
**LEGISLATIVE AND REGULATORY AFFAIRS COMMITTEE MEETING
Notice and Agenda**

Friday, April 24, 2026
9:00 a.m. – until Completion of Business

Committee Members

Sheryll Casuga, PsyD, CMPC (Chair)
Marisela Cervantes, EdD, MPA
Shacunda Rodgers, PhD

Board Staff

Jonathan Burke, Executive Officer
Sandra Monterrubio, Assistant Executive Officer
Cynthia Whitney, Central Services Manager
Daniel Phillips, Enforcement Manager
Troy Polk, CPD/Renewals Coordinator
Mai Xiong, Breeze Coordinator

Legal Counsel

Sam Singh, Regulatory

The Committee will meet by teleconference in accordance with Government Code section 11123.5. Committee members will participate remotely from private, nonpublic sites. The public may participate in-person or remotely. To participate in the WebEx Events meeting, please log on to the website below on the day of the meeting.

FOR PARTICIPATION VIA WEBEX

Please see the instructions below to observe and participate in the meeting using Webex.

Members of the public may, but are not obligated, to provide their names or personal information as a condition of observing or participating in the meeting. When signing into the Webex platform, participants may be asked for their name and email address. Participants who choose not to provide their names will be required to provide a unique identifier such as their initials or another alternative, so that the meeting moderator can identify individuals who wish to make public comment; participants who choose not to provide their email address may utilize a fictitious email address in the following sample format: XXXXX@mailinator.com.

For those who wish to participate or observe the meeting, please click the following link:
<https://dca-meetings.webex.com/dca-meetings/j.php?MTID=mc1d5826719a21cca35600e4a92773a82>

If joining using the link above

Webinar number: 2483 488 2650

Webinar password: BOP424

If joining by phone

+1-415-655-0001 US Toll
Access code: 2483 488 2650
Passcode: 267424

The Legislative and Regulatory Affairs Committee will hold the Committee Meeting via WebEx, as noted above, and via teleconference at the following locations:

Primary Physical Location (members/staff/public):

Department of Consumer Affairs
1625 N. Market Blvd., El Dorado Room
Sacramento, CA 95834

Licensees attending the meeting either in-person or through Webex will receive Continuing Professional Development (CPD) credit. For meetings lasting a full day, six (6) hours will be credited to the individuals who attend the full duration of the meeting. In cases of meetings that are three (3) hours or less in duration, attendance will be credited on a one-to-one basis, with one (1) hour of attendance equating to one (1) hour credited towards CPD. Meeting hours and order of agenda items may differ as items may be addressed out of order as deemed necessary, and there is no specific timeframe designated to each agenda item. The total of CPD hours credited for attending the full duration of the meeting will be provided prior to the end of open session or adjournment.

To avoid potential technical difficulties, submit any written comments by April 17, 2026, to bopmail@dca.ca.gov.

IMPORTANT NOTICES TO THE PUBLIC:

Discussion and action may be taken on any item on the agenda. Items may be taken out of order or held over to a subsequent meeting, for convenience, to accommodate speakers, or to maintain a quorum. Meetings of the Board of Psychology are open to the public except when specifically noticed otherwise, in accordance with the Open Meeting Act.

The meeting is accessible to the physically disabled. To request disability-related accommodations, use the contact information below. Please submit your request at least five (5) business days before the meeting to help ensure availability of the accommodation.

You may access this agenda and the meeting materials at www.psychology.ca.gov. The meeting may be canceled without notice. To confirm a specific meeting, please contact the Board.

Contact Person: Jonathan Burke
1625 N. Market Boulevard, Suite N-215
Sacramento, CA 95834
(916) 574-7720
bopmail@dca.ca.gov

For further information about the meeting, please contact the Board Contact listed above.

AGENDA

9:00 a.m. – OPEN SESSION

1. Call to Order/Roll Call/Establishment of a Quorum
2. Chairperson's Welcome and Opening Remarks
 - a) Mindfulness Exercise (S. Rodgers)
3. Public Comment(s) for Items not on the Agenda.
Note: The Committee may not discuss or take action on any matter raised during this public comment section, except to decide whether to place the matter on the agenda of a future meeting [Government Code Sections 11125 and 11125.7(a)]
4. Discussion and Possible Action to Approve the Legislative and Regulatory Affairs Committee Meeting Minutes: June 6, 2025
5. Legislation from the 2026 Legislative Session: Discussion and Possible Action (S. Casuga)
 - a) Two-Year Bills on Watch Status
 1. AB 277 (Alanis) Behavioral health centers, facilities, and programs: background checks
 2. AB 346 (Nguyen) In-home supportive services: licensed healthcare professional certification
 3. AB 667 (Solache) Professions and vocations: license examinations: interpreters
 - b) Bills with an Active Support Board Position – Introduced 2026
 1. SB 903 (Padilla) Mental health professionals: artificial intelligence
 - c) Bills for Committee Discussion and Possible Action to Recommend a Position to the Board– Introduced 2026
 1. AB 2140 (Johnson) Healing arts: reports: claims against licensees
 2. AB 2164 (Bauer-Kahan) Legally protected activities
 3. AB 2575 (Ortega) Health care services: artificial intelligence
 4. SB 1391 (Wahab) Department of Consumer Affairs: retired category licenses
 5. AB 1558 (Arambula) Uniform Emergency Volunteer Health Practitioners Act
 - d) Bills for Committee Discussion and Possible Recommendation to the Board a Watch Status – Introduced 2026
 1. AB 1568 (Alanis) Sex offenses: registration
 2. AB 1775 (Ward) Veterans
 3. AB 2366 (Avila Farias) Administrative Procedure Act: proposed regulations: cost-of-living impact on residents of the state
 4. SB 934 (Wiener) Sexual orientation or gender identity change efforts: actions for recovery of damages; statute of limitations
 5. SB 1146 (Gonzalez) Advertisement claims; health-related consumer products and services: artificial intelligence

6. SB 1159 (Cabaldon) Artificial intelligence: transparency and governance
7. AB 1598 (Quirk-Silva) Behavioral sciences

6. Legislative Items for Future Meeting. The Committee May Discuss Other Items of Legislation in Sufficient Detail to Determine Whether Such Items Should be on a Future Committee or Board Meeting Agenda and/or Whether to Hold a Special Meeting of the Committee or Board to Discuss Such Items Pursuant to Government Code Section 11125.4

7. Status Review of Regulations in Development (S. Casuga)

- a) 16 CCR section 1395.2 – Disciplinary Guidelines and Uniform Standards Related to Substance-Abusing Licensees
- b) 16 CCR section 1396.8 – Standards of Practice for Telehealth Services
- c) 16 CCR sections 1380.6, 1393, 1396, 1396.1, 1396.2, 1396.3, 1396.4, 1396.5, 1397, 1397.1, 1397.2, 1397.35, 1397.37, 1397.39, 1397.50, 1397.51, 1397.52, 1397.53, 1397.54, and 1397.55 - Enforcement Provisions
- d) 16 CCR sections 1381, 1387, 1387.10, 1388, 1388.6, 1389, and 1389.1 – Implementation of AB 282
- e) 16 CCR sections 1390 – 1390.4 of Division 13.1 of Title 16 of the California Code of Regulations – Research Psychoanalyst Regulation
- f) 16 CCR section 1388 – Examinations (TOEFL)
- g) 16 CCR section 1397.5 – Citations and Fines for Probation Violations

8. Update and Discussion on the American Psychological Association (APA) Model Act

9. Recommendations for Agenda Items for Future Committee/Board Meetings.

Note: The Committee May Not Discuss or Take Action on Any Matter Raised During This Public Comment Section, Except to Decide Whether to Place the Matter on the Agenda of a Future Meeting [Government Code Sections 11125 and 11125.7(a)].

10. Adjournment

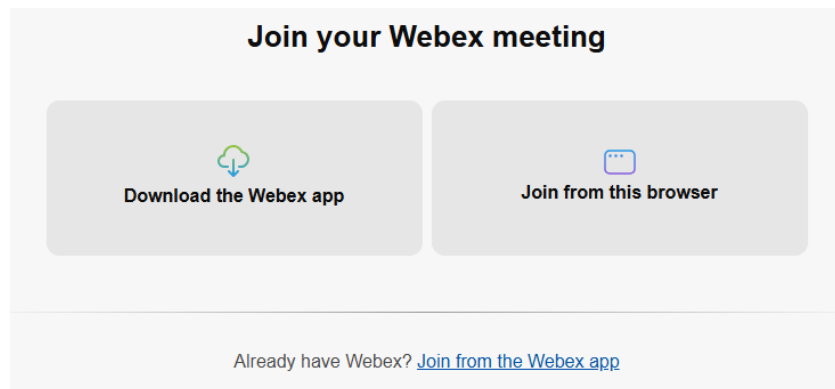
The goal of this committee is to create and maintain a clear and efficient framework for licensure, examination processes, and continuing professional development through the Board's statutes and regulations to ensure licensees meet the qualifications necessary to practice safely and ethically. The Committee communicates relevant information to its affected stakeholders.

Recommended: Join using the meeting link.

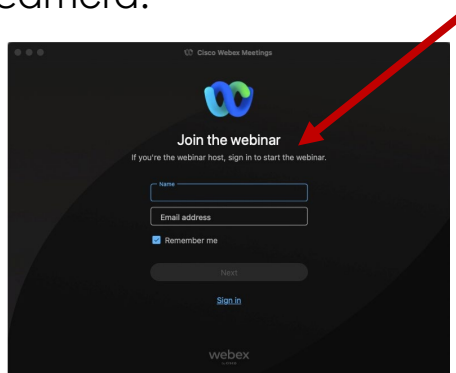
- 1 Click on the meeting link. This can be found in the meeting notice you received and is on the meeting agenda.
- 2 If you already have Webex on your device, click the bottom instruction, "Join from the Webex app."

If you have **not** previously used Webex on your device, your web browser will offer "Download the Webex app." Follow the download link and follow the instructions to install Webex.

DO NOT click "Join from this browser," as you will not be able to fully participate during the meeting.



- 3 Enter your name and email address*. Click "Next."
Accept any request for permission to use your microphone and/or camera.



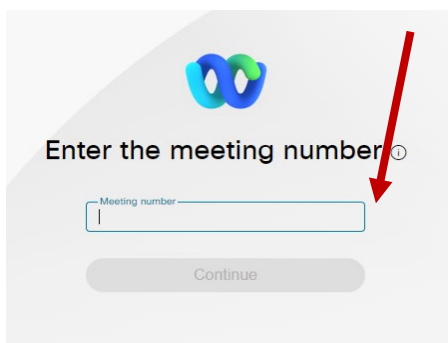
*Members of the public are not obligated to provide their name or personal information and may provide a unique identifier such as their initials or another alternative as well as a fictitious email address like in the following sample format: XXXXX@mailinator.com.

Alternative 1. Join from Webex.com

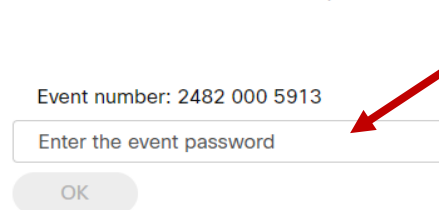
1 Click on “Join a Meeting” at the top of the Webex window.



2 Enter the meeting/event number and click “Continue.” Enter the event password and click “OK.” This can be found in the meeting notice you received or on the meeting agenda.



To view more information about the event, enter the event password.



3 The meeting information will be displayed. Click “Join Event.”

< Back to List

Meeting Name

Jones, Shelly@DCA | 9:45 AM - 9:55 AM | Thursday, Oct 14 2021 |
(UTC-07:00) Pacific Time (US & Canada)



Join Event

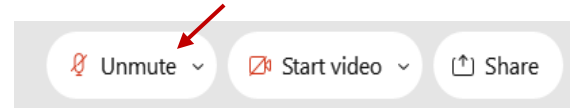
OR

Alternative 2. Connect via Telephone

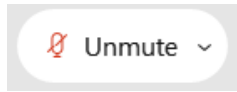


You may also join the meeting by calling in using the phone number, access code, and passcode provided in the meeting notice or on the agenda.

Microphone control (mute/unmute button) is located at the bottom of your Webex window.



Green microphone = Unmuted: People in the meeting can hear you.



Red microphone = Muted: No one in the meeting can hear you.

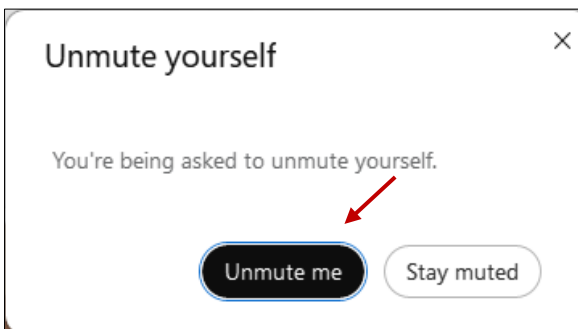
Note: Only panelists can mute/unmute their own microphones. Attendees will remain muted unless the moderator invites them to unmute their microphone.

Attendees/Members of the Public

Joined via Meeting Link

The moderator will call you by name and indicate a request has been sent to unmute your microphone. Upon hearing this prompt:

Click the Unmute me button on the pop-up box that appears.



Joined via Telephone (Call-in User)



1. When you are asked to unmute yourself, press *6.
2. When you are finished speaking, press *6 to mute yourself again.

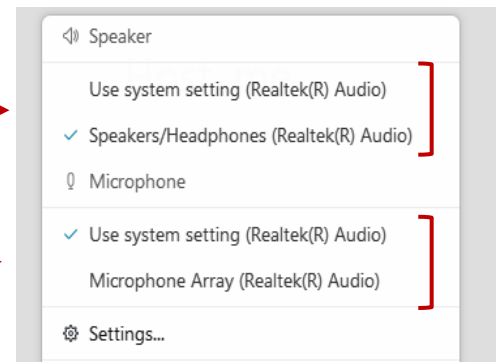
If you cannot hear or be heard

1 Click on the bottom facing arrow located on the Mute/Unmute button at the bottom of the Webex window.



2 From the drop-down menu, select different:

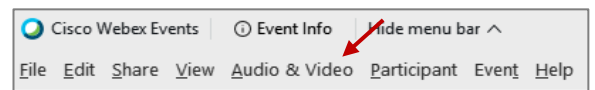
- Speaker options if you can't hear participants.
- Microphone options if participants can't hear you.



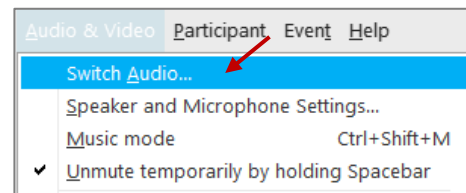
Continue to Experience Issues?

If you are connected by computer or tablet and you have audio issues, you can link your phone to your Webex session. Your phone will then become your microphone and speaker source.

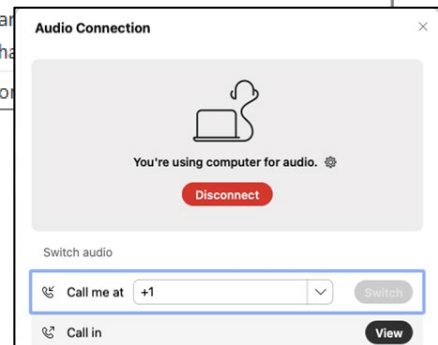
1 Click on "Audio & Video" from the menu bar.



2 Select "Switch Audio" from the drop-down menu.



3 Hover your mouse over the "Call In" option and click "View" to show the phone number to call and the meeting login information. You can still un-mute from your computer window.



Hand Raise Feature

Joined via Meeting Link

- Locate the hand icon at the bottom of the Webex window.
- Click the hand icon to raise your hand.
- Repeat this process to lower your hand.



Joined via Telephone (Call-in User)



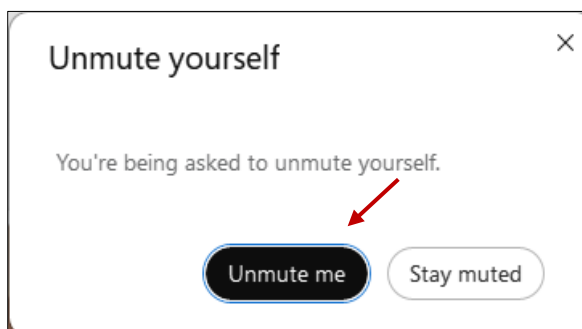
Press *3 to raise or lower your hand.

Unmuting

Joined via Meeting Link

The moderator will call you by name and indicate a request has been sent to unmute your microphone. Upon hearing this prompt:

Click the Unmute me button on the pop-up box that appears.

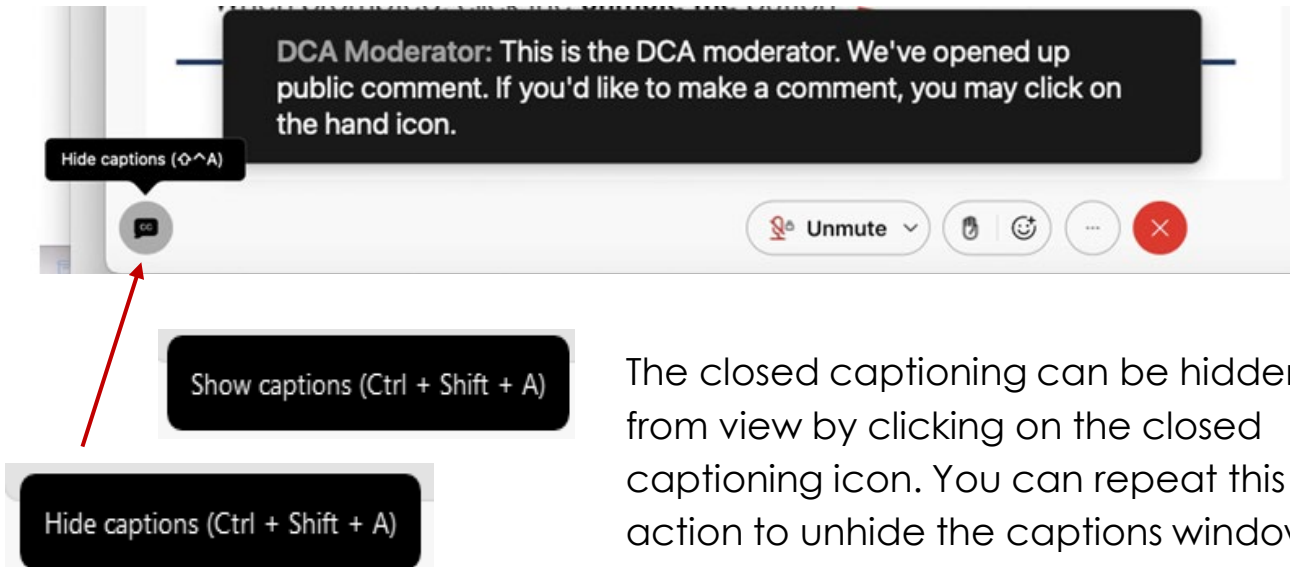


Joined via Telephone (Call-in User/Audio Only)

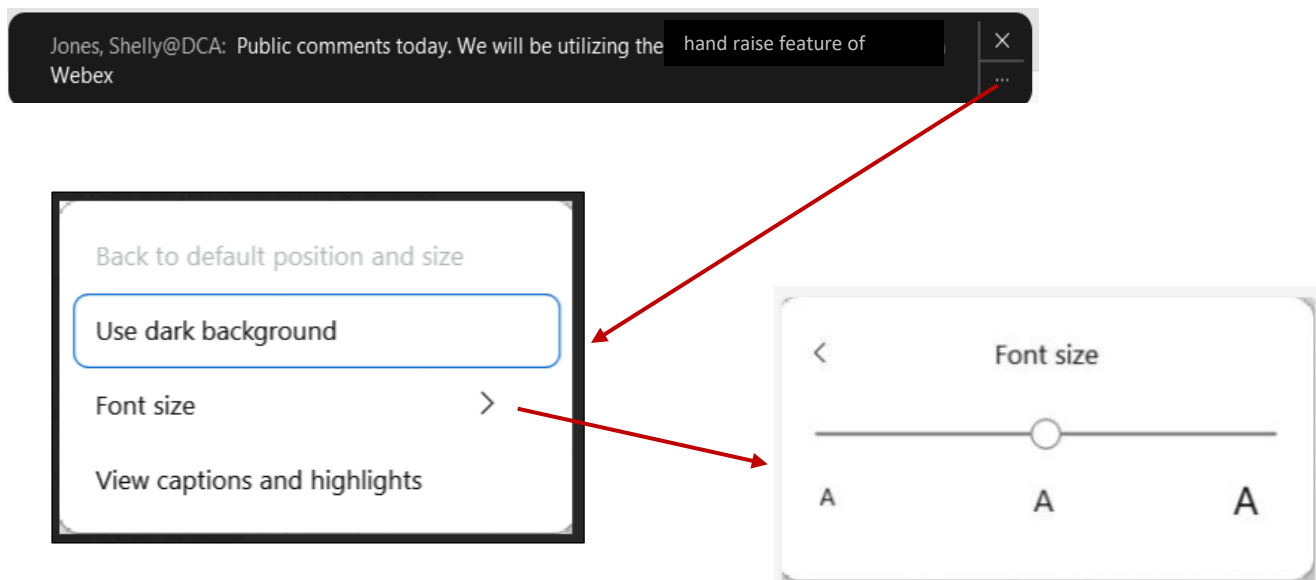


1. When you are asked to unmute yourself, press *6.
2. When you are finished speaking, press *6 to mute yourself again.

Webex provides real-time closed captioning displayed in a dialog box in your Webex window. The captioning box can be moved by clicking on the box and dragging it to another location on your screen.



You can view the closed captioning dialog box with a light or dark background or change the font size by clicking the 3 dots on the right side of the dialog box.



MEMORANDUM

DATE	April 6, 2026
TO	Legislative and Regulatory Affairs Committee Members
FROM	Cynthia Whitney Central Services Manager
SUBJECT	Agenda Item # 4 – Discussion and Possible Approval of the Committee Meeting Minutes: June 6, 2025

Background:

Attached are the draft minutes of the June 6, 2025, Legislative and Regulatory Affairs Committee Meeting.

Action Requested:

Review and approve the minutes of the June 6, 2025, Legislative and Regulatory Affairs Committee Meeting.

1 MINUTES OF LEGISLATIVE & REGULATORY AFFAIRS COMMITTEE MEETING
2 JUNE 6, 2025
3

4 **Primary Location (Staff):**

5 Department of Consumer Affairs
6 1625 N. Market Blvd., El Dorado Room
7 Sacramento, CA 95834
8

9 **Committee Members**

10 Sheryll Casuga, PsyD, CMPC, Chairperson (remote)
11 Marisela Cervantes, EdD, MPA (remote)
12 Shacunda Rodgers, PhD (remote)
13

14 **Committee Members Absent**

15 None
16

17 **Board Staff**

18 Jonathan Burke, Executive Officer
19 Stephanie Cheung, Licensing Manager
20 Sandra Monterrubio, Enforcement Program Manager
21 Cynthia Whitney, Central Services Manager
22 Jacklyn Mancilla, Legislative and Regulatory Affairs Analyst
23 Troy Polk, Continuing Professional Development (CPD) Coordinator
24 Shelley Ganaway, Board Counsel
25 Sam Singh, Regulatory Counsel
26

Friday, June 6, 2025

27
28 **Agenda Item #1: Call to Order/Roll Call/Establishment of a Quorum**
29

30 Dr. Casuga called the meeting to order at 10:00 am. A quorum was present and due
31 notice had been sent to all interested parties.
32

33 **Agenda Item #2: Chairperson's Welcome and Opening Remarks**
34

35 a) Mindfulness Exercise
36

37 Dr. Casuga made opening comments. Dr. Rodgers led a mindfulness exercise.
38

39 **Agenda Item #3: Public Comment for Items Not on the Agenda. Note: The Board**
40 **May Not Discuss or Take Action on Any Matter Raised During this Public**
41 **Comment Section, Except to Decide Whether to Place the Matter on the Agenda**
42 **of a Future Meeting [Government Code sections 11125 and 11125.7(a)].**
43

44 Dr. Casuga called for public comment.

45
46 No public comment was offered.

47
48 **Agenda Item #4: Review and Possible Approval of the Committee Meeting**
49 **Minutes: April 11, 2025**

50
51 Dr. Casuga introduced this item, starting on page nine of the meeting materials.

52
53 It was (M)Rodgers(S)Cervantes(C) to adopt the Committee meeting minutes from April
54 11, 2025.

55
56 Dr. Casuga called for Committee comment.

57
58 No Committee comment was offered.

59
60 Dr. Casuga called for public comment.

61
62 No public comment was offered.

63
64 Votes
65 3 ayes (Casuga, Cervantes, Rodgers), 0 noes; Motion carried.

66
67 **Agenda Item #5: Legislation from the 2025 Legislative Session: Review and**
68 **Possible Action**

69
70 Dr. Casuga introduced Ms. Mancilla to provide the update on this item, starting on page
71 21 of the meeting materials.

72
73 a) Bills with Active Positions Taken by the Board

74
75 This item was informational only, and no action was taken.

- 76
77 1) SB 775 (Ashby) Board of Psychology and Board of Behavioral Sciences
78 2) AB 489 (Bonta) Health care professions: deceptive terms or letters: artificial
79 intelligence.
80 3) SB 470 (Laird) Bagley-Keene Open Meeting Act: teleconferencing.
81 4) SB 641 (Ashby) Department of Consumer Affairs and Department of Real Estate:
82 states of emergency: waivers and exemptions.
83 5) SB 579 (Padilla) Mental health and artificial intelligence working group.

84
85 Dr. Casuga asked whether there had been any responsive feedback to the Board's
86 position letter on SB 579.

87
88 Ms. Mancilla commented that the authors of the bill had not responded.

89

90 Dr. Casuga called for Committee comment.

91

92 Dr. Cervantes asked for the future that this update include the Board's current position
93 on the bills in question. She asked Mr. Burke whether there might be administrative
94 solutions to address issues that are not included in SB 775's amendments.

95

96 Mr. Burke replied that staff could present such solutions at a future Board meeting.

97

98 Dr. Casuga commented that all of these bills have a support position except SB 579,
99 which has a position of support-if-amended.

100

101 Dr. Casuga called for public comment.

102

103 Dr. Lisa Gunderson asked whether the Board was specifically recommending a clinical
104 psychologist to be included the working group as defined in SB 579.

105

106 Dr. Casuga replied that the intention was only to ensure that the working group include
107 someone licensed by the Board.

108

109 No further public comment was offered.

110

111 Dr. Rodgers requested clarification on the positions of SB 775 and SB 579.

112

113 Dr. Casuga confirmed that both bills have a position of support-if-amended.

114

115 b) Watch Bills

116

117 Ms. Mancilla provided the update on this item, starting on page 184 of the meeting
118 materials.

119

120 1) AB 81 (Ta) Veterans: mental health

121 2) AB 257 (Flora) Specialty care networks: telehealth and other virtual services.

122 3) AB 277 (Alanis) Behavioral health centers, facilities, and programs: background
123 checks

124 4) AB 346 (Nguyen) In-home support services: licensed healthcare professional
125 certification.

126 5) SB 518 (Weber Pierson) Descendants of enslaved persons: reparations

127 6) AB 742 (Elhawary) Licensing: applicants who are descendants of slaves.

128 7) AB 479 (Tangipa) Criminal procedure: vacatur relief.

129 8) AB 985 (Ahrens) Anesthesiologist assistants.

130 9) AB 677 (Solache) Professions and vocations: license examinations: interpreters.

131 10) AB 82 (Ward) Health care: legally protected health care activity.

132
133 Dr. Casuga called for Committee comment on AB 82.
134
135 No Committee comments were offered.
136
137 Dr. Casuga called for public comment on AB 82.
138
139 Dr. Kevin Jervik asked for clarification as to what a watch bill was.
140
141 Dr. Casuga explained that a watch bill is one that has been brought to the attention of
142 the Board by staff or stakeholders, but where no Board position has been asserted.
143
144 Tyler Rinde of California Psychological Association (CPA) commented that CPA has
145 taken a support position on AB 82. He requested that the Board likewise take a support
146 position.
147
148 No further public comment was offered.
149
150 Ms. Mancilla provided an update on the remaining watch bills.
151
152 Dr. Casuga commented on the Board's purpose in watching bills, saying that the Board
153 is always watching for anything that might change or affect its licensees e.g. the use of
154 the terms "Doctor" or "Dr."
155
156 Dr. Casuga called for Committee comment on the remaining watch bills.
157
158 It was (M)Cervantes(S)Casuga(C) to recommend that the Board take a support position
159 on AB 82.
160
161 Dr. Casuga called for Committee comment.
162
163 Dr. Cervantes commented that the matter of AB 82 was timely given recent violence
164 toward health care providers.
165
166 Dr. Rodgers agreed with Dr. Cervantes.
167
168 Dr. Casuga acknowledged staff efforts to act quickly to bring this matter up timely to
169 allow for discussion and action. She echoed Dr. Cervantes' sentiments that the Board
170 considers the safety of everybody, both the practitioners and consumers of
171 psychological services.
172
173 Dr. Casuga called for public comment.
174

175 Dr. J. Fishback asked for a synopsis of AB 82.

176

177 Ms. Mancilla explained the intent and status of AB 82.

178

179 Dr. Michelle Olson expressed gratitude to Mr. Rinde of CPA for bringing this discussion
180 up, and commented that this was a very important issue.

181

182 No further public comment was offered.

183

184 Dr. Rodgers described the rules of order that guided how a matter is brought up for a
185 Committee vote and subsequently brought up to the full Board at a later meeting.

186

187 Votes

188 3 ayes (Casuga, Cervantes, Rodgers), 0 noes; Motion carried.

189

190 **Agenda Item #6: Legislative Items for Future Meeting**

191

192 Dr. Casuga called for Committee comment.

193

194 No Committee comment was offered.

195

196 Dr. Casuga called for public comment.

197

198 No public comment was offered.

199

200 Dr. Casuga commented that this item comes up on the agenda to allow legislative items
201 to be brought up for discussion on how they might impact board operations or the
202 practice of psychology.

203

204 **Agenda Item #7: Regulatory Update, Review, and Consideration of Additional**
205 **Changes**

206

207 This item was informational only, and no action was taken.

208

209 Ms. Mancilla provided the update on this item, starting on page 336 of the meeting
210 materials.

211

212 a) 16 CCR section 1395.2 – Disciplinary Guidelines and Uniform Standards Related to
213 Substance-Abusing Licensees

214

215 b) 16 CCR sections 1380.3, 1381, 1381.1, 1381.2, 1381.4, 1381.5, 1382, 1382.3,
216 1382.4, 1382.5, 1386, 1387, 1387.1, 1387.2, 1387.3, 1387.4, 1387.5, 1387.6, 1387.10,
217 1388, 1388.6, 1389, 1389.1, 1391, 1391.1, 1391.3, 1391.4, 1391.5, 1391.6, 1391.8,
218 1391.11, and 1391.12 – Pathways to Licensure

219

220 c) 16 CCR sections 1380.6, 1393, 1396, 1396.1, 1396.2, 1396.3, 1396.4, 1396.5, 1397,
221 1397.1, 1397.2, 1397.35, 1397.37, 1397.39, 1397.50, 1397.51, 1397.52, 1397.53,
222 1397.54, and 1397.55 - Enforcement Provisions

223
224 d) 16 CCR sections 1397.35, 1397.37, 1397.39, and 1937.40 – Corporations

225
226 e) 16 CCR sections 1381, 1387, 1387.10, 1388, 1388.6, 1389, and 1389.1 –
227 Implementation of AB 282

228
229 f) 16 CCR sections 1390 – 1390.14 – Research Psychoanalyst Regulation

230
231 g) 16 CCR section 1396.8 – Standards of Practice for Telehealth Services

232
233 Dr. Casuga called for Committee comment.

234
235 No Committee comment was offered.

236
237 Dr. Casuga called for public comment.

238
239 No public comment was offered.

240
241 **Agenda Item #8: Recommendations for Agenda Items for Future Board Meetings**

242
243 Dr. Casuga called for Committee comment.

244
245 No Committee comment was offered.

246
247 Dr. Casuga called for public comment.

248
249 No public comment was offered.

250
251 Dr. Casuga asked Dr. Rodgers to continue to bring the mindfulness exercise to future
252 Committee meetings.

253
254 **CPD Credit for Meeting Attendance**

255
256 Mr. Polk commented that attendance at the meeting provided 2 hours of CPD credit
257 under Category 1.

258
259 **ADJOURNMENT**

260
261 The meeting adjourned at 11:26 am.

MEMORANDUM

DATE	April 10, 2026
TO	Legislative and Regulatory Affairs Committee Members
FROM	Cynthia Whitney, Central Services Manager
SUBJECT	Agenda Item 5(a)(1-3) Two-Year Bills on Watch Status

Background

For the 2025-2026 legislative cycle, three bills on the Board's Watch list for 2025 became two-year bills after failing to meet the legislative deadlines. Board staff will continue to monitor the following bills and provide any updates during the 2026 legislative cycle.

1. Assembly Bill 277 (Alanis, R) – Behavioral health centers, facilities, and programs: background checks

Would require individuals providing behavioral health treatment at behavioral health centers, facilities, or programs to undergo a criminal background check.

2. Assembly Bill 346 (Nguyen, D) – In-home supportive services: licensed healthcare professional certification

Would revise the definition of "licensed health care professional" for purposes of In-Home Support Services certification and paramedical services, adding that the licensed individual must have primary responsibility for diagnosing or treating the physical or mental impairments contributing to the applicant's functional limitations.

3. Assembly Bill 667 (Solache, D) – Professions and vocations: license examinations: interpreters

Would require Department of Consumer Affairs boards to collect applicants preferred written, spoken, and signed languages by January 1, 2027, assess interpreter needs, and begin reporting language-preference data annually to the Legislature beginning in 2029.

Action Requested

This item is for informational purposes only. There is no action required at this time.

MEMORANDUM

DATE	April 10, 2026
TO	Legislative and Regulatory Affairs Committee Members
FROM	Cynthia Whitney, Central Services Manager
SUBJECT	Agenda Item 5(c)(1) - AB 2140 (Johnson) Healing arts: reports: claims against licensees

Background

Assembly Bill 2140 (AB 2140) was introduced February 18, 2026, by Assembly Member Natasha Johnson.

This bill increases the minimum fine for failure to report certain malpractice-related settlements, judgments, or arbitration awards involving licensed health care professionals who do not carry professional liability insurance. Specifically, it raises the minimum fine from \$50 to \$100 for licensees, claimants, or their counsel who fail to report qualifying claims within the required timeframe to the appropriate licensing board. The bill maintains existing reporting thresholds and requirements but strengthens enforcement by increasing penalties for noncompliance.

This bill is relevant to the Board of Psychology (Board) enforcement and disciplinary functions, as it increases the minimum fine for required reporting of malpractice claims and supports improved compliance with existing reporting obligations.

On March 2, 2026, AB 2140 was referred to the Assembly Committee on Business and Professions.

Action Requested

Board of Psychology (Board) staff recommends the Board take the position of **SUPPORT**.

Attachment #1: Bill Text – [Weblink](#)

Attachment #2: Bill Analysis

ASSEMBLY BILL

No. 2140

Introduced by Assembly Member Johnson

February 18, 2026

An act to amend Section 802 of the Business and Professions Code, relating to healing arts.

LEGISLATIVE COUNSEL'S DIGEST

AB 2140, as introduced, Johnson. Healing arts: reports: claims against licensees.

Existing law makes failure of a licensee of the Medical Board of California, the Podiatric Medical Board of California, the Board of Psychology, the Dental Board of California, the Dental Hygiene Board of California, the Osteopathic Medical Board of California, the State Board of Chiropractic Examiners, the Board of Registered Nursing, the Board of Vocational Nursing and Psychiatric Technicians of the State of California, the State Board of Optometry, the Veterinary Medical Board, the Board of Behavioral Sciences, the Physical Therapy Board of California, the California State Board of Pharmacy, the Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board, the California Board of Occupational Therapy, the Acupuncture Board, or the Physician Assistant Board, a claimant, or their counsel to report a settlement, judgment, or arbitration award over \$3,000 of a claim or action for damages for death or personal injury caused by negligence, error or omission in practice, or by the unauthorized rendering of professional services, by a person who holds a license, certificate, or other similar authority from one of those boards, who does not possess professional liability insurance as to the claim, within 30 days to the agency that issued the license, certificate, or similar

authority, punishable by a fine of not less than \$50 or more than \$500, as specified.

This bill would increase the minimum fine for a violation of that provision to \$100.

Existing law makes failure of a marriage and family therapist, clinical social worker, professional clinical counselor, a claimant, or their counsel to report a settlement, judgment, or arbitration award over \$10,000 of a claim or action for damages for death or personal injury caused by negligence, error or omission in practice, or by the unauthorized rendering of professional services, by a marriage and family therapist, a clinical social worker, or a professional clinical counselor who does not possess professional liability insurance as to that claim, within 30 days to the agency that issued the license, certificate, or similar authority, punishable by a fine of not less than \$50 nor more than \$500, as specified.

This bill would increase the minimum fine for a violation of that provision to \$100.

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 802 of the Business and Professions Code
 2 is amended to read:
 3 802. (a) Every settlement, judgment, or arbitration award over
 4 three thousand dollars (\$3,000) of a claim or action for damages
 5 for death or personal injury caused by negligence, error or omission
 6 in practice, or by the unauthorized rendering of professional
 7 services, by a person who holds a license, certificate, or other
 8 similar authority from an agency specified in subdivision (a) of
 9 Section 800 (except a person licensed pursuant to Chapter 3
 10 (commencing with Section 1200) or Chapter 5 (commencing with
 11 Section 2000) or the Osteopathic Initiative Act) who does not
 12 possess professional liability insurance as to that claim shall, within
 13 30 days after the written settlement agreement has been reduced
 14 to writing and signed by all the parties thereto or 30 days after
 15 service of the judgment or arbitration award on the parties, be
 16 reported to the agency that issued the license, certificate, or similar
 17 authority. A complete report shall be made by appropriate means
 18 by the person or ~~his or her~~ *their* counsel, with a copy of the

1 communication to be sent to the claimant through ~~his or her~~ *their*
2 counsel if the person is so represented, or directly if ~~he or she is~~
3 *they are* not. If, within 45 days of the conclusion of the written
4 settlement agreement or service of the judgment or arbitration
5 award on the parties, counsel for the claimant (or if the claimant
6 is not represented by counsel, the ~~claimant himself or herself~~
7 *claimant*) has not received a copy of the report, ~~he or she shall~~
8 ~~himself or herself~~ *they shall* make the complete report. Failure of
9 the licensee or claimant (or, if represented by counsel, their
10 counsel) to comply with this section is a public offense punishable
11 by a fine of not less than ~~fifty dollars (\$50)~~ *one hundred dollars*
12 *(\$100)* or more than five hundred dollars (\$500). Knowing and
13 intentional failure to comply with this section or conspiracy or
14 collusion not to comply with this section, or to hinder or impede
15 any other person in the compliance, is a public offense punishable
16 by a fine of not less than five thousand dollars (\$5,000) nor more
17 than fifty thousand dollars (\$50,000).

18 (b) Every settlement, judgment, or arbitration award over ten
19 thousand dollars (\$10,000) of a claim or action for damages for
20 death or personal injury caused by negligence, error or omission
21 in practice, or by the unauthorized rendering of professional
22 services, by a marriage and family therapist, a clinical social
23 worker, or a professional clinical counselor licensed pursuant to
24 Chapter 13 (commencing with Section 4980), Chapter 14
25 (commencing with Section 4990), or Chapter 16 (commencing
26 with Section 4999.10), respectively, who does not possess
27 professional liability insurance as to that claim shall within 30
28 days after the written settlement agreement has been reduced to
29 writing and signed by all the parties thereto or 30 days after service
30 of the judgment or arbitration award on the parties be reported to
31 the agency that issued the license, certificate, or similar authority.
32 A complete report shall be made by appropriate means by the
33 person or ~~his or her~~ *their* counsel, with a copy of the
34 communication to be sent to the claimant through ~~his or her~~ *their*
35 counsel if ~~he or she is~~ *they are* so represented, or directly if ~~he or~~
36 ~~she is~~ *they are* not. If, within 45 days of the conclusion of the
37 written settlement agreement or service of the judgment or
38 arbitration award on the parties, counsel for the claimant (or if ~~he~~
39 ~~or she is~~ *they are* not represented by counsel, the ~~claimant himself~~
40 ~~or herself~~ *claimant*) has not received a copy of the report, ~~he or~~

1 ~~she shall himself or herself~~ *they shall* make a complete report.
2 Failure of the marriage and family therapist, clinical social worker,
3 or professional clinical counselor or claimant (or, if represented
4 by counsel, ~~his or her~~ *their* counsel) to comply with this section
5 is a public offense punishable by a fine of not less than ~~fifty dollars~~
6 ~~(\$50)~~ *one hundred dollars (\$100)* nor more than five hundred
7 dollars (\$500). Knowing and intentional failure to comply with
8 this section, or conspiracy or collusion not to comply with this
9 section or to hinder or impede any other person in that compliance,
10 is a public offense punishable by a fine of not less than five
11 thousand dollars (\$5,000) nor more than fifty thousand dollars
12 (\$50,000).

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2026 Bill Analysis

Author: Assembly Member Natasha Johnson	Bill Number: AB 2140	Related Bills:
Sponsor:	Version: Introduced	
Subject: Healing arts: reports: claims against licensees		

SUMMARY

This bill would increase the minimum fine for failing to report certain settlements, judgments, or arbitration awards involving licensed healing arts professionals. Existing law requires licensees without professional liability insurance, claimants, or their counsel to report settlements, judgments, or arbitration awards exceeding specified thresholds to the relevant licensing board within 30 days. This bill would increase the minimum fine for failure to report from \$50 to \$100 while maintaining the existing maximum fine of \$500.

RECOMMENDATION

Staff Recommendation: Board of Psychology (Board) staff recommends the Board take the position of **SUPPORT**.

REASON FOR THE BILL

According to the author, reporting settlements, judgments, and arbitration awards involving licensed health care professionals allows licensing boards to identify potential misconduct or negligence and take appropriate action when necessary. Increasing the minimum fine for failing to report these events may improve compliance with reporting requirements and help ensure boards receive important information needed to protect consumers.

Other Boards/Departments that may be affected:	
<input type="checkbox"/> Change in Fee(s)	<input type="checkbox"/> Affects Licensing Processes
<input checked="" type="checkbox"/> Affects Enforcement Processes	
<input type="checkbox"/> Urgency Clause	<input type="checkbox"/> Regulations Required
<input type="checkbox"/> Legislative Reporting	<input type="checkbox"/> New Appointment Required
Legislative & Regulatory Affairs Committee Position:	Full Board Position:
<input type="checkbox"/> Support <input type="checkbox"/> Support if Amended	<input type="checkbox"/> Support <input type="checkbox"/> Support if Amended
<input type="checkbox"/> Oppose <input type="checkbox"/> Oppose Unless Amended	<input type="checkbox"/> Oppose <input type="checkbox"/> Oppose Unless Amended
<input type="checkbox"/> Neutral <input type="checkbox"/> Watch	<input type="checkbox"/> Neutral <input type="checkbox"/> Watch
Date: _____	Date: _____
Vote: _____	Vote: _____

ANALYSIS

Existing law requires individuals licensed or registered by the Board who do not maintain professional liability insurance to report certain claims to the Board. Specifically, within 30 days, they must report any settlement, judgment, or arbitration award exceeding \$3,000 involving negligence, error, or omission in practice. AB 2140 would increase the minimum fine for failure to report these events from \$50 to \$100 while maintaining the existing maximum fine of \$500. The reporting requirement applies to individuals regulated by the Board, including licensed psychologists and registrants such as research psychoanalysts.

Although the increase in the minimum fine is modest, it strengthens the existing statutory penalty for failing to comply with reporting requirements. The Board issues a small number of citations each year for failure to report qualifying settlements, and timely reporting ensures the Board receives information necessary to evaluate potential risks to the public and determine whether enforcement action is appropriate. Strengthening the penalty provision supports the Board's enforcement authority and its mission to protect consumers through oversight of licensee conduct.

LEGISLATIVE HISTORY

Staff have not identified recent legislation specifically modifying the fine provisions in Business and Professions Code section 802. This bill makes a narrow adjustment to the existing enforcement penalty for failure to report qualifying settlements, judgments, or arbitration awards.

OTHER STATES' INFORMATION

Many states address malpractice settlement and judgment tracking through a combination of federal and state reporting systems. At the federal level, medical malpractice payments and certain licensure actions are reportable to the National Practitioner Data Bank, which serves as a nationwide repository for these events. States also vary in how they require reporting at the state level. For example, Pennsylvania establishes a civil penalty schedule that includes a \$1,000 penalty per offense for failure to report specified events to the state medical board within required timelines. Virginia requires licensees to report certain medical malpractice judgments and settlements under board regulations. Texas uses a reporting framework that includes insurer reporting to the medical board regarding claims and board collection of malpractice-related information for oversight and public profile purposes.

PROGRAM BACKGROUND

The Board of Psychology protects consumers of psychological services by licensing psychologists and associated professionals, regulating the practice of psychology, and supporting the ethical evolution of the profession.

The Board is responsible for reviewing applications, verifying education and experience, determining exam eligibility, as well as issuing licensure, registrations, and renewals.

FISCAL IMPACT

AB 2140 increases the minimum fine for failure to report certain settlements, judgments, or arbitration awards from \$50 to \$100. The bill is not expected to have a significant fiscal impact on the Board. The Board typically fines an average of one to two licensees per year for failing to report a settlement of \$3,000 or more, resulting in only a minimal increase in revenue. Any additional enforcement workload is expected to be minor and absorbable within existing resources.

ECONOMIC IMPACT

Not applicable at this time.

LEGAL IMPACT

Not applicable at this time.

APPOINTMENTS

Not applicable at this time.

SUPPORT/OPPOSITION

Not applicable at this time.

Support:**Opposition:****ARGUMENTS**

Not applicable at this time.

Proponents:**Opponents:**

AMENDMENTS

Not applicable at this time.

MEMORANDUM

DATE	April 10, 2026
TO	Legislative and Regulatory Affairs Committee Members
FROM	Cynthia Whitney, Central Services Manager
SUBJECT	Agenda Item 5(c)(2) - AB 2164 (Bauer-Kahan) Legally protected activities

Background

Assembly Bill 2164 (AB 2164) was introduced by Assembly Member Rebecca Bauer-Kahan.

This bill expands California's protections for individuals engaged in legally protected health care activities, including reproductive and gender-affirming care. It extends existing safeguards to individuals who provided or supported these services while in another jurisdiction, so long as the conduct was lawful in that jurisdiction and would be protected in California. The bill also limits the circumstances under which the Governor may authorize extradition related to such activities and prohibits recognition of certain out-of-state criminal liability tied to legally protected health care services.

This bill is relevant to licensees who may provide or support legally protected health care services across jurisdictions.

On March 9, 2026, AB 2164 was referred to the Assembly Committee on Public Safety.

A hearing was set, however, on March 23, 2026, the hearing was canceled at the request of the author.

Action Requested

Board of Psychology (Board) staff recommends the Board take the position of **SUPPORT** for AB 2164.

Attachment #1: Bill Text – [Weblink](#)

Attachment #2: Bill Analysis

ASSEMBLY BILL

No. 2164

Introduced by Assembly Member Bauer-Kahan

(Principal coauthor: Senator Rubio)

(Coauthors: Assembly Members Addis, Aguiar-Curry, Ávila Farías, Bonta, Calderon, Elhawary, Irwin, McKinnor, Nguyen, Ortega, Papan, Patel, Pellerin, Quirk-Silva, Celeste Rodriguez, Schiavo, Stefani, and Wilson)

(Coauthors: Senators Menjivar, Pérez, and Reyes)

February 18, 2026

An act to add Section 123469.5 to the Health and Safety Code, and to amend Section 1549.1 of, and to add Section 1549.13 to, the Penal Code, relating to legally protected activities.

LEGISLATIVE COUNSEL'S DIGEST

AB 2164, as introduced, Bauer-Kahan. Legally protected activities.

Existing law, the Reproductive Privacy Act, declares as contrary to the public policy of this state a law of another state that authorizes a person to bring a civil action against a person or entity that engages in certain activities relating to obtaining or performing an abortion. Existing law prohibits the state from applying an out-of-state law to a case or controversy in state court or enforcing or satisfying a civil judgment under the out-of-state law.

This bill would specify that the protections applicable to persons who engage in legally protected health care activity, as defined, apply to a person who previously has undertaken one or more acts or omissions while in another United States jurisdiction to aid or encourage, or attempt to aid or encourage, any person in the exercise and enjoyment, or attempted exercise and enjoyment, of rights to reproductive health

care services or gender affirming health care services that would have been protected if undertaken in this state and the acts or omissions were permissible under the laws of the jurisdiction in which the person was located at the time of the acts or omissions.

Existing law prohibits a state or local law enforcement agency or officer from knowingly arresting or knowingly participating in the arrest of any person for performing, supporting, or aiding in the performance of legally protected health care activity, if the health care activity is lawful in this state. Existing law prohibits a state or local public agency from cooperating with or providing information to an individual or agency from another state or a federal law enforcement agency, as specified, regarding a legally protected health care activity that is lawful in this state. Under existing law, the Governor may surrender, on demand of executive authority of any other state, any person in this state charged in the other state, as specified, with committing an act in this state, or in a 3rd state, intentionally resulting in a crime in the state whose executive authority is making the demand.

This bill would authorize the Governor to extradite any person in this state and who is charged in another state only if the acts for which extradition is sought would be punishable by the laws of this state if the consequences claimed to have resulted therefrom in the demanding state had taken effect in this state. The bill would prohibit the Governor from recognizing a request for extradition of a person subject to criminal liability based on the alleged provision or receipt of, assistance in the provision or receipt of, material support for, or in any theory of vicarious, joint, several, or conspiracy liability for any legally protected health care activity, except as specified.

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 123469.5 is added to the Health and
- 2 Safety Code, to read:
- 3 123469.5. (a) The protections applicable to persons who
- 4 engage in legally protected health care activity, as defined in
- 5 Section 1798.300 of the Civil Code, shall also apply to a person
- 6 who has previously undertaken one or more acts or omissions
- 7 while in another United States jurisdiction to aid or encourage, or
- 8 attempt to aid or encourage, any person in the exercise and

1 enjoyment, or attempted exercise and enjoyment, of rights to
2 reproductive health care services or gender affirming health care
3 services that would have been protected by this state if they had
4 been undertaken in this state, if the acts or omissions were
5 permissible under the laws of the jurisdiction in which the person
6 was located at the time of the acts or omissions.

7 (b) “Reproductive health care services” has the same meaning
8 as set forth in Section 1798.300 of the Civil Code.

9 (c) “Gender affirming health care services” and “gender
10 affirming mental health care services” have the same meanings as
11 defined in paragraph (3) of subdivision (b) of Section 16010.2 of
12 the Welfare and Institutions Code.

13 SEC. 2. Section 1549.1 of the Penal Code is amended to read:

14 1549.1. The Governor of this state may also surrender, on
15 demand of the executive authority of any other state, any person
16 in this state charged in the other state in the manner provided in
17 Section 1548.2 with committing an act in this state, or in a third
18 state, intentionally resulting in a crime in the state whose executive
19 authority is making the ~~demand~~ *demand when the acts for which*
20 *extradition is sought would be punishable by the laws of this state*
21 *if the consequences claimed to have resulted therefrom in the*
22 *demanding state had taken effect in this state.* The provisions of
23 this chapter, not otherwise inconsistent, shall apply to those cases,
24 even though the accused was not in the demanding state at the time
25 of the commission of the crime, and has not fled therefrom. Neither
26 the demand, the oath, nor any proceedings under this chapter
27 pursuant to this section need state or show that the accused has
28 fled from justice from, or at the time of the commission of the
29 crime was in, the demanding or other state.

30 SEC. 3. Section 1549.13 is added to the Penal Code, to read:

31 1549.13. Except as required by federal law, no demand for the
32 extradition of a person subject to criminal liability that is in whole
33 or in part based on the alleged provision or receipt of, assistance
34 in the provision or receipt of, material support for, or any theory
35 of vicarious, joint, several, or conspiracy liability for any legally
36 protected health care activity, as defined in Section 1549.15, shall
37 be recognized by the Governor unless the executive authority of
38 the demanding state alleges in writing that the accused was
39 physically present in the demanding state at the time of the

- 1 commission of the alleged crime, and that thereafter such accused
- 2 fled from that state.

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2026 Bill Analysis

Author: Assembly Member Rebecca Bauer-Kahan	Bill Number: AB 2164	Related Bills: AB 82
Sponsor:	Version: Introduced	SB 497
Subject: Legally protected activities		

SUMMARY

This bill would expand California’s protections for individuals involved in legally protected health care activities, including reproductive and gender-affirming health care services. It would extend these protections to individuals who engaged in such activities in other states, provided those actions were lawful in that jurisdiction and would have been lawful in California. The bill would also restrict the Governor’s authority to extradite individuals for conduct related to legally protected health care services and prohibit recognition of certain out-of-state criminal liability related to those activities.

RECOMMENDATION

Staff Recommendation: Board of Psychology (Board) staff recommends the Board take the position of **SUPPORT** for AB 2164.

Other Boards/Departments that may be affected:			
<input type="checkbox"/> Change in Fee(s)	<input type="checkbox"/> Affects Licensing Processes	<input checked="" type="checkbox"/> Affects Enforcement Processes	
<input type="checkbox"/> Urgency Clause	<input type="checkbox"/> Regulations Required	<input type="checkbox"/> Legislative Reporting	<input type="checkbox"/> New Appointment Required
Legislative & Regulatory Affairs Committee Position:		Full Board Position:	
<input type="checkbox"/> Support	<input type="checkbox"/> Support if Amended	<input type="checkbox"/> Support	<input type="checkbox"/> Support if Amended
<input type="checkbox"/> Oppose	<input type="checkbox"/> Oppose Unless Amended	<input type="checkbox"/> Oppose	<input type="checkbox"/> Oppose Unless Amended
<input type="checkbox"/> Neutral	<input type="checkbox"/> Watch	<input type="checkbox"/> Neutral	<input type="checkbox"/> Watch
Date: _____		Date: _____	
Vote: _____		Vote: _____	

REASON FOR THE BILL

According to the author, individuals who provide or support reproductive and gender-affirming health care services are increasingly subject to legal risk from other states with more restrictive laws. The author asserts that California must strengthen its protections to ensure that individuals are not penalized for engaging in lawful health care activities. The bill is intended to prevent the enforcement of out-of-state laws that conflict with California's public policy and to protect access to essential health care services.

ANALYSIS

This bill expands California's legal protections related to health care activities by:

- Extending protection to individuals who engaged in legally protected health care activities in other states, if those actions were lawful in that jurisdiction and would be lawful in California.
- Limiting the Governor's authority to extradite individuals for conduct related to protected health care services unless specific conditions are met.
- Prohibiting recognition of extradition requests tied to legally protected health care activities unless the individual was physically present in the requesting state and fled from that state.

Impact on Licensed Psychologists and Scope of Practice

The bill explicitly includes gender-affirming mental health care services within its scope of protection.

For psychologists, this means:

- Services provided in compliance with California law would be protected from certain out-of-state legal actions.
- Psychologists who support patients across state lines may have increased legal protection when engaging in activities that are lawful in California.

The bill does not expand or restrict scope of practice but reinforces protection for services already permitted under California law.

Impact on Board Authority and Enforcement

The bill does not create new licensing requirements, disciplinary authority, or enforcement obligations for the Board.

However, it may have indirect implications:

- The Board may encounter situations where licensees are involved in interstate care or subject to out-of-state complaints.
- The bill provides a legal framework that may limit the relevance or enforceability of certain out-of-state actions.

Overall, the bill does not significantly alter Board processes or authority.

Access to Care

The bill promotes access to reproductive and gender-affirming care by protecting providers and individuals involved in delivering or supporting these services.

This is particularly significant for:

- LGBTQ+ individuals seeking gender-affirming care
- Individuals in states with restricted access to reproductive health services

By reducing legal risk for providers, the bill may help maintain or expand access to care for vulnerable populations, consistent with California's health equity goals.

Legal and Interstate Considerations

The bill raises important interstate legal considerations by:

- Limiting extradition based on conduct that is lawful in California
- Reinforcing California's refusal to enforce certain out-of-state laws

These provisions may create tension with other states' laws but are consistent with California's existing policy framework protecting reproductive and gender-affirming health care.

Given the evolving legal landscape across states, particularly regarding reproductive and gender-affirming care, legislative action appears necessary to clarify and strengthen California's protections. Existing law provides some protection, but this bill expands those protections to address interstate activity and legal exposure.

LEGISLATIVE HISTORY

This bill builds on prior California legislation such as Assembly Bill 82 and Senate Bill 497, establishing protections for reproductive health care services, including laws prohibiting enforcement of certain out-of-state civil actions related to abortion services.

OTHER STATES' INFORMATION

Several states have enacted laws restricting reproductive and gender-affirming health care, while others, including California, have enacted "shield laws" to protect providers and patients. This bill aligns California with other states that have expanded protections for health care providers operating across state lines.

PROGRAM BACKGROUND

The Board of Psychology protects consumers of psychological services by licensing psychologists and associated professionals, regulating the practice of psychology, and supporting the ethical evolution of the profession.

The Board is responsible for reviewing applications, verifying education and experience, determining exam eligibility, as well as issuing licensure, registrations, and renewals.

FISCAL IMPACT

This bill is not expected to have a fiscal impact on the Board, as it does not create new regulatory, licensing, or enforcement responsibilities. Any indirect impact related to inquiries or complaints involving interstate practice is expected to be minor and absorbable within existing resources.

ECONOMIC IMPACT

The bill may have a positive economic impact by supporting continued provision of reproductive and gender-affirming health care services in California. By reducing legal risks for providers, the bill may help sustain health care access and associated economic activity.

LEGAL IMPACT

The bill strengthens California's legal position in declining to enforce certain out-of-state laws and limits extradition in specified circumstances. It may be subject to legal challenges related to interstate enforcement or constitutional considerations but is consistent with California's existing policy direction.

APPOINTMENTS

Not applicable at this time.

SUPPORT/OPPOSITION

Not applicable at this time.

Support:**Opposition:****ARGUMENTS**

Not applicable at this time.

Proponents:**Opponents:**

AMENDMENTS

Not applicable at this time.

MEMORANDUM

DATE	April 10, 2026
TO	Legislative and Regulatory Affairs Committee Members
FROM	Cynthia Whitney, Central Services Manager
SUBJECT	Agenda Item 5(c)(3) - AB 2575 (Ortega) Health care services: artificial intelligence

Background

Assembly Bill 2575 (AB 2575) was introduced on February 20, 2026, by Assembly Member Liz Ortega.

This bill establishes new requirements governing the use of artificial intelligence (AI) and clinical decision support tools in patient care. It requires health facilities and providers to disclose detailed information about AI tools, including their development, limitations, and potential biases, and affirms that health care workers may override AI-generated output based on their professional judgment. The bill also prohibits employers from limiting clinical judgment or retaliating against workers for overriding or relying on AI tools and clarifies that developers and users of AI cannot avoid liability by attributing harm to a provider's failure to override the technology.

This bill is relevant to the Board of Psychology (Board) because it introduces new standards related to the use of artificial intelligence in clinical decision-making, professional judgment, and potential liability considerations for licensees. The Board may experience impacts on its enforcement workload, including the need to investigate complaints involving AI use and determine compliance with any new statutory or regulatory requirements.

On March 16, 2026, AB 2575 was referred to the Assembly Health Committee, Labor and Employment, and Privacy and Consumer Protection.

On April 8, 2026, AB 2575 passed the Assembly Health Committee and was re-referred to the Assembly Committee on Labor and Employment.

On April 9, 2026, AB 2575 was re-referred to the Assembly Committee on Privacy and Consumer Protection. It is still in Committee and possibly being amended.

Action Requested

Board staff recommends the Board take the position of **SUPPORT** on AB 2575.

Attachment #1: Bill Text – [Webmail](#)

Attachment #2: Bill Analysis

ASSEMBLY BILL

No. 2575

Introduced by Assembly Member Ortega

February 20, 2026

An act to add Section 1714.48 to the Civil Code, to add Section 1339.76 to the Health and Safety Code, and to add Article 2.7 (commencing with Section 2820) to Chapter 2 of Division 3 of the Labor Code, relating to health care services.

LEGISLATIVE COUNSEL'S DIGEST

AB 2575, as introduced, Ortega. Health care services: artificial intelligence.

(1) Existing law provides for the licensure and regulation of health facilities and clinics by the State Department of Public Health. Existing law generally makes a violation of these provisions a crime. Existing law, the Medical Practice Act, establishes the Medical Board of California for the licensing, regulation, and discipline of physicians and surgeons. Existing law requires a health facility, clinic, physician's office, or office of a group practice that uses generative artificial intelligence to generate written or verbal patient communications pertaining to patient clinical information, as defined, to ensure that those communications include both a disclaimer that indicates to the patient that a communication was generated by generative artificial intelligence, as specified, and clear instructions describing how a patient may contact a human health care provider, employee, or other appropriate person.

This bill would require a health facility, clinic, physician's office, or office of a group practice that uses or deploys a covered tool, as defined, for patient care to disclose required information to any licensed health care professional or other person using a covered tool or viewing outputs

from a covered tool. The bill would require, among other things, the disclosure to include a notice that a worker providing direct patient care is permitted to override the output of a covered tool if, in the judgment of the worker acting in their scope of practice, an override is appropriate for the patient, or as necessary to comply with applicable law, including civil rights law. The bill would specify the required time and manner the disclosure is to be provided pursuant to these provisions. By placing new requirements on health facilities and clinics, this bill would expand the scope of a crime and would impose a state-mandated local program.

(2) Existing law charges the Labor Commissioner with enforcement of various labor laws, including investigation of employee complaints.

This bill would declare it is the policy of the state that a worker providing direct patient care be free to use their professional judgment to make assessments and decisions within their scope of practice as appropriate for their patients and that it is public policy of the state that a worker should not be penalized for relying in good faith on technology that the licensed health care professional's employer has selected or approved for their use in patient care. The bill would prohibit an employer from using or deploying technology to replace or eliminate a worker's use of professional judgment in patient care and would prohibit an employer from retaliating or discriminating against a worker providing patient care, as specified. The bill would authorize a worker who is subject to retaliation or discrimination in violation of these provisions to file a complaint with the Labor Commissioner against an employer.

(3) Existing law provides that everyone is responsible not only for the result of their willful acts, but also for an injury occasioned to another by their want of ordinary care or skill in the management of their property or person. Existing law prohibits a defendant who developed, modified, or used artificial intelligence, as defined, from asserting a defense that the artificial intelligence autonomously caused the harm to the plaintiff.

This bill would prohibit a defendant who developed, modified, or used artificial intelligence, as defined, that is alleged to have harmed the plaintiff from asserting a defense that the failure of a licensed health care professional or other health care worker to override an output of the artificial intelligence or clinical decision support system is a superseding cause severing the defendant's liability for the alleged harm.

(4) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes.

State-mandated local program: yes.

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

1 SECTION 1. Section 1714.48 is added to the Civil Code, to
2 read:

3 1714.48. (a) For purposes of this section, the following
4 definitions shall apply:

5 (1) “Artificial intelligence” means an engineered or
6 machine-based system that varies in its level of autonomy and that
7 can, for explicit or implicit objectives, infer from the input it
8 receives how to generate outputs that can influence physical or
9 virtual environments.

10 (2) “Clinical decision support system” means a computerized
11 system or tool that does both of the following:

12 (A) Supports decisionmaking related to patient care based on
13 algorithms, or models, based in clinical practice guidelines or that
14 derive relationships from training data, including algorithms or
15 models that are developed using unsupervised learning models.

16 (B) Produces an output that results in a prediction, classification,
17 recommendation, evaluation, or analysis.

18 (b) In an action against a defendant who developed, modified,
19 selected, or deployed artificial intelligence that is alleged to have
20 caused harm to the plaintiff, it shall not be a defense, and the
21 defendant may not assert, that the failure of a licensed health care
22 professional or other health care worker to override an output of
23 the artificial intelligence or clinical decision support system is a
24 superseding cause severing the defendant’s liability for the alleged
25 harm.

26 (c) This section does not limit or preclude a defendant from
27 presenting either of the following:

28 (1) Any other affirmative defense, including evidence relevant
29 to causation or foreseeability.

1 (2) Other evidence relevant to the comparative fault of any other
2 person or entity.

3 SEC. 2. Section 1339.76 is added to the Health and Safety
4 Code, to read:

5 1339.76. (a) A health facility, clinic, physician's office, or
6 office of a group practice that uses or deploys a covered tool for
7 patient care shall disclose required information, described in
8 subdivision (b), to any licensed health care professional or other
9 person using a covered tool or viewing outputs from a covered
10 tool.

11 (b) Required information under subdivision (a) shall include all
12 of the following:

13 (1) Details on the covered tool, including developer, funding
14 source, any foundation model used, and description of output.

15 (2) Intended use of the covered tool, including intended patient
16 population, intended users, and intended decisionmaking role.

17 (3) Cautioned out-of-scope use of the covered tool, including
18 known risks and limitations.

19 (4) List of the inputs into the covered tool.

20 (5) Description of how the covered tool generates outputs.

21 (6) Development details of the covered tool, including, but not
22 limited to, all of the following:

23 (A) Description of the training set or clinical research underlying
24 recommendations, including demographic representativeness and
25 known biases based on protected characteristics.

26 (B) Description of the relevance of training data to deployed
27 setting.

28 (C) Process used to ensure fairness in development of the
29 intervention.

30 (7) Description of the validation process.

31 (8) Qualitative measures of performance.

32 (9) Description of ongoing maintenance of intervention
33 implementation and use.

34 (10) Description of updates and continued validation or fairness
35 assessment process.

36 (11) Notice that health care entities and developers are liable
37 for harm that results from the use of artificial intelligence in patient
38 care.

39 (12) Notice that a worker providing direct patient care is
40 permitted to override the output of a covered tool if, in the

1 judgment of the worker acting in their scope of practice, such an
2 override is appropriate for the patient, or as necessary to comply
3 with applicable law, including civil rights law.

4 (c) (1) A disclosure made pursuant to this section shall be
5 provided at the time the licensed health care professional or other
6 person uses the covered tool or views any recommendation or
7 output generated by the covered tool.

8 (2) The disclosure shall be provided in plain language to, and
9 linked in the health record of, any patient whose care was affected
10 by the output of the covered tool or whose health information was
11 used as an input to the covered tool.

12 (3) The disclosure shall be provided with ample time for the
13 licensed health care professional or other person to review and
14 make reasoned decisions based on their professional judgment on
15 whether and how to use the covered tool.

16 (d) (1) A violation of this section by a licensed health facility
17 is subject to the enforcement mechanisms described in Article 4
18 (commencing with Section 1290) of Chapter 2.

19 (2) A violation of this section by a licensed clinic is subject to
20 the enforcement mechanisms described in Article 4 (commencing
21 with Section 1235) of Chapter 1.

22 (3) A violation of this section by a physician is subject to the
23 jurisdiction of the Medical Board of California or the Osteopathic
24 Medical Board of California, as appropriate.

25 (4) A violation of this section constitutes “unfair competition”
26 as defined in Section 17200 of the Business and Professions Code
27 and is punishable as prescribed in Chapter 5 (commencing with
28 Section 17200) of Part 2 of Division 7 of the Business and
29 Professions Code.

30 (e) For purposes of this section, the following definitions shall
31 apply:

32 (1) “Artificial intelligence” means an engineered or
33 machine-based system that varies in its level of autonomy and that
34 can, for explicit or implicit objectives, infer from the input it
35 receives how to generate outputs that can influence physical or
36 virtual environments.

37 (2) “Clinic” has the same meaning as defined in Section 1200.

38 (3) “Clinical decision support system” means a computerized
39 system or tool that does both of the following:

1 (A) Supports decisionmaking related to patient care based on
2 algorithms, or models, based in clinical practice guidelines or that
3 derive relationships from training data, including such algorithms
4 or models that are developed using unsupervised learning models.

5 (B) Produces an output that results in a prediction, classification,
6 recommendation, evaluation, or analysis.

7 (4) “Covered tool” means artificial intelligence or a clinical
8 decision support system.

9 (5) “Health facility” has the same meaning as defined in Section
10 1250.

11 (6) “Office of a group practice” has the same meaning as defined
12 in Section 1339.75.

13 (7) “Patient clinical information” has the same meaning as
14 defined in Section 1339.75.

15 (8) “Physician’s office” has the same meaning as defined in
16 Section 1339.75.

17 SEC. 3. Article 2.7 (commencing with Section 2820) is added
18 to Chapter 2 of Division 3 of the Labor Code, to read:

19
20 Article 2.7. Health Information Technology: Worker Rights

21
22 2820. For the purposes of this article, the following definitions
23 shall apply:

24 (a) “Artificial intelligence” means an engineered or
25 machine-based system that varies in its level of autonomy and that
26 can, for explicit or implicit objectives, infer from the input it
27 receives how to generate outputs that can influence physical or
28 virtual environments.

29 (b) “Clinical decision support system” means a computerized
30 system or tool that does both of the following:

31 (A) Supports decisionmaking related to patient care based on
32 algorithms, or models, based in clinical practice guidelines or that
33 derive relationships from training data, including such algorithms
34 or models that are developed using unsupervised learning models.

35 (B) Produces an output that results in a prediction, classification,
36 recommendation, evaluation, or analysis.

37 (c) “Technology” means scientific hardware or software,
38 including artificial intelligence and clinical decision support
39 systems, used to achieve a medical or nursing care objective at a
40 health facility.

1 2821. (a) It is the public policy of the State of California that
2 a worker providing direct patient care be free to use their
3 professional judgment to make assessments and decisions within
4 their scope of practice as appropriate for their patients.

5 (b) It is the public policy of the State of California that a worker
6 providing direct patient care should not be penalized for relying
7 in good faith on technology that the licensed health care
8 professional’s employer has selected or approved for their use in
9 patient care.

10 (c) An employer shall not use or deploy technology to replace
11 or limit a worker’s use of professional judgment in patient care.

12 (d) An employer shall not retaliate or discriminate against a
13 worker providing direct patient care based on both of the following:

14 (1) The worker’s override of, or request to override, the output
15 of technology if, in the judgment of the worker acting in their scope
16 of practice, such an override is appropriate for the patient, or as
17 necessary to comply with applicable law, including civil rights
18 law.

19 (2) The worker’s compliance with the output of technology if
20 the technology was provided or approved by the worker’s employer
21 for patient care.

22 (e) A worker who is subject to retaliation or discrimination in
23 violation of this article has the right under this article to file a
24 complaint with the Labor Commissioner against an employer who
25 retaliates or discriminates against the worker.

