

Date of Hearing: April 23, 2025

ASSEMBLY COMMITTEE ON APPROPRIATIONS

Buffy Wicks, Chair

AB 551 (Krell) – As Amended April 10, 2025

Policy Committee: Health

Vote: 12 - 1

Urgency: No

State Mandated Local Program: No

Reimbursable: No

SUMMARY:

This bill establishes, upon appropriation by the Legislature or availability of funds from private sources, the Reproductive Health Emergency Preparedness Program (RHEPP) in the Department of Health Care Access and Information (HCAI) to improve access to reproductive and sexual health care in emergency departments (EDs) across California. The bill requires HCAI, in collaboration with California-based organizations, to award grants and administer the RHEPP to administer, train, and provide technical assistance to ED providers.

FISCAL EFFECT:

General Fund cost pressures to HCAI of approximately \$1.54 million in fiscal year (FY) 2026-27 and \$935,000 in FY 2027-28 and ongoing, for the following: an information technology support contract, at least two Office of Information Services staff, and five workforce development staff to develop the grant guide, provide ongoing monitoring and technical assistance to grantees, develop outcome data, and facilitate the program.

The costs to implement this bill would depend partly on the number and size of grants, and how many EDs or ED providers would be granted funding.

COMMENTS:

- 1) **Purpose.** Access Bridge (a program of the Bridge Center at the Public Health Institute), We are Reproductive Freedom for All CA, Training in Early Abortion for Comprehensive Healthcare (TEACH), Unite For Reproductive and Gender Equity (URGE), and VALOR are co-sponsors of this bill. According to the author:

Two years ago, Californians passed Proposition 1, enshrining the right to abortion for all Californians. California has lead the charge to protect reproductive rights and access to health care, and with attacks on reproductive freedom throughout the country, we cannot stop now. As former Chief Counsel to Planned Parenthood, I fought federal efforts to shutdown access to reproductive healthcare last time Donald Trump was President. AB 551 creates the [RHEPP] to best equip emergency departments in handling crucial reproductive healthcare, which may become necessary as patients from out of state seek healthcare in California or Californians face emergency situations due to lack of funding or access in parts of our State.

2) **ED Services and Access to Reproductive Health Care.** According to a 2017 Guttmacher Institute study on abortions in the U.S., an ED is the most accessible source of medical care for many pregnant people, due to a lack of health insurance and shortages of primary care providers, obstetrician-gynecologists (OB-GYNs), and reproductive health clinics. Many patients go to the ED for prenatal care, sexually transmitted infections, or sexual assault. Yet most ED providers are not well-trained in these health issues and depend on OB-GYNs, who are in increasingly short supply in many rural hospitals. Forty percent of California counties do not have an abortion provider; these regions often also have primary care and OB-GYN provider shortages.

3) **Prior Legislation.**

AB 1918 (Petrie-Norris), Chapter 561, Statutes of 2022, establishes the California Reproductive Health Service Corps program within HCAI to reduce the debt burden of current and future health care professionals dedicated to providing reproductive health care in underserved areas of California.

AB 2490 (Petrie-Norris), of the 2023-24 Legislative Session, was substantially similar to this bill. Governor Newsom vetoed AB 2490, stating:

The 2022-23 Budget Act appropriated \$120 million to HCAI to establish five programs designed to expand abortion-related care and reproductive health services across the State, including the Reproductive Health Service Corps. I appreciate the author's continued partnership and efforts to increase and improve access to reproductive care and trained providers. However, this bill is unfunded.

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