities. This contributes to the lack of access.

According to a dental association, there are only 14 dental schools and surgery centers in California that can handle special needs patients.

According to the Author

According to the author, "people with disabilities should have access to quality and timely dental care to prevent dental disease. Access to preventative dental care is critical for the prevention of chronic illness. Deferred or avoided oral health treatment is linked not only to tooth decay, but depression, cardiovascular disease, diabetes, respiratory infection, and adverse pregnancy outcomes."

"People with complex medical, physical, cognitive, or behavioral health challenges are the most vulnerable to delayed dental care. These people often require extra time and attention for routine and preventative care. Unfortunately, there are not enough oral health providers with the expertise to serve these patients effectively. This has led many people with disabilities to be placed on waitlists that are months or years long or to simply go without routine dental care. AB 341 establishes the Oral Health for People with Disabilities Technical Assistance Center to provide training and educational materials to expand the use of alternative methods for providing oral health services for people with disabilities that are not currently widely understood"

Arguments in Support

According to the California Dental Association, "in recent years, California has made significant progress on improving access to oral health care, including investments in Medi-Cal Dental to support provision of care to special needs patients and increased access to sedation. Recently awarded grants approved in the 2022 state budget are a historic investment that will help establish more settings able to provide care for patients with special health care needs. Despite these recent investments, access to care for patients with special health care needs continues to be an unnecessary challenge. Many settings, including dental schools, have exceptionally long

wait times, even a year or more, which often require families to travel for hours to clinics just to receive routine care."

"While there needs to be more physical settings with the infrastructure to treat this population, more training and educational material also needs to be available for dental providers to ensure that waiting times can be reduced. Depending on the severity of the disability, daily health care routines can be a challenge to complete and even diagnosing dental conditions may require some level of stabilization or sedation."

Arguments in Opposition

None on file.

FISCAL COMMENTS

According to the Senate Committee on Appropriations:

- 1) State operations costs of \$91,000 (\$73,000 General Fund and \$18,000 federal funds) in 2026-27 and \$176,000 (\$141,000 General Fund and \$35,000 federal funds) in 2027-28 and annually thereafter for staffing resources;
- 2) State operations costs of \$1.7 million (General Fund) on an ongoing basis to contract with a dental school or university beginning in 2027-28. Costs would depend on the scope and duration of the contract;
- 3) Regional center costs of approximately \$139,000 (\$97,000 General Fund and \$42,000 federal funds) per regional center annually, which could total \$1.4 million for 10 participating regional centers; and,
- 4) General Fund costs pressures, potentially millions of dollars annually, due to increased utilization of regional center services.

VOTES:

ASM HIGHER EDUCATION: 10-0-0

YES: Fong, DeMaio, Boerner, Jeff Gonzalez, Jackson, Muratsuchi, Patel, Celeste Rodriguez, Sharp-Collins, Tangipa

ASM HUMAN SERVICES: 7-0-0

YES: Lee, Castillo, Calderon, Elhawary, Jackson, Celeste Rodriguez, Tangipa

ASM APPROPRIATIONS: 14-0-1

YES: Wicks, Arambula, Calderon, Caloza, Dixon, Elhawary, Fong, Mark González, Hart,

Pacheco, Pellerin, Solache, Ta, Tangipa

ABS, ABST OR NV: Sanchez

ASSEMBLY FLOOR: 79-0-0

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, DeMaio, Dixon, Elhawary, Ellis, Flora, Fong, Gabriel, Gallagher, Garcia, Gipson, Jeff Gonzalez, Mark González, Hadwick, Haney, Harabedian, Hart, Hoover, Irwin, Jackson, Kalra, Krell, Lackey, Lee, Lowenthal, Macedo, McKinnor, Muratsuchi, Nguyen, Ortega, Pacheco, Papan, Patel, Patterson, Pellerin, Petrie-Norris, Quirk-Silva, Ramos, Ransom, Celeste Rodriguez, Michelle Rodriguez, Rogers, Blanca Rubio, Sanchez, Schiavo, Schultz, Sharp-Collins, Solache, Soria, Stefani, Ta, Tangipa, Valencia, Wallis, Ward, Wicks, Wilson, Zbur, Rivas

SENATE FLOOR: 39-0-1

YES: Allen, Alvarado-Gil, Archuleta, Arreguín, Ashby, Becker, Blakespear, Cabaldon, Caballero, Cervantes, Choi, Cortese, Dahle, Durazo, Gonzalez, Grayson, Grove, Hurtado, Jones, Laird, Limón, McGuire, McNerney, Menjivar, Niello, Ochoa Bogh, Padilla, Pérez, Reyes, Richardson, Rubio, Seyarto, Smallwood-Cuevas, Strickland, Umberg, Valladares, Wahab, Weber Pierson, Wiener

ABS, ABST OR NV: Stern

UPDATED

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