Date of Hearing: August 20, 2025

## ASSEMBLY COMMITTEE ON APPROPRIATIONS

Buffy Wicks, Chair

SB 520 (Caballero) – As Amended March 24, 2025

Policy Committee: Health Vote: 15 - 0

Higher Education 9 - 0

Urgency: No State Mandated Local Program: No Reimbursable: No

## **SUMMARY**:

This bill establishes the California Nurse-Midwifery Education (CNME) Fund in the Department of Health Care Access and Information (HCAI) for the purpose of establishing master's level nurse-midwifery education programs.

# Specifically, this bill:

- 1) Establishes the CNME Fund within HCAI for the purpose of establishing California-based, master's level nurse-midwifery education programs within the California State University (CSU), the University of California (UC), or both.
- 2) Requires HCAI to administer the CNME Fund and requires the CNME Fund receive General Fund (GF) moneys upon appropriation by the Legislature.
- 3) States the intent of the Legislature to appropriate \$2 million from the GF to HCAI for the 2025-26 state fiscal year, for use in the Fund.
- 4) Authorizes the CNME Fund to receive donations and contributions from public and private entities, partnerships between public and private entities, fees, cash advances, and transfers from the GF.
- 5) Requires HCAI to establish competitive application criteria to ensure optimal site selection for the education programs within the CSU system or UC, including prioritization of programs that serve an area of demonstrated maternity or midwifery workforce need.
- 6) Requires HCAI to ensure a master's degree is an option for students as the culminating degree of the education programs receiving funds. Requires the education programs meet the regulatory requirements for nurse-midwifery education in California and the necessary requirements to be accredited or pre-accredited by the Accreditation Commission for Midwifery Education. Specifies that the programs are not required to be located within a school of nursing.
- 7) Requires the CNME Fund to support the annual operating costs for the development, operation, and maintenance of the education programs through the graduation of the first cohort of matriculated students, or five years, whichever is shorter.
- 8) Requires any public or private funds received for the CNME Fund supplement, not supplant, any current or future funding to midwifery workforce education programs, including

allocations to midwifery education programs administered through the Song-Brown Health Care Workforce Training Act. Requires any funds allocated to the education programs receiving funds supplement, not supplant, the university's budget allocations for any fiscal year.

#### FISCAL EFFECT:

One-time General Fund cost pressures of \$2 million to fund the CNME Fund. The author, along with three other legislators, submitted a request for \$2 million in the 2025-26 state budget to fund this bill. The request was not granted.

### **COMMENTS**:

1) **Purpose.** This bill is sponsored by the California Nurse Midwives Association (CNMA). According to the author:

California continues to face significant challenges related to maternal health. Despite our efforts, maternal mortality rates remain deeply concerning, particularly among Black, Indigenous, and people of color (BIPOC) communities. Many rural and low-income areas of the state suffer from a shortage of healthcare providers capable of delivering essential maternal care. Nurse-midwives play a critical role in improving maternal physical and mental health outcomes, providing compassionate, culturally competent, and evidence-based care during pregnancy, labor, and postpartum.

2) **Background.** *Maternal Health Crisis.* California is facing a maternal health crisis. According to data from the California Department of Public Health, the state's pregnancy-related mortality ratio has been rising in recent years, and the majority of these deaths are preventable. The severe maternal morbidity (SMM) rate in California has also been rising, and disproportionately affects Black, American Indian/Alaska Native, and Pacific Islander individuals. From 2014 to 2024, more than 50 maternity units closed throughout the state. These closures are driven, in part, by the maternity care workforce shortage.

*Nurse-Midwives.* California nurse-midwives attend approximately 13% of births in California, but could provide greater health care access with workforce expansion. According to a 2023 issue brief from the Commonwealth Fund, incorporating midwives fully into the health care system could reduce perinatal health disparities and help address provider workforce shortages.

Recent Nurse Midwife Training Program Closure. UC San Francisco (UCSF) recently closed its nurse-midwifery master's degree program in favor of opening a doctoral degree program. The state now has only one other nurse-midwifery training program, at CSU Fullerton. A 2024 California Health Care Foundation report on the closure notes that UCSF estimates tuition and fees will cost \$152,000 for a three-year doctoral degree in midwifery, compared with \$65,000 for a two-year Master of Science in Nursing. Studies show that 71% of nursing master's students and 74% of nursing doctoral students rely on student loans, and nurses with doctorates earn negligibly or no more than those with master's degrees.