
SENATE COMMITTEE ON APPROPRIATIONS

Senator Sabrina Cervantes, Chair
2025 - 2026 Regular Session

SB 1089 (Richardson) - Preventive Treatment Health Care Act

Version: April 23, 2026

Policy Vote: HEALTH 10 - 0, L., P.E. & R.
5 - 0

Urgency: No

Mandate: No

Hearing Date: May 14, 2026

Consultant: Agnes Lee

Bill Summary: SB 1089 would require a health plan that contracts with CalPERS to offer coverage for chronic weight disease management, including nutritional information and at least one GLP-1 anti-obesity medication, as specified; and authorize the California Health and Human Services Agency to enter into partnerships for at least one GLP-1 anti-obesity medication, as specified.

***** **ANALYSIS ADDENDUM – SUSPENSE FILE** *****

The following information is revised to reflect amendments
adopted by the committee on May 14, 2026

Fiscal Impact:

- Unknown significant General Fund costs, at least tens of millions annually until January 1, 2032, due to increases in CalPERS plan premiums.
- Unknown General Fund costs for the Department of Health Care Access and Information (HCAI), likely hundreds of thousands, for staffing resources to enter into partnerships (this assumes the California Health and Human Services Agency would delegate these responsibilities to HCAI). In addition, unknown General Fund costs of several million dollars to effectuate partnerships for development, distribution, or procurement.

Author Amendments: Specify that GLP-1 anti-obesity medication includes a GLP-1 receptor dual agonist, remove provisions related to most favored nation pricing, and revise the requirement that a health plan that contracts with CalPERS offer coverage “for chronic weight disease management” to instead require that a health plan that contracts with CalPERS offer coverage “for chronic weight disease management or to treat obesity or overweight persons.”

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