26 SEC. 4. No reimbursement is required by this act pursuant to
27 Section 6 of Article XIII B of the California Constitution because
28 the only costs that may be incurred by a local agency or school
29 district will be incurred because this act creates a new crime or
30 infraction, eliminates a crime or infraction, or changes the penalty
31 for a crime or infraction, within the meaning of Section 17556 of
32 the Government Code, or changes the definition of a crime within
33 the meaning of Section 6 of Article XIII B of the California
34 Constitution.

2026 Bill Analysis

Author: Assembly Member Liz Ortega	Bill Number: AB 2575	Related Bills:
Sponsor:	Version: Introduced	
Subject: Health care services: artificial intelligence		

SUMMARY

This bill would establish new requirements governing the use of artificial intelligence (AI) and clinical decision support tools in patient care. It would require health care entities to disclose detailed information about AI tools to health care professionals and ensure that workers may override AI-generated outputs based on their professional judgment. The bill would prohibit employers from limiting a worker’s clinical judgment or retaliating against workers for overriding or relying on AI tools in good faith. Additionally, the bill would expand civil liability by prohibiting AI developers or users from asserting that a provider’s failure to override AI output is a superseding cause of harm.

RECOMMENDATION

Staff Recommendation: Board of Psychology (Board) staff recommends the Board take the position of **SUPPORT** on AB 2575.

Other Boards/Departments that may be affected:			
<input type="checkbox"/> Change in Fee(s)	<input type="checkbox"/> Affects Licensing Processes	<input checked="" type="checkbox"/> Affects Enforcement Processes	
<input type="checkbox"/> Urgency Clause	<input type="checkbox"/> Regulations Required	<input type="checkbox"/> Legislative Reporting	<input type="checkbox"/> New Appointment Required
Legislative & Regulatory Affairs Committee Position:		Full Board Position:	
<input type="checkbox"/> Support	<input type="checkbox"/> Support if Amended	<input type="checkbox"/> Support	<input type="checkbox"/> Support if Amended
<input type="checkbox"/> Oppose	<input type="checkbox"/> Oppose Unless Amended	<input type="checkbox"/> Oppose	<input type="checkbox"/> Oppose Unless Amended
<input type="checkbox"/> Neutral	<input type="checkbox"/> Watch	<input type="checkbox"/> Neutral	<input type="checkbox"/> Watch
Date: _____		Date: _____	
Vote: _____		Vote: _____	

REASON FOR THE BILL

According to the author, the increasing use of artificial intelligence in health care presents risks if technology is used to replace or override professional judgment. The author asserts that health care workers must retain the ability to make independent clinical decisions and should not face retaliation for exercising that judgment. The bill is intended to promote transparency in AI use, ensure accountability for harm caused by AI systems, and protect both patients and health care workers in clinical settings.

ANALYSIS**Overview of Key Provisions**

The bill establishes a comprehensive framework regulating the use of artificial intelligence and clinical decision support systems in health care settings, including:

- Disclosure requirements for AI tools used in patient care
- Protection of clinical judgment and override authority
- Prohibition of employer retaliation
- Expansion of civil liability related to AI use

Impact on Scope of Practice and Clinical Judgment

The bill reinforces that licensed health care professionals retain authority to exercise independent clinical judgment and may override AI-generated recommendations when appropriate. For psychologists, this aligns with existing standards requiring independent assessment, diagnosis, and treatment planning. The bill supports professional autonomy but may also create expectations regarding how psychologists evaluate and document decisions when using AI-supported tools.

Disclosure and Compliance Requirements

The bill requires extensive disclosures about AI tools, including:

- Development, training data, and bias considerations
- Intended use and limitations
- Performance and validation
- Liability notices

These requirements are primarily imposed on health care entities, but licensed professionals may be indirectly impacted, particularly if they are required to interpret or rely on these disclosures in clinical decision-making.

Workforce and Employment Protections

The bill establishes worker protections, including, prohibiting employers from limiting professional judgment, prohibiting retaliation related to AI use decisions, allowing complaints to the Labor Commissioner.

Access to Care

The bill may improve patient safety and equity by requiring transparency regarding AI bias and limitations. However, the bill does not directly address access to care or workforce shortages and may increase compliance burdens on health care entities.

LEGISLATIVE HISTORY

No directly comparable legislation has been identified; however, recent legislative efforts in California have addressed AI transparency and accountability across sectors, including health care and consumer protection.

OTHER STATES' INFORMATION

Not applicable at this time.

PROGRAM BACKGROUND

The Board of Psychology protects consumers of psychological services by licensing psychologists and associated professionals, regulating the practice of psychology, and supporting the ethical evolution of the profession.

The Board is responsible for reviewing applications, verifying education and experience, determining exam eligibility, as well as issuing licensure, registrations, and renewals.

FISCAL IMPACT

This bill is not expected to have a direct fiscal impact on the Board, as enforcement responsibilities are primarily assigned to health facility regulators and physician licensing boards.

ECONOMIC IMPACT

Not applicable at this time.

LEGAL IMPACT

The bill significantly impacts civil liability by limiting defenses related to AI use and may influence malpractice litigation involving health care providers. It also establishes new legal standards regarding the role of professional judgment in AI-assisted care.

APPOINTMENTS

Not applicable at this time.

SUPPORT/OPPOSITION

Not applicable at this time.

Support:**Opposition:****ARGUMENTS**

Not applicable at this time.

Proponents:**Opponents:**

AMENDMENTS

Not applicable at this time.

MEMORANDUM

DATE	April 10, 2026
TO	Legislative and Regulatory Affairs Committee Members
FROM	Cynthia Whitney, Central Services Manager
SUBJECT	Agenda Item 5(c)(4) - SB 1391 (Wahab) Department of Consumer Affairs: retired category licenses

Background

Senate Bill 1391 (SB 1391) was introduced on February 20, 2026, by Senator Aisha Wahab.

This bill requires boards, bureaus, and commissions within the Department of Consumer Affairs that offer a retired category of licensure to disclose that information on their internet websites. While existing law authorizes boards to establish retired license categories by regulation, this bill adds a transparency requirement to ensure that information about such licensure options is publicly accessible.

The Board of Psychology (Board) currently maintains information on its website to ensure compliance with disclosure requirements, including notice of the availability of a retired license category.

On March 4, 2026, SB 1391 was referred to the Senate Committee on Business, Professions, and Economic Development.

A hearing was set for March 23, 2026, where recommendations were made.

On March 23, 2026, SB 1391 was re-referred to the Committee on Appropriations. A hearing was set for April 13, 2026.

Action Requested

Board staff recommends the Board take the position of **SUPPORT** for SB 1391.

Attachment #1: Bill Text – [Webmail](#)

Attachment #2: Bill Analysis

Introduced by Senator Wahab

February 20, 2026

An act to amend Section 464 of the Business and Professions Code, relating to professions and vocations.

LEGISLATIVE COUNSEL'S DIGEST

SB 1391, as introduced, Wahab. Department of Consumer Affairs: retired category licenses.

Existing law provides for the licensure and regulation of various professions and vocations by boards within the Department of Consumer Affairs. Existing law authorizes any of the boards within the department, except as specified, to establish by regulation a system for a retired category of license for persons who are not actively engaged in the practice of their profession or vocation.

This bill would additionally require a board that offers a retired category of licensure to disclose that information on its internet website.

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 464 of the Business and Professions Code
2 is amended to read:

3 464. (a) (1) Any of the ~~boards~~ *boards, bureaus, or*
4 *commissions* within the department may establish, by regulation,
5 a system for a retired category of licensure for persons who are
6 not actively engaged in the practice of their profession or vocation.

7 (2) *A board that offers a retired category of licensure shall*
8 *disclose that information on its internet website.*

1 (b) The regulation shall contain the following:

2 (1) A retired license shall be issued to a person with either an
3 active license or an inactive license that was not placed on inactive
4 status for disciplinary reasons.

5 (2) The holder of a retired license issued pursuant to this section
6 shall not engage in any activity for which a license is required,
7 unless the board, by regulation, specifies the criteria for a retired
8 licensee to practice ~~his or her~~ *their* profession or vocation.

9 (3) The holder of a retired license shall not be required to renew
10 that license.

11 (4) The board shall establish an appropriate application fee for
12 a retired license to cover the reasonable regulatory cost of issuing
13 a retired license.

14 (5) In order for the holder of a retired license issued pursuant
15 to this section to restore ~~his or her~~ *their* license to an active status,
16 the holder of that license shall meet all the following:

17 (A) Pay a fee established by statute or regulation.

18 (B) Certify, in a manner satisfactory to the board, that ~~he or she~~
19 *the holder of the license* has not committed an act or crime
20 constituting grounds for denial of licensure.

21 (C) Comply with the fingerprint submission requirements
22 established by regulation.

23 (D) If the board requires completion of continuing education
24 for renewal of an active license, complete continuing education
25 equivalent to that required for renewal of an active license, unless
26 a different requirement is specified by the board.

27 (E) Complete any other requirements as specified by the board
28 by regulation.

29 (c) A board may upon its own determination, and shall upon
30 receipt of a complaint from any person, investigate the actions of
31 any licensee, including a person with a license that either restricts
32 or prohibits the practice of that person in ~~his or her~~ *their* profession
33 or vocation, including, but not limited to, a license that is retired,
34 inactive, canceled, revoked, or suspended.

35 (d) Subdivisions (a) and (b) shall not apply to a board that has
36 other statutory authority to establish a retired license.

2026 Bill Analysis

Author: Senator Aisha Wahab	Bill Number: SB 1391	Related Bills:
Sponsor:	Version: Introduced	
Subject: Department of Consumer Affairs: retired category licenses		

SUMMARY

This bill would require boards, bureaus, or commissions within the Department of Consumer Affairs (DCA) that offer a retired category of licensure to disclose that information on their internet website. Existing law authorizes boards to establish a retired license category for individuals not actively practicing their profession. This bill adds a transparency requirement to ensure that information about retired licensure options is publicly available.

RECOMMENDATION

Staff Recommendation: Board of Psychology (Board) staff recommends the Board take a position of **SUPPORT**.

REASON FOR THE BILL

According to the author, individuals may be unaware of the availability of a retired license option, which can allow them to maintain a connection to their profession without actively practicing. The bill is intended to improve transparency and ensure that licensees have access to clear information about licensure options.

Other Boards/Departments that may be affected:	
<input type="checkbox"/> Change in Fee(s) <input checked="" type="checkbox"/> Affects Licensing Processes <input type="checkbox"/> Affects Enforcement Processes	
<input type="checkbox"/> Urgency Clause <input type="checkbox"/> Regulations Required <input type="checkbox"/> Legislative Reporting <input type="checkbox"/> New Appointment Required	
Legislative & Regulatory Affairs Committee Position:	Full Board Position:
<input type="checkbox"/> Support <input type="checkbox"/> Support if Amended <input type="checkbox"/> Oppose <input type="checkbox"/> Oppose Unless Amended <input type="checkbox"/> Neutral <input type="checkbox"/> Watch	<input type="checkbox"/> Support <input type="checkbox"/> Support if Amended <input type="checkbox"/> Oppose <input type="checkbox"/> Oppose Unless Amended <input type="checkbox"/> Neutral <input type="checkbox"/> Watch
Date: _____	Date: _____
Vote: _____	Vote: _____

ANALYSIS

This bill requires any DCA board that offers a retired license category to disclose that information on its website. Existing law already allows boards to establish retired licensure categories by regulation, including requirements related to eligibility, fees, and restoration to active status.

Impact on the Board of Psychology

The bill does not change eligibility criteria, application requirements, or conditions for retired licensure. Instead, it requires boards to make existing information more accessible. No regulatory changes appear necessary.

For the Board of Psychology, implementation would likely involve:

- Reviewing current website content
- Ensuring retired license information is clearly displayed and accessible

Improved transparency may:

- Help licensees make informed decisions about transitioning to retired status
- Reduce confusion regarding licensure options
- Support compliance by clarifying that retired licensees are not permitted to practice unless specifically authorized

The Board already maintains information on its website regarding the availability of a retired license category and is in compliance with existing disclosure requirements.

LEGISLATIVE HISTORY

The bill builds upon existing statutory authority allowing boards to establish retired license categories.

OTHER STATES' INFORMATION

Not applicable at this time.

PROGRAM BACKGROUND

The Board of Psychology protects consumers of psychological services by licensing psychologists and associated professionals, regulating the practice of psychology, and supporting the ethical evolution of the profession.

The Board is responsible for reviewing applications, verifying education and experience, determining exam eligibility, as well as issuing licensure, registrations, and renewals.

FISCAL IMPACT

This bill is not expected to have fiscal impact. Any costs associated with updating website content or providing additional information can be absorbed within the Board's existing resources.

ECONOMIC IMPACT

The bill is not expected to have a significant economic impact. It may provide minor benefits by helping licensees make informed decisions about licensure status, potentially reducing administrative inquiries.

LEGAL IMPACT

The bill does not raise significant legal concerns. It adds a disclosure requirement but does not alter substantive licensing or enforcement provisions.

APPOINTMENTS

Not applicable at this time.

SUPPORT/OPPOSITION

Not applicable at this time.

Support:**Opposition:****ARGUMENTS**

Not applicable at this time.

Proponents:**Opponents:**

AMENDMENTS

Not applicable at this time.

MEMORANDUM

DATE	April 10, 2026
TO	Legislative and Regulatory Affairs Committee Members
FROM	Cynthia Whitney, Central Services Manager
SUBJECT	Agenda Item 5(c)(5) - AB 1558 (Arambula) Uniform Emergency Volunteer Health Practitioners Act

Background

Assembly Bill 1558 (AB 1558) was introduced on January 8, 2026, by Assembly Member Joaquin Arambula.

AB 1558 would enact the *Uniform Emergency Volunteer Health Practitioners Act*, authorizing the establishment of additional volunteer registration systems to support emergency response efforts. The bill allows licensed health practitioners from other states who are registered through approved systems to provide health or veterinary services in California during a declared emergency, subject to oversight by the Emergency Medical Services Authority (EMSA). It also establishes standards for scope of practice, credential verification, administrative discipline authority for licensing boards, and workers' compensation coverage for volunteer practitioners responding to emergencies.

This bill is relevant to the Board of Psychology (Board) because it authorizes out-of-state health practitioners to provide services in California during declared emergencies and allows the Board to impose administrative sanctions for conduct occurring during emergency response activities.

AB 1558 was referred to the Assembly Health Committee on March 16, 2026.

Action Requested

Board staff recommends the Board take a position of **SUPPORT IF AMENDED** and request the following amendments for AB 1558:

- Clarify whether EMSA and/or licensees and registrants regulated by a Board are required to apply for Out of State Temporary Practice or notify the Board when practicing out of state as a volunteer during a declared emergency.

The bill may impact the Board's licensing and enforcement oversight of out-of-state practitioners, as well as its disciplinary authority during declared emergency conditions. Clarifying amendments are needed to specify whether volunteers or the Emergency Medical Services Authority (EMSA) will be required to notify the Board of participating licensees or registered volunteers during an emergency.

Attachment #1: Bill Text - [Weblink](#)

Attachment #2: Bill Analysis

ASSEMBLY BILL

No. 1558

Introduced by Assembly Member Arambula

January 8, 2026

An act to add Article 7.7 (commencing with Section 8599.5) to Chapter 7 of Division 1 of Title 2 of the Government Code, relating to volunteer emergency services.

LEGISLATIVE COUNSEL'S DIGEST

AB 1558, as introduced, Arambula. Uniform Emergency Volunteer Health Practitioners Act.

Existing law establishes the Emergency Medical Services Authority (EMSA) in the California Health and Human Services Agency to establish planning and implementation guidelines for emergency medical service systems, as specified. The guidelines are required to address, among other things, disaster response, and the authority is required to provide technical assistance to existing agencies, counties, and cities for the purpose of developing the components of emergency medical services systems. The EMSA is required to adopt rules and regulations, approved by the Commission on Emergency Medical Services, in order to carry out its duties.

Existing law ratifies, approves, and sets forth the provisions of the Emergency Management Assistance Compact, an interstate agreement that provides for mutual assistance between states responding to emergencies and disasters. Under the compact, a person who holds a professional license, certificate, or other permit issued by a state party to the compact is deemed licensed, certified, or permitted by a state requesting assistance to render aid involving that skill to meet a declared emergency or disaster, as specified.

Existing federal law establishes the Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP) program to support states and territories in establishing volunteer registration programs for disasters and public health and medical emergencies. Pursuant to the ESAR-VHP program, the EMSA established the Disaster Healthcare Volunteers program to register volunteers in California. Existing federal law also establishes the Medical Reserve Corps to provide for an adequate supply of volunteers in the case of a federal, state, local, or tribal public health emergency, as specified.

This bill would enact the Uniform Emergency Volunteer Health Practitioners Act, which would authorize the establishment of additional volunteer registration systems by additional entities. In this regard, the bill would require a registration system to be an ESAR-VHP program or a local unit of the Medical Reserve Corps, as specified, to be designated by the EMSA as a registration system, or to be operated by one of specified types of entities, including, among others, a disaster relief organization, as defined. The bill would require that a registration system be capable of supplying the EMSA with sufficient information concerning whether a volunteer is licensed to provide specified health or veterinary services in another state or territory of the United States and in good standing before that volunteer provides those services in this state while an emergency declaration is in effect, as specified. The bill would establish scope-of-practice standards for a registered volunteer health practitioner. The bill would authorize the EMSA to limit, restrict, or otherwise regulate, among other things, the duration of practice, the geographical areas in which volunteer health practitioners may practice, and any other matters necessary to coordinate the provision of health or veterinary services during the emergency. The bill would authorize the applicable licensing board and the host entity, as defined, to restrict or modify the health or veterinary services that a volunteer health practitioner may provide. The bill would require the EMSA and host entities to coordinate their activities with the Office of Emergency Services, as specified.

This bill would exempt a registered volunteer health practitioner from the unauthorized practice provisions for a health or veterinary service unless they have reason to know of an applicable limitation, modification, or restriction or that a similarly licensed practitioner in this state would not be permitted to provide that service. The bill would authorize a health care licensing board to impose administrative sanctions upon a health practitioner licensed in this state for conduct

outside of this state in response to an out-of-state emergency, and to impose administrative sanctions upon a practitioner not licensed in this state for conduct in this state in response to an in-state emergency, if certain conditions are met. The bill would also provide that volunteer health practitioners providing services in California shall be considered agents or employees of the state for the purpose of workers' compensation coverage while performing services in this state or traveling to or from this state for that purpose. The bill would authorize the authority to promulgate rules, after approval by the Commission on Emergency Medical Services, in order to implement the provisions of the Uniform Emergency Volunteer Health Practitioners Act.

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. Article 7.7 (commencing with Section 8599.5)
 2 is added to Chapter 7 of Division 1 of Title 2 of the Government
 3 Code, to read:

4 Article 7.7. Uniform Emergency Volunteer Health Practitioners
 5 Act
 6

7
 8 8599.5. This article may be cited as the Uniform Emergency
 9 Volunteer Health Practitioners Act.

10 8599.51. For the purposes of this article, the following terms
 11 have the following meanings:

12 (a) "Disaster relief organization" means an entity that provides
 13 emergency or disaster relief services that include health or
 14 veterinary services provided by volunteer health practitioners and
 15 that meets either of the following requirements:

16 (1) It is designated or recognized as a provider of those services
 17 pursuant to a disaster response and recovery plan adopted by an
 18 agency of the federal government or the Emergency Medical
 19 Services Authority.

20 (2) It regularly plans and conducts its activities in coordination
 21 with an agency of the federal government or the Emergency
 22 Medical Services Authority.

23 (b) "Emergency" means an event or condition that is a state of
 24 emergency proclaimed pursuant to Section 8588 or 8625, a local

1 emergency proclaimed pursuant to Section 8630, a health
2 emergency proclaimed pursuant to Section 101080 of the Health
3 and Safety Code, or a state of war.

4 (c) “Emergency declaration” means a proclamation of
5 emergency issued pursuant to Section 8588, 8625, or 8630, a
6 declaration of health emergency pursuant to Section 101080 of
7 the Health and Safety Code, or a declaration of war by the United
8 States.

9 (d) “Emergency Management Assistance Compact” means the
10 interstate compact approved by Congress by Public Law No.
11 104-321 and ratified in Article 3.7 (commencing with Section 179)
12 of Chapter 1 of Division 1 of Title 1.

13 (e) “Entity” means a person other than an individual.

14 (f) “Health facility” means an entity licensed under the laws of
15 this or another state to provide health or veterinary services.

16 (g) “Health practitioner” means an individual licensed under
17 the laws of this or another state to provide health or veterinary
18 services.

19 (h) “Health services” means the provision of treatment, care,
20 advice, or guidance, or other services, or supplies, related to the
21 health or death of individuals or human populations, to the extent
22 necessary to respond to an emergency, including all of the
23 following:

24 (1) Services or supplies concerning the physical or mental
25 condition or functional status of an individual or affecting the
26 structure or function of the body, including the following:

27 (A) Preventive, diagnostic, therapeutic, rehabilitative,
28 maintenance, or palliative care.

29 (B) Counseling, assessment, procedures, or other services.

30 (2) The sale or dispensing of a drug, a device, equipment, or
31 another item to an individual in accordance with a prescription.

32 (3) Funeral, cremation, cemetery, or other mortuary services.

33 (i) “Host entity” means an entity operating in this state that uses
34 volunteer health practitioners to respond to an emergency.

35 (j) “License” means authorization by a state to engage in health
36 or veterinary services that are unlawful without the authorization.
37 The term includes authorization under the laws of California to
38 provide health or veterinary services based upon a national
39 certification issued by a public or private entity.

1 (k) “Person” means an individual, corporation, business trust,
2 trust, partnership, limited liability company, association, joint
3 venture, public corporation, government or governmental
4 subdivision, agency, or instrumentality, or any other legal or
5 commercial entity.

6 (l) “Scope of practice” means the extent of the authorization to
7 provide health or veterinary services granted to a health practitioner
8 by a license issued to the practitioner in the state in which the
9 principal part of the practitioner’s services is rendered, including
10 any conditions imposed by the licensing authority in that state.

11 (m) “State” means a state of the United States, the District of
12 Columbia, Puerto Rico, the United States Virgin Islands, or any
13 territory or insular possession subject to the jurisdiction of the
14 United States.

15 (n) “Veterinary services” means the provision of treatment,
16 care, advice or guidance, or other services or supplies, related to
17 the health or death of an animal or to animal populations, to the
18 extent necessary to respond to an emergency, including all of the
19 following:

20 (1) Diagnosis, treatment, or prevention of an animal disease,
21 injury, or other physical or mental condition by the prescription,
22 administration, or dispensing of vaccine, medicine, surgery, or
23 therapy.

24 (2) Use of a procedure for reproductive management.

25 (3) Monitoring and treatment of animal populations for diseases
26 that have spread or demonstrate the potential to spread to humans.

27 (o) “Volunteer health practitioner” means a health practitioner
28 who provides health or veterinary services, whether or not the
29 practitioner receives compensation for those services. “Volunteer
30 health practitioner” does not include a practitioner who receives
31 compensation pursuant to a preexisting employment relationship
32 with a host entity or affiliate that requires the practitioner to provide
33 health services in this state, unless the practitioner is not a resident
34 of this state and is employed by a disaster relief organization
35 providing services in this state while an emergency declaration is
36 in effect.

37 8599.52. This article applies to volunteer health practitioners
38 registered with a registration system that complies with Section
39 8599.54 and who provide health or veterinary services in this state
40 for a host entity while an emergency declaration is in effect.

1 8599.53. (a) While an emergency declaration is in effect, the
2 Emergency Medical Services Authority may limit, restrict, or
3 otherwise regulate all of the following:

- 4 (1) The duration of practice by volunteer health practitioners.
- 5 (2) The geographical areas in which volunteer health
6 practitioners may practice.
- 7 (3) The types of volunteer health practitioners who may practice.
- 8 (4) Any other matters necessary to coordinate effectively the
9 provision of health or veterinary services during the emergency.

10 (b) An order issued pursuant to subdivision (a) may take effect
11 immediately, without prior notice or comment, and is not a
12 regulation within the meaning of the Administrative Procedure
13 Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of
14 Division 3).

15 (c) A host entity that uses volunteer health practitioners to
16 provide health or veterinary services in this state shall do both of
17 the following:

- 18 (1) Coordinate its activities with the Emergency Medical
19 Services Authority to the extent practicable to provide for the
20 efficient and effective use of volunteer health practitioners.
- 21 (2) Comply with any laws other than this article relating to the
22 management of emergency health or veterinary services.

23 (d) The Emergency Medical Services Authority shall coordinate
24 its activities under this section with the Office of Emergency
25 Services to ensure that any deployment of volunteer health
26 practitioners is consistent with the standardized emergency
27 management system, established pursuant to Section 8607.

28 8599.54. (a) To qualify as a volunteer health practitioner
29 registration system, a system shall do all of the following:

- 30 (1) Accept applications for the registration of volunteer health
31 practitioners before or during an emergency.
- 32 (2) Include information about the licensure and good standing
33 of health practitioners that is accessible by authorized persons.
- 34 (3) Be capable of supplying sufficient information about
35 registered volunteer health practitioners to the Emergency Medical
36 Services Authority, or a similar designated agency, in order to
37 allow that authority or agency to confirm the accuracy of
38 information concerning whether a health practitioner is licensed
39 and in good standing before health services or veterinary services
40 are provided under this article.

- 1 (4) Meet at least one of the following conditions:
2 (A) Be an emergency system for advance registration of
3 volunteer health care practitioners established by a state and funded
4 through the Health Resources and Services Administration under
5 Section 319C-2 of the Public Health Service Act (42 U.S.C. Sec.
6 247d-3b).
7 (B) Be a local unit consisting of trained and equipped emergency
8 response, public health, and medical personnel formed pursuant
9 to Section 2813 of the Public Health Service Act (42 U.S.C. Sec.
10 300hh-15).
11 (C) Be operated by one of the following:
12 (i) A disaster relief organization.
13 (ii) A licensing board or bureau established pursuant to Division
14 2 (commencing with Section 500) of, or Chapter 12 (commencing
15 with Section 7600) of Division 3 of, the Business and Professions
16 Code.
17 (iii) A national, state, or regional association of licensing boards
18 or health practitioners.
19 (iv) A health facility that provides comprehensive inpatient and
20 outpatient health care services, including a tertiary care and
21 teaching hospital.
22 (v) A governmental entity.
23 (D) Be designated by the Emergency Medical Services Authority
24 as a registration system for purposes of this article.
25 (b) While an emergency declaration is in effect, the Emergency
26 Medical Services Authority, a person authorized to act on behalf
27 of the authority, or a host entity may confirm whether volunteer
28 health practitioners utilized in this state are registered with a
29 registration system that complies with subdivision (a).
30 Confirmation is limited to obtaining identities of the practitioners
31 from the system and determining whether the system indicates that
32 the practitioners are licensed and in good standing.
33 (c) Upon request of a person in this state authorized to manage
34 the emergency response, or a similarly authorized person in another
35 state, a registration system located in this state shall notify the
36 person of the identities of volunteer health practitioners and
37 whether the practitioners are licensed and in good standing.
38 (d) A host entity is not required to use the services of a volunteer
39 health practitioner even if the practitioner is registered with a

1 registration system that indicates that the practitioner is licensed
2 and in good standing.

3 8599.55. (a) While an emergency declaration is in effect, a
4 volunteer health practitioner, registered with a registration system
5 that complies with Section 8599.54 and licensed and in good
6 standing in the state in which the practitioner’s registration is based,
7 may practice in this state to the extent authorized by this article as
8 if the practitioner were licensed in this state.

9 (b) A volunteer health practitioner qualified under subdivision
10 (a) is not entitled to the protections of this article if the practitioner
11 is licensed in more than one state and any license of the practitioner
12 is suspended, revoked, or subject to an order limiting or restricting
13 practice privileges, or has been voluntarily terminated under threat
14 of sanction.

15 (c) Nothing in this article is intended to modify the licensing
16 requirements imposed on any health practitioner by licensing or
17 regulatory provisions contained in Division 2 (commencing with
18 Section 500) of the Business and Professions Code, or by any other
19 laws or regulations of this state, in the absence of an emergency
20 declaration, as that term is defined in subdivision (c) of Section
21 8599.51.

22 8599.56. (a) For purposes of this section, the following terms
23 have the following meanings:

24 (1) “Credentialing” means obtaining, verifying, and assessing
25 the qualifications of a health practitioner to provide treatment,
26 care, or services in or for a health facility.

27 (2) “Privileging” means the authorizing by an appropriate
28 authority, such as a governing body, of a health practitioner to
29 provide specific treatment, care, or services at a health facility
30 subject to limits based on factors that include license, education,
31 training, experience, competence, health status, and specialized
32 skill.

33 (b) This article does not affect credentialing or privileging
34 standards of a health facility and does not preclude a health facility
35 from waiving or modifying those standards while an emergency
36 declaration is in effect.

37 8599.57. (a) Except as further limited by subdivisions (b) and
38 (c), a volunteer health practitioner shall adhere to the scope of
39 practice for a similarly licensed practitioner established by the
40 licensing provisions, practice acts, or other laws of this state.

1 (b) Except as otherwise provided in subdivision (c), this article
2 does not authorize a volunteer health practitioner to provide
3 services that are outside the practitioner’s scope of practice, even
4 if a similarly licensed practitioner in this state would be permitted
5 to provide the services.

6 (c) The applicable licensing board or bureau may restrict or
7 may, consistent with the limitations set forth in subdivision (a),
8 modify the health services or veterinary services regulated by that
9 body that volunteer health practitioners may provide pursuant to
10 this article. An order under this subdivision may take effect
11 immediately, without prior notice or comment, and is not a
12 regulation within the meaning of the Administrative Procedure
13 Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of
14 Division 3).

15 (d) A host entity may restrict the health or veterinary services
16 that a volunteer health practitioner may provide pursuant to this
17 article.

18 (e) A volunteer health practitioner shall not be found to have
19 engaged in unauthorized practice unless the practitioner has reason
20 to know of any limitation, modification, or restriction under this
21 section or that a similarly licensed practitioner in this state would
22 not be permitted to provide the services. A volunteer health
23 practitioner has reason to know of a limitation, modification, or
24 restriction or that a similarly licensed practitioner in this state
25 would not be permitted to provide a service if either:

26 (1) The practitioner knows the limitation, modification, or
27 restriction exists or that a similarly licensed practitioner in this
28 state would not be permitted to provide the service.

29 (2) From all the facts and circumstances known to the
30 practitioner at the relevant time, a reasonable person would
31 conclude that the limitation, modification, or restriction exists or
32 that a similarly licensed practitioner in this state would not be
33 permitted to provide the service.

34 (f) In addition to the authority granted by the laws of this state,
35 other than this article, to regulate the conduct of health
36 practitioners, a licensing board or other disciplinary authority in
37 this state has the following powers and duties:

38 (1) It may impose administrative sanctions upon a health
39 practitioner licensed in this state for conduct outside of this state
40 in response to an out-of-state emergency.

1 (2) It may impose administrative sanctions upon a practitioner
2 not licensed in this state for conduct in this state in response to an
3 in-state emergency.

4 (3) It shall report any administrative sanctions imposed upon a
5 practitioner licensed in another state to the appropriate licensing
6 board or other disciplinary authority in any other state in which
7 the practitioner is known to be licensed.

8 (g) In determining whether to impose administrative sanctions
9 under subdivision (f), a licensing board or other disciplinary
10 authority shall consider the circumstances in which the conduct
11 took place, including any exigent circumstances, and the
12 practitioner's scope of practice, education, training, experience,
13 and specialized skill.

14 8599.58. This article does not limit rights, privileges, or
15 immunities provided to volunteer health practitioners by laws other
16 than this article.

17 8599.59. A volunteer health practitioner who is providing
18 health or veterinary services in this state pursuant to this article,
19 or who is traveling to or from this state to provide those services,
20 shall be considered an employee of this state for purposes of
21 worker's compensation coverage concerning any injury,
22 occupational illness, or death incurred by the practitioner in
23 providing the services or in traveling to or from this state to provide
24 the services. Worker's compensation benefits for volunteer health
25 practitioners are limited to those benefits provided to state
26 employees under the laws of this state.

27 8599.60. The Emergency Medical Services Authority may
28 promulgate rules, after approval by the Commission on Emergency
29 Medical Services, to implement this article. In doing so, the
30 authority shall consult with and consider the recommendations of
31 the entity established to coordinate the implementation of the
32 Emergency Management Assistance Compact and shall also consult
33 with and consider rules promulgated by similarly empowered
34 agencies in other states to promote uniformity of application of
35 this article and make the emergency response systems in the various
36 states reasonably compatible.

1 8599.61. In applying and construing this article, consideration
2 shall be given to the need to promote uniformity of the law with
3 respect to its subject matter among states that enact it.

O

2026 Bill Analysis

Author: Assembly Member Joaquin Arambula	Bill Number: AB 1558	Related Bills:
Sponsor:	Version: Introduced	
Subject: Uniform Emergency Volunteer Health Practitioners Act		

SUMMARY

Assembly Bill 1558 (AB 1558) would establish the Uniform Emergency Volunteer Health Practitioners Act (UEVHPA), which authorizes the creation of additional volunteer health practitioner registration systems beyond those currently administered through the Emergency Medical Services Authority (EMSA). The bill allows licensed health practitioners from other states to provide health or veterinary services in California during a declared emergency, if they are registered and in good standing. It authorizes EMSA, licensing boards, and host entities to regulate, limit, or modify the services provided by these volunteers. The bill also permits licensing boards to discipline practitioners for conduct during emergency response and provides workers' compensation coverage for volunteer practitioners.

RECOMMENDATION

Staff Recommendation: Board of Psychology (Board) staff recommends the Board take a position of **SUPPORT IF AMENDED** and request the following amendments for AB 1558:

Summary of Suggested Amendments

- Clarify whether EMSA and/or licensees and registrants regulated by a Board, are required to apply for Out of State Temporary Practice or notify the Board when practicing out of state as a volunteer during a declared emergency.

The bill may impact the Board's licensing and enforcement oversight of out-of-state practitioners, as well as its disciplinary authority during declared emergency conditions. Clarifying amendments are needed to specify whether volunteers or the Emergency Medical Services Authority (EMSA) will be required to notify the Board of participating licensees or registered volunteers during an emergency.

Other Boards/Departments that may be affected:			
<input type="checkbox"/> Change in Fee(s)	<input checked="" type="checkbox"/> Affects Licensing Processes	<input checked="" type="checkbox"/> Affects Enforcement Processes	
<input type="checkbox"/> Urgency Clause	<input type="checkbox"/> Regulations Required	<input type="checkbox"/> Legislative Reporting	<input type="checkbox"/> New Appointment Required
Legislative & Regulatory Affairs Committee Position: <input type="checkbox"/> Support <input type="checkbox"/> Support if Amended <input type="checkbox"/> Oppose <input type="checkbox"/> Oppose Unless Amended <input type="checkbox"/> Neutral <input type="checkbox"/> Watch Date: _____ Vote: _____		Full Board Position: <input type="checkbox"/> Support <input type="checkbox"/> Support if Amended <input type="checkbox"/> Oppose <input type="checkbox"/> Oppose Unless Amended <input type="checkbox"/> Neutral <input type="checkbox"/> Watch Date: _____ Vote: _____	

REASON FOR THE BILL

According to the author, California’s current emergency response system limits the ability to quickly mobilize qualified out-of-state health professionals during disasters. While programs such as ESAR-VHP and the Medical Reserve Corps exist, they may not provide sufficient flexibility or capacity to meet large-scale emergency needs. The author contends that establishing additional registration pathways and adopting a uniform process will improve coordination, increase the available workforce, and ensure that qualified practitioners can provide timely care during emergencies.

ANALYSIS

This bill creates a new statute allowing out-of-state licensed health practitioners to provide services in California during declared emergencies if they are registered through an approved system.

Key provisions include:

- Allowance for out-of-state practitioners to practice in California during emergencies if licensed and in good standing.
- Authority for EMSA, licensing boards, and host entities to regulate or restrict services.
- Expansion of disciplinary authority over both in-state and out-of-state practitioners.
- Provision of workers’ compensation coverage for volunteers.

Impact on Licensing and Scope of Practice

- Under existing law, individuals must hold a California license to practice psychology in this state. Pursuant to section 2912 of the Business and Professions Code (Code), psychologists licensed in California who temporarily practice outside of California while treating California clients, as well as psychologists licensed in another jurisdiction who provide services to clients

located in California, must apply to the Board for authorization to engage in out-of-state practice for a maximum of 30 consecutive days per calendar year. This bill would create a limited exception during a declared emergency by allowing out-of-state practitioners to provide psychological services in California, provided they are registered with the Board and in good standing.

- While the bill maintains that practitioners must adhere to California scope-of-practice standards, it allows licensing boards to modify or restrict services through emergency orders. This could provide flexibility during emergencies but may also create challenges in ensuring consistent enforcement and clarity for practitioners regarding allowable activities.

Impact on Board Authority and Enforcement

The bill expands the Board's authority to discipline:

- California-licensed practitioners for conduct during out-of-state emergency response.
- Out-of-state practitioners for conduct occurring in California during emergencies.

This expanded authority supports consumer protection but may increase investigative workload and require coordination with other states' licensing agencies. Additionally, the Board must consider emergency conditions when evaluating conduct, which may introduce complexity in enforcement decisions.

Access to Care

The bill may improve access to mental health services during emergencies by expanding the pool of available practitioners, including those from out of state. This could benefit underserved or disaster-impacted communities that experience disruptions in care.

Implementation Concerns

Several provisions need clarification:

- The extent of Board responsibility for verifying licensure and monitoring volunteers during declared emergencies.
- Whether the Board will receive notification from the Emergency Medical Services Authority (EMSA), or directly from licensees, identifying which out-of-state licensees are providing volunteer services in California, and which California licensees are volunteering to provide services in other states.

Without clarification, the bill could create inconsistent implementation across boards and uncertainty regarding roles and expectations.

LEGISLATIVE HISTORY

The bill is based on the UEVHPA, which has been adopted in several other states to standardize emergency volunteer licensing practices. Similar efforts have been considered nationally to improve interstate coordination of health professionals during emergencies.

OTHER STATES' INFORMATION

Multiple states have adopted versions of the UEVHPA to facilitate cross-state practice during declared emergencies. These states include, but are not limited to, Colorado, Illinois, Indiana, Kentucky, Nevada, New Mexico, North Dakota, Tennessee, Texas, Utah, and Wisconsin. These jurisdictions allow out-of-state licensed practitioners to provide services under defined conditions, often requiring registration through a state emergency system and coordination between licensing authorities and emergency management agencies. California's adoption of a similar system would align it with these national practices and promote greater interstate consistency in emergency response.

PROGRAM BACKGROUND

The Board of Psychology protects consumers of psychological services by licensing psychologists and associated professionals, regulating the practice of psychology, and supporting the ethical evolution of the profession.

The Board is responsible for reviewing applications, verifying education and experience, determining exam eligibility, as well as issuing licensure, registrations, and renewals.

FISCAL IMPACT

This bill could result in moderate fiscal impact if the Board is designated by EMSA as a volunteer health practitioner registration system. In that case, the Board may incur one-time information technology costs to develop or modify systems to process volunteer registrations and maintain related data, as well as ongoing staff workload to review registrations, maintain records, and respond to verification requests during declared emergencies.

The bill also authorizes licensing boards to issue orders by restricting or modifying the services volunteers may provide during an emergency, which could create additional workload related to drafting, issuing, and communicating such orders. If the Board is not designated as a registration system and no notification or approval process is required, the fiscal impact to the Board would likely be minimal.

ECONOMIC IMPACT

The bill may have a positive economic impact by improving emergency response capacity and reducing disruptions to health care services during disasters. This may help stabilize local economies affected by emergencies.

LEGAL IMPACT

The bill expands disciplinary authority across state lines and provides liability protections through workers' compensation coverage. These provisions appear consistent with existing emergency management systems but may require legal review to ensure alignment with due process and interstate licensure principles.

APPOINTMENTS

Not applicable at this time.

SUPPORT/OPPOSITION

Not applicable at this time.

Support:

Opposition:

ARGUMENTS

Not applicable at this time.

Proponents:

Opponents:

AMENDMENTS

SECTION 1.

Article 7.7 (commencing with Section 8599.5) is added to Chapter 7 of Division 1 of Title 2 of the Government Code, to read:

Article 7.7. Uniform Emergency Volunteer Health Practitioners Act 8599.54.

(a) To qualify as a volunteer health practitioner registration system, a system shall do all of the following:

- (1) Accept applications for the registration of volunteer health practitioners before or during an emergency.
- (2) Include information about the licensure and good standing of health practitioners that is accessible by authorized persons.
- (3) Be capable of supplying sufficient information about registered volunteer health practitioners to the Emergency Medical Services Authority, or a similar designated agency, in order to allow that authority or agency to confirm the accuracy of information concerning whether a health practitioner is licensed and in good standing before health services or veterinary services are provided under this article.
- (4) Meet at least one of the following conditions:
 - (A) Be an emergency system for advance registration of volunteer health care practitioners established by a state and funded through the Health Resources and Services Administration under Section 319C-2 of the Public Health Service Act (42 U.S.C. Sec. 247d-3b).
 - (B) Be a local unit consisting of trained and equipped emergency response, public health, and medical personnel formed pursuant to Section 2813 of the Public Health Service Act (42 U.S.C. Sec. 300hh-15).
 - (C) Be operated by one of the following:
 - (i) A disaster relief organization.
 - (ii) A licensing board or bureau established pursuant to Division 2 (commencing with Section 500) of, or Chapter 12 (commencing with Section 7600) of Division 3 of, the Business and Professions Code.
 - (iii) A national, state, or regional association of licensing boards or health practitioners.
 - (iv) A health facility that provides comprehensive inpatient and outpatient health care services, including a tertiary care and teaching hospital.
 - (v) A governmental entity.
 - (D) Be designated by the Emergency Medical Services Authority as a registration system for purposes of this article.
- (b) While an emergency declaration is in effect, the Emergency Medical Services Authority, a person authorized to act on behalf of the authority, or a host entity may confirm whether volunteer health practitioners utilized in this state are registered with a registration system that complies with subdivision (a). Confirmation is limited to obtaining identities of the practitioners from the system and determining whether the system indicates that the practitioners are licensed and in good standing.
- (c) Upon request of a person in this state authorized to manage the emergency response, or a similarly authorized person in another state, a registration system

located in this state shall notify the person of the identities of volunteer health practitioners and whether the practitioners are licensed and in good standing.

(d) A host entity is not required to use the services of a volunteer health practitioner even if the practitioner is registered with a registration system that indicates that the practitioner is licensed and in good standing.

(e) A registration system shall provide timely notification to the applicable California licensing board or bureau of any volunteer health practitioner who is registered or licensed out of state and will provide services in this state, pursuant to this article. The notification shall include, at a minimum, the practitioner's name, license type, licensing jurisdiction, and status of good standing.

(f) A registration system shall provide timely notification to the applicable California licensing board or bureau of any volunteer health practitioner who is registered or licensed in this state and will provide services in out of state, pursuant to this article. The notification shall include, at a minimum, the practitioner's name, license type, licensing jurisdiction, and status of good standing.

(g) A volunteer health practitioner licensed out of state who provides health services in this state pursuant to an emergency declaration shall notify their applicable California licensing board or bureau of such activity in a manner determined by the board.

(g) A volunteer health practitioner licensed in this state who provides health services in another state pursuant to an emergency declaration shall notify their applicable California licensing board or bureau of such activity in a manner determined by the board.

MEMORANDUM

DATE	April 10, 2026
TO	Legislative and Regulatory Affairs Committee Members
FROM	Cynthia Whitney, Central Services Manager
SUBJECT	Agenda Item 5(d)(1) - AB 1568 (Alanis) Sex offenses: registration

Background

Assembly Bill 1568 (AB 1568) was introduced on January 12, 2026, by Assembly Member Juan Alanis.

The proposed bill would amend the *Sex Offender Registration Act* to require individuals seeking termination from the sex offender registry to provide proof of successful completion of a California Sex Offender Management Board–certified sex offender treatment program before filing a petition for removal.

Board of Psychology (Board) staff are monitoring this bill because the Board has disciplinary and enforcement statutes and regulations specific to sex-offense–related conduct. At this time, the bill does not directly amend the Board’s statutory authority, but staff will continue monitoring for potential impacts on enforcement processes.

Action Requested

This item is for informational purposes only. There is no action required at this time.

Attachment #1: Bill Text - [Weblink](#)

AMENDED IN ASSEMBLY MARCH 5, 2026
AMENDED IN ASSEMBLY FEBRUARY 23, 2026
CALIFORNIA LEGISLATURE—2025–26 REGULAR SESSION

ASSEMBLY BILL

No. 1568

Introduced by Assembly Member Alanis

January 12, 2026

An act to amend Section 290.5 of the Penal Code, relating to sex offenses.

LEGISLATIVE COUNSEL'S DIGEST

AB 1568, as amended, Alanis. Sex offenses: registration.

Existing law, the Sex Offender Registration Act, requires a person convicted of one of certain crimes, as specified, to register with law enforcement as a sex offender while residing in California or while attending school or working in California, as specified. Existing law, on and after July 1, 2021, authorizes a person to file a petition in the superior court in the county in which they are registered for termination from the sex offender registry on or after their next birthday following the expiration of the mandated minimum registration period.

If the district attorney requests a hearing regarding the above-described petition, under existing law, the district attorney is entitled to present evidence regarding whether community safety would be significantly enhanced by requiring continued registration. Existing law requires the court, in determining whether to order continued registration pursuant to the hearing, to consider specified information, including the person's current risk of reoffense as indicated on the State-Authorized Risk Assessment Tool for Sex Offenders (SARATSO), as specified.

This bill would ~~require the petitioner to personally appear at the hearing described above.~~ *authorize the court to order the petitioner to be present at the hearing described above, as specified.* The bill would additionally require the court to consider whether the offender was in a position of trust or authority in relation to the victim and proof of participation in or successful completion of sex offender-specific treatment by the offender in the above-described determination. The bill would require the court to verify, as specified, participation in or completion of treatment. The bill would authorize the court to order specified SARATSO assessments if the court is unable to verify participation in or completion of treatment, or as the court otherwise deems necessary, as specified. The bill would make other clarifying changes.

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 290.5 of the Penal Code is amended to
 2 read:
 3 290.5. (a) (1) A person who is required to register pursuant
 4 to Section 290 and who is a tier one or tier two offender may file
 5 a petition in the superior court in the county in which the person
 6 is registered for termination from the sex offender registry on or
 7 after their next birthday after July 1, 2021, following the expiration
 8 of the person’s mandated minimum registration period, or if the
 9 person is required to register pursuant to Section 290.008, the
 10 person may file the petition in juvenile court on or after their next
 11 birthday after July 1, 2021, following the expiration of the
 12 mandated minimum registration period. The petition shall contain
 13 proof of the person’s current registration as a sex offender.
 14 (2) The petition shall be served on the registering law
 15 enforcement agency and the district attorney in the county where
 16 the petition is filed and on the law enforcement agency and the
 17 district attorney of the county of conviction of a registerable offense
 18 if different than the county where the petition is filed. The
 19 registering law enforcement agency shall report receipt of service
 20 of a filed petition to the Department of Justice in a manner
 21 prescribed by the department. The registering law enforcement
 22 agency and the law enforcement agency of the county of conviction

1 of a registerable offense if different than the county where the
2 petition is filed shall, within 60 days of receipt of the petition,
3 report to the district attorney and the superior or juvenile court in
4 which the petition is filed regarding whether the person has met
5 the requirements for termination pursuant to subdivision (e) of
6 Section 290. If an offense which may require registration pursuant
7 to Section 290.005 is identified by the registering law enforcement
8 agency which has not previously been assessed by the Department
9 of Justice, the registering law enforcement agency shall refer that
10 conviction to the department for assessment and determination of
11 whether the conviction changes the tier designation assigned by
12 the department to the offender. If the newly discovered offense
13 changes the tier designation for that person, the department shall
14 change the tier designation pursuant to subdivision (d) of Section
15 290 within three months of receipt of the request by the registering
16 law enforcement agency and notify the registering law enforcement
17 agency. If more time is required to obtain the documents needed
18 to make the assessment, the department shall notify the registering
19 law enforcement agency of the reason that an extension of time is
20 necessary to complete the tier designation. The registering law
21 enforcement agency shall report to the district attorney and the
22 court that the department has requested an extension of time to
23 determine the person's tier designation based on the newly
24 discovered offense, the reason for the request, and the estimated
25 time needed to complete the tier designation. The district attorney
26 in the county where the petition is filed may, within 60 days of
27 receipt of the report from either the registering law enforcement
28 agency, the law enforcement agency of the county of conviction
29 of a registerable offense if different than the county where the
30 petition is filed, or the district attorney of the county of conviction
31 of a registerable offense, request a hearing on the petition if the
32 petitioner has not fulfilled the requirement described in subdivision
33 (e) of Section 290, or if community safety would be significantly
34 enhanced by the person's continued registration. ~~The petitioner~~
35 ~~shall personally appear at the hearing.~~ *The court may order the*
36 *petitioner to be present at the hearing, either in person or remotely*
37 *by video.* If no hearing is requested, the petition for termination
38 shall be granted if the court finds the required proof of current
39 registration is presented in the petition, provided that the registering
40 agency reported that the person met the requirement for termination

1 pursuant to subdivision (e) of Section 290, there are no pending
2 charges against the person which could extend the time to complete
3 the registration requirements of the tier or change the person's tier
4 status, and the person is not in custody or on parole, probation, or
5 supervised release. The court may summarily deny a petition if
6 the court determines the petitioner does not meet the statutory
7 requirements for termination of sex offender registration or if the
8 petitioner has not fulfilled the filing and service requirements of
9 this section. In summarily denying a petition the court shall state
10 the reason or reasons the petition is being denied.

11 (3) If the district attorney requests a hearing, the district attorney
12 shall be entitled to present evidence regarding whether community
13 safety would be significantly enhanced by requiring continued
14 registration. In determining whether to order continued registration,
15 the court shall consider: the nature and facts of the registerable
16 offense; the age and number of victims; whether any victim was
17 a stranger to the offender at the time of the offense (known to the
18 offender for less than 24 hours); whether the offender was in a
19 position of trust or authority in relation to any victim; criminal and
20 relevant noncriminal behavior before and after conviction for the
21 registerable offense; the time period during which the person has
22 not reoffended; the person's current risk of sexual or violent
23 reoffense, including the person's risk levels on SARATSO static,
24 dynamic, and violence risk assessment instruments, if available;
25 proof of participation in or successful completion of sex
26 offender-specific treatment by the offender; and proof of successful
27 completion of a Sex Offender Management Board-certified sex
28 offender treatment program by the offender, if the offender was
29 required to complete that program. The court shall verify, in a
30 manner subject to its discretion, participation in or completion of
31 treatment by the offender as described above. The court may order
32 SARATSO static, dynamic, and violence risk assessments if the
33 court is unable to verify participation in or completion of treatment
34 as described above, or as the court otherwise deems necessary, to
35 aid in its determination of the person's current risk of sexual or
36 violent reoffense. Any judicial determination made pursuant to
37 this section may be heard and determined upon declarations,
38 affidavits, police reports, or any other evidence submitted by the
39 parties which is reliable, material, and relevant.

1 (4) If termination from the registry is denied, the court shall set
2 the time period after which the person can repetition for
3 termination, which shall be at least one year from the date of the
4 denial, but not to exceed five years, based on facts presented at
5 the hearing. The court shall state on the record the reason for its
6 determination setting the time period after which the person may
7 repetition.

8 (5) The court shall notify the Department of Justice, California
9 Sex Offender Registry, when a petition for termination from the
10 registry is granted, denied, or summarily denied, in a manner
11 prescribed by the department. If the petition is denied, the court
12 shall also notify the Department of Justice, California Sex Offender
13 Registry, of the time period after which the person can file a new
14 petition for termination.

15 (b) (1) A person required to register as a tier two offender,
16 pursuant to paragraph (2) of subdivision (d) of Section 290, may
17 petition the superior court for termination from the registry after
18 10 years from release from custody on the registerable offense if
19 all of the following apply: (A) the registerable offense involved
20 no more than one victim 14 to 17 years of age, inclusive; (B) the
21 offender was under 21 years of age at the time of the offense; (C)
22 the registerable offense is not specified in subdivision (c) of Section
23 667.5, except subdivision (a) of Section 288; and (D) the
24 registerable offense is not specified in Section 236.1.

25 (2) A tier two offender described in paragraph (1) may file a
26 petition with the superior court for termination from the registry
27 only if the person has not been convicted of a new offense requiring
28 sex offender registration or an offense described in subdivision
29 (c) of Section 667.5 since the person was released from custody
30 on the offense requiring registration pursuant to Section 290, and
31 has registered for 10 years pursuant to subdivision (e) of Section
32 290. The court shall determine whether community safety would
33 be significantly enhanced by requiring continued registration and
34 may consider the following factors: whether the victim was a
35 stranger (known less than 24 hours) at the time of the offense; the
36 nature of the registerable offense, including whether the offender
37 took advantage of a position of trust; criminal and relevant
38 noncriminal behavior before and after the conviction for the
39 registerable offense; whether the offender has successfully
40 completed a Sex Offender Management Board-certified sex

1 offender treatment program; whether the offender initiated a
 2 relationship for the purpose of facilitating the offense; and the
 3 person’s current risk of sexual or violent reoffense, including the
 4 person’s risk levels on SARATSO static, dynamic, and violence
 5 risk assessment instruments, if known. If the petition is denied,
 6 the person may not repetition for termination for at least one year.

7 (3) A person required to register as a tier three offender based
 8 solely on the person’s risk level, pursuant to subparagraph (D) of
 9 paragraph (3) of subdivision (d) of Section 290, may petition the
 10 court for termination from the registry after 20 years from release
 11 from custody on the registerable offense, if the person (A) has not
 12 been convicted of a new offense requiring sex offender registration
 13 or an offense described in subdivision (c) of Section 667.5 since
 14 the person was released from custody on the offense requiring
 15 registration pursuant to Section 290, and (B) has registered for 20
 16 years pursuant to subdivision (e) of Section 290; except that a
 17 person required to register for a conviction pursuant to Section
 18 288 or an offense listed in subdivision (c) of Section 1192.7 who
 19 is a tier three offender based on the person’s risk level, pursuant
 20 to subparagraph (D) of paragraph (3) of subdivision (d) of Section
 21 290, shall not be permitted to petition for removal from the registry.
 22 The court shall determine whether community safety would be
 23 significantly enhanced by requiring continued registration and may
 24 consider the following factors: whether the victim was a stranger
 25 (known less than 24 hours) at the time of the offense; the nature
 26 of the registerable offense, including whether the offender took
 27 advantage of a position of trust; criminal and relevant noncriminal
 28 behavior before and after the conviction for the registerable offense;
 29 whether the offender has successfully completed a Sex Offender
 30 Management Board-certified sex offender treatment program;
 31 whether the offender initiated a relationship for the purpose of
 32 facilitating the offense; and the person’s current risk of sexual or
 33 violent reoffense, including the person’s risk levels on SARATSO
 34 static, dynamic, and violence risk assessment instruments, if
 35 known. If the petition is denied, the person may not re-petition for
 36 termination for at least three years.

37 (c) This section shall become operative on July 1, 2021.

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MEMORANDUM

DATE	April 10, 2026
TO	Legislative and Regulatory Affairs Committee Members
FROM	Cynthia Whitney, Central Services Manager
SUBJECT	Agenda Item 5(d)(2) - AB 1775 (Ward) Veterans

Background

Assembly Bill 1775 (AB 1775) was introduced on February 9, 2026, by Assembly Member Christopher M. Ward.

This bill amends provisions of the Business and Professions Code and Military and Veterans Code related to veterans. Specifically, it expands existing law requiring boards within the Department of Consumer Affairs (DCA) to expedite licensure applications from honorably discharged members of the Armed Forces to also include individuals who received a discharge solely because of a specified federal executive order. The bill also modifies reporting requirements related to military licensure data. In addition, it expands veteran support programs by requiring education on discharge upgrade services at no cost and establishing a new Veteran's Housing and Supportive Services Grant Program to provide housing assistance and related services to transitioning veterans.

The Board of Psychology (Board) is monitoring this bill because it amends Business and Professions Code sections applicable to boards within the Department of Consumer Affairs, including provisions related to expedited licensure for military applicants, which may affect Board licensure processes and reporting requirements.

Action Requested

This item is for informational purposes only. There is no action required at this time.

Attachment #1: Bill Text – [Weblink](#)

ASSEMBLY BILL

No. 1775

Introduced by Assembly Member Ward

February 9, 2026

An act to amend Sections 115.4 and 115.8 of the Business and Professions Code, and to amend Section 885 of, and to add Section 886 to, the Military and Veterans Code, relating to veterans.

LEGISLATIVE COUNSEL'S DIGEST

AB 1775, as introduced, Ward. Veterans.

Existing law establishes the Department of Consumer Affairs under the direction of the Director of Consumer Affairs and sets forth its powers and duties relating to the administration of the various boards under its jurisdiction that license and regulate various professions and vocations. Existing law requires those boards to expedite, and authorizes them to assist, the initial licensure process for an applicant who supplies satisfactory evidence to the board that the applicant has served as an active duty member of the Armed Forces of the United States and was honorably discharged.

This bill would extend that requirement and authorization to also include members who were discharged or received a discharge solely as a result of a specified executive order. The bill would make additional conforming changes.

Existing law requires the department, subject to an appropriation by the Legislature, to establish the Veteran's Military Discharge Upgrade Grant Program to help fund service providers who, for free or at low cost, will educate veterans about discharge upgrades and assist veterans in filing discharge upgrade applications, as specified. Existing law authorizes the department to prioritize veteran recipients of the services,

such as prioritizing those who are able to demonstrate their less than honorable characterization of service was connected to a mental health condition, traumatic brain injury, sexual assault or harassment, or sexual orientation.

This bill would instead require the program to help fund service providers who will educate veterans on the above-described services at no cost. The bill would additionally require the department to prioritize veteran recipients who are able to demonstrate that their less than honorable characterization of service was connected to a mental health condition, traumatic brain injury, sexual assault or harassment, or sexual orientation or who are able to demonstrate their characterization of service was connected to gender identity.

This bill would additionally require the department, subject to an appropriation by the Legislature, to establish the Veteran’s Housing and Supportive Services Grant Program to help fund service providers who, for at no cost, will provide housing supports for veterans being discharged from service. The bill would require the department to develop criteria, procedures, and accountability measures as may be necessary to implement the grant program, and to prioritize veteran recipients who are able to demonstrate their less than honorable characterization of service was connected to a mental health condition, traumatic brain injury, sexual assault or harassment, or sexual orientation or who are able to demonstrate their characterization of service was connected to gender identity.

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 115.4 of the Business and Professions
2 Code is amended to read:
3 115.4. (a) Notwithstanding any other law, on and after July 1,
4 2016, a board within the department shall expedite, and may assist,
5 the initial licensure process for an applicant who supplies
6 satisfactory evidence to the board that the applicant has served as
7 an active duty member of the Armed Forces of the United States
8 and was honorably ~~discharged~~. *discharged or received a discharge*
9 *solely as a result of Executive Order No. 14183 issued on January*
10 *27, 2025.*

1 (b) Notwithstanding any other law, on and after July 1, 2024,
2 a board within the department shall expedite, and may assist, the
3 initial licensure process for an applicant who supplies satisfactory
4 evidence to the board that the applicant is an active duty member
5 of a regular component of the Armed Forces of the United States
6 enrolled in the United States Department of Defense SkillBridge
7 program as authorized under Section 1143(e) of Title 10 of the
8 United States Code.

9 (c) A board may adopt regulations necessary to administer this
10 section in accordance with the provisions of Chapter 3.5
11 (commencing with Section 11340) of Part 1 of Division 3 of Title
12 2 of the Government Code.

13 (d) For purposes of this section, the term “applicant” refers to
14 an applicant for an individual license and does not refer to
15 applicants for business or entity licenses.

16 SEC. 2. Section 115.8 of the Business and Professions Code
17 is amended to read:

18 115.8. The Department of Consumer Affairs shall compile
19 information on military and spouse licensure into an annual report
20 for the Legislature, which shall be submitted in conformance with
21 Section 9795 of the Government Code. The report shall include
22 all of the following for each license type of each board:

23 (a) The number of applications for a temporary license submitted
24 by military spouses per fiscal year, pursuant to Section 115.6.

25 (b) The number of applications for expedited licenses received
26 from honorably discharged military members and military ~~spouses~~
27 *spouses, or those who received a discharge solely as a result of*
28 *Executive Order No. 14183 issued on January 27, 2025*, pursuant
29 to Sections 115.4 and 115.5.

30 (c) The number of licenses issued and denied per fiscal year
31 pursuant to Sections 115.4, 115.5, and 115.6.

32 (d) The number of licenses issued pursuant to Section 115.6
33 that were suspended or revoked per fiscal year.

34 (e) The number of applications for waived renewal fees received
35 and granted pursuant to Section 114.3 per fiscal year.

36 (f) The average length of time between application and issuance
37 of licenses pursuant to Sections 115.4, 115.5, and 115.6.

38 SEC. 3. Section 885 of the Military and Veterans Code is
39 amended to read:

1 885. (a) The department shall establish the Veteran’s Military
2 Discharge Upgrade Grant Program to help fund service providers
3 who, ~~for free or at low~~ *at no* cost, will educate veterans about
4 discharge upgrades and assist qualifying veterans in filing discharge
5 upgrade applications.

6 (b) The department shall develop criteria, procedures, and
7 accountability measures as may be necessary to implement the
8 grant program. The department ~~may shall~~ prioritize veteran
9 recipients ~~of the services, such as prioritizing those who are able~~
10 to demonstrate their less than honorable characterization of service
11 was connected to a mental health condition, traumatic brain injury,
12 sexual assault or harassment, or sexual ~~orientation.~~ *orientation or*
13 *who are able to demonstrate their characterization of service was*
14 *connected to gender identity.*

15 (c) Funding for the grant program is subject to appropriation
16 by the Legislature.

17 SEC. 4. Section 886 is added to the Military and Veterans
18 Code, to read:

19 886. (a) The department shall establish the Veteran’s Housing
20 and Supportive Services Grant Program to help fund service
21 providers who, for at no cost, will provide housing supports for
22 veterans being discharged from service.

23 (b) The department shall develop criteria, procedures, and
24 accountability measures as may be necessary to implement the
25 grant program. The department shall prioritize veteran recipients
26 who are able to demonstrate their less than honorable
27 characterization of service was connected to a mental health
28 condition, traumatic brain injury, sexual assault or harassment, or
29 sexual orientation or who are able to demonstrate their
30 characterization of service was connected to gender identity.

31 (c) Funding for the grant program is subject to appropriations
32 by the Legislature.

MEMORANDUM

DATE	April 10, 2026
TO	Legislative and Regulatory Affairs Committee Members
FROM	Cynthia Whitney, Central Services Manager
SUBJECT	Agenda Item 5(d)(3) - AB 2366 (Avila Farias) Administrative Procedure Act: proposed regulations: cost-of-living impact on residents of the state

Background

Assembly Bill 2366 (AB 2366) was introduced on February 19, 2026, by Assembly Member Cecilia M. Avila Farias.

The bill amends provisions of the Administrative Procedure Act to require state agencies, when proposing regulations, to assess and disclose the cost-of-living impacts on California residents as part of the economic impact analysis conducted during the rulemaking process. The bill requires the Legislative Analyst's Office to develop a standardized methodology for evaluating cost-of-living impacts and to conduct an independent review of certain regulatory analyses. It also requires the Department of Finance to create a regulatory economic burden tracker to analyze the cumulative economic impact of regulations by sector and post this information publicly. Additionally, the bill expands the standards used by the Office of Administrative Law when reviewing regulations to include cost-of-living impacts and extends the review timeline for major regulations.

The Board of Psychology (Board) is monitoring this bill because it modifies the Administrative Procedure Act, which governs the rulemaking process for all state agencies, including boards within the Department of Consumer Affairs. If enacted, the bill would change the requirements the Board must follow when conducting economic and cost-of-living impact assessments as part of future regulatory rulemaking.

Action Requested

This item is for informational purposes only. There is no action required at this time.

Attachment #1: Bill Text – [Weblink](#)

ASSEMBLY BILL

No. 2366

Introduced by Assembly Member Ávila Farías

February 19, 2026

An act to amend Sections 11346.3, 11346.5, 11349, 11349.1, and 11349.3 of, and to add Section 11346.37 to, the Government Code, relating to state government.

LEGISLATIVE COUNSEL'S DIGEST

AB 2366, as introduced, Ávila Farías. Administrative Procedure Act: proposed regulations: cost-of-living impact on residents of the state.

Existing law, the Administrative Procedure Act, governs the procedure for the adoption, amendment, or repeal of regulations by state agencies and for the review of those regulatory actions by the Office of Administrative Law. The act requires a state agency proposing to adopt, amend, or repeal any administrative regulation to assess the potential for adverse economic impact on California business enterprises and individuals and requires the state agency to adhere to specified requirements in making that assessment.

This bill would include among those requirements for assessing the potential for adverse economic impact the consideration of the proposal's cost-of-living impacts on residents of the state, as defined.

Existing law requires a state agency proposing to adopt, amend, or repeal a regulation that is not a major regulation to prepare an economic impact assessment that includes to what extent the regulation will affect specified factors, including the creation or elimination of jobs within the state. Existing law requires a state agency proposing to adopt, amend, or repeal a major regulation to prepare a standardized regulatory impact

analysis that addresses specified factors, including the creation or elimination of jobs within the state.

This bill would also require the assessment for nonmajor regulations to include to what extent it will affect the cost-of-living impacts on residents of the state, and would require the standardized regulatory impact analysis for major regulations to address the cost-of-living impacts on residents of the state. The bill would require an agency to notify the office when the agency determines it needs to contract for outside services to perform the analyses and would require the office to select the contractor and oversee its work. The bill would require the Legislative Analyst's Office to adopt a standardized cost-of-living methodology for use by all agencies that includes a process for determining whether those cost-of-living impacts are significant. The bill would require each state agency to submit the standardized regulatory impact analysis to the Legislative Analyst's Office, and would require the Legislative Analyst's Office to take certain actions, including conducting an independent analysis of the adequacy of an agency's economic analysis and an analysis of the cost-of-living impacts on residents of the state, and to provide its analysis to the state agency.

This bill would require the Department of Finance to develop and maintain a regulatory economic burden tracker that will gather and analyze the cumulative economic burden of regulations by sector of the economy. The bill would require the department to post the tracker on its internet website and update the tracker annually.

Existing law requires the notice of proposed adoption, amendment, or repeal of a regulation to include, among other information, a statement of the results of the economic impact assessment and a summary of any comments submitted to the agency.

This bill would instead require the notice to include a detailed statement of the results of the economic impact assessment. The bill would require the summary of comments to include the Legislative Analyst's Office comments and agency responses, as referenced above.

Existing law requires the office to review regulations and make determinations using specified standards, including, necessity, authority, and clarity.

This bill would add to those standards the cost-of-living impacts on residents of the state. The bill would require the office, in reviewing proposed regulations for cost-of-living impacts on residents of the state, to use the standardized methodology developed by the Legislative Analyst's Office.

Existing law requires the office to either approve a regulation or disapprove it within 30 working days after a regulation has been submitted to the office for review. Existing law requires the office, if it disapproves a regulation, to provide the adopting agency with a written notice detailing the reasons for disapproval.

This bill would, for major regulations, increase the period of time for approval or disapproval to 60 working days. The bill would require the office, for major regulations, to hold a public hearing within 30 working days after the regulation has been submitted to the office. If one of the reasons for disapproval includes a significant cost-of-living impact, the bill would require the agency to pursue a less costly alternative or explain why a less costly alternative is infeasible.

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 11346.3 of the Government Code is
2 amended to read:

3 11346.3. (a) A state agency proposing to adopt, amend, or
4 repeal any administrative regulation shall assess the potential for
5 adverse economic impact on California business enterprises and
6 individuals, avoiding the imposition of unnecessary or unreasonable
7 regulations or reporting, recordkeeping, or compliance
8 requirements. For purposes of this subdivision, assessing the
9 potential for adverse economic impact shall require agencies, when
10 proposing to adopt, amend, or repeal a regulation, to adhere to the
11 following requirements, to the extent that these requirements do
12 not conflict with other state or federal laws:

13 (1) The proposed adoption, amendment, or repeal of a regulation
14 shall be based on adequate information concerning the need for,
15 and consequences of, proposed governmental action.

16 (2) The state agency, before submitting a proposal to adopt,
17 amend, or repeal a regulation to the office, shall consider the
18 proposal's impact on business, with consideration of industries
19 affected including the ability of California businesses to compete
20 with businesses in other states. For purposes of evaluating the
21 impact on the ability of California businesses to compete with
22 businesses in other states, an agency shall consider, but not be
23 limited to, information supplied by interested parties.

1 (3) *The state agency, before submitting a proposal to adopt,*
 2 *amend, or repeal a regulation to the office, shall consider the*
 3 *proposal’s cost-of-living impacts on residents of the state.*

4 ~~(3)~~

5 (4) An economic impact assessment prepared pursuant to this
 6 subdivision for a proposed regulation that is not a major regulation
 7 or that is a major regulation proposed before November 1, 2013,
 8 shall be prepared in accordance with subdivision (b), and shall be
 9 included in the initial statement of reasons as required by Section
 10 11346.2. An economic assessment prepared pursuant to this
 11 subdivision for a major regulation proposed on or after November
 12 1, 2013, shall be prepared in accordance with subdivision (c), and
 13 shall be included in the initial statement of reasons as required by
 14 Section 11346.2.

15 (b) (1) A state agency proposing to adopt, amend, or repeal a
 16 regulation that is not a major regulation or that is a major regulation
 17 proposed before November 1, 2013, shall prepare an economic
 18 impact assessment that assesses whether and to what extent it will
 19 affect the following:

20 (A) The creation or elimination of jobs within the state.

21 (B) *The cost-of-living impacts on residents of the state.*

22 ~~(B)~~

23 (C) The creation of new businesses or the elimination of existing
 24 businesses within the state.

25 ~~(C)~~

26 (D) The expansion of businesses currently doing business within
 27 the state.

28 ~~(D)~~

29 (E) The benefits of the regulation to the health and welfare of
 30 California residents, worker safety, and the state’s environment.

31 (2) This subdivision does not apply to the University of
 32 California, the college named in Section 92200 of the Education
 33 Code, or the Fair Political Practices Commission.

34 (3) Information required from a state agency for the purpose of
 35 completing the assessment may come from existing state
 36 publications.

37 (4) (A) For purposes of conducting the economic impact
 38 assessment pursuant to this subdivision, a state agency may use
 39 the consolidated definition of small business in subparagraph (B)
 40 in order to determine the number of small businesses within the

1 economy, a specific industry sector, or geographic region. The
2 state agency shall clearly identify the use of the consolidated