

**SENATE BILL****No. 1067**

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**Introduced by Senator Smallwood-Cuevas**February 12, 2024

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An act to add Section 871 to the Business and Professions Code, relating to healing arts.

## LEGISLATIVE COUNSEL'S DIGEST

SB 1067, as introduced, Smallwood-Cuevas. Healing arts: expedited licensure process: medically underserved area or population.

Existing law establishes various boards within the Department of Consumer Affairs to license and regulate various health professionals. Existing law requires specified boards to expedite the licensure process of an applicant who can demonstrate that they intend to provide abortions within their scope of practice and specifies the documentation an applicant is required to provide to demonstrate their intent.

This bill would require each healing arts board, as defined, to develop a process to expedite the licensure process by giving priority review status to the application of an applicant for a license who demonstrates that they intend to practice in a medically underserved area or serve a medically underserved population, as defined. The bill would authorize an applicant for a license to demonstrate their intent to practice in a medically underserved area or serve a medically underserved population by providing proper documentation, including, but not limited to, a letter from an employer, located in a medically underserved area or which serves a medically underserved population, indicating that the applicant has accepted employment and stating the start date.

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

1 SECTION 1. Section 871 is added to the Business and  
2 Professions Code, to read:

3 871. (a) Each healing arts board shall develop a process to  
4 expedite the licensure process by giving priority review status to  
5 the application of an applicant for a license who demonstrates that  
6 they intend to practice in a medically underserved area or serve a  
7 medically underserved population, as defined in Section 128552  
8 of the Health and Safety Code.

9 (b) An applicant for a license may demonstrate their intent to  
10 practice in a medically underserved area or serve a medically  
11 underserved population by providing proper documentation,  
12 including, but not limited to, a letter from an employer, located in  
13 a medically underserved area or which serves a medically  
14 underserved population, indicating that the applicant has accepted  
15 employment and stating the start date.

16 (c) As used in this section, “healing arts board” means any  
17 board, division, or examining committee in the Department of  
18 Consumer Affairs that licenses or certifies health professionals.

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## SENATE COMMITTEE ON APPROPRIATIONS

Senator Anna Caballero, Chair  
2023 - 2024 Regular Session

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### **SB 1067 (Smallwood-Cuevas) - Healing arts: expedited licensure process: medically underserved area or population**

**Version:** February 12, 2024  
**Urgency:** No  
**Hearing Date:** April 22, 2024

**Policy Vote:** B., P. & E.D. 9 - 0  
**Mandate:** No  
**Consultant:** Janelle Miyashiro

**Bill Summary:** SB 1067 requires the healing arts boards under the Department of Consumer Affairs (DCA) to prioritize the review of applicants who demonstrate that they intend to practice in medically underserved areas or serve a medically underserved population.

#### **Fiscal Impact:**

- One-time cost of \$137,000 in Fiscal Year 2025-26 and ongoing costs of \$129,000 to the Board of Behavioral Sciences (BBS) to address increased workload to identify qualified applications, verify eligibility, and continue communication with applicants through the expedited licensure process (Behavioral Sciences Fund). Workload to update forms is anticipated to be absorbable. BBS notes 19 percent of its registrant population, or approximately 3,116 applicants, may qualify for expedited licensure under this bill.
- Unknown, potentially minor workload impacts to other healing arts boards, as DCA notes that the majority of its boards generally have a process in place for expediting applications (various special funds). Actual fiscal impact to the other healing arts boards will depend on how many applicants for licensure would qualify for expedited application review under each board.
- One-time IT cost of \$55,000 to DCA's Office of Information Services to update systems, which may be absorbable through the redirection of existing maintenance resources.

**Background:** The DCA currently requires that three populations receive priority review for licensure from DCA entities: (1) members of the Armed Forces who have served on active duty and were honorably discharged, (2) spouses or domestic partners of active duty members of the Armed Forces who are currently assigned to a duty station in California under official active duty military orders, and (3) refugees who have been granted asylum by the Secretary of Homeland Security or the Attorney General of the United States or those with a Special Immigrant Visa. In addition, the Medical Board of California (MBC) also grants expedited licensure review to physician and surgeon's certificate applicants who can demonstrate that they intend to practice in a medically underserved area or serve a medically underserved population and MBC, Osteopathic Medical Board of California, Board of Registered Nursing, and Physician Assistant Board expedite the licensure process for an applicant who demonstrates that they intend to provide abortions.

**Proposed Law:**

- Requires each healing arts board to develop a process to expedite the licensure process by giving priority review status to applicants who demonstrate that they intend to practice in medically underserved areas or serve a medically underserved population.
- Authorizes an applicant to demonstrate their intent to practice in a medically underserved area or serve a medically underserved population by providing proper documentation, including but not limited to, a letter from an employer located in a medically underserved area or which serves a medically underserved population.

**Staff Comments:** The boards and bureaus within the DCA are special fund agencies whose activities are funded by regulatory and license fees and generally receive no support from the General Fund. New legislative mandates, even those modest in scope, may in totality create new cost pressures and impact the entity's operating costs, future budget requests, or license fees.

**-- END --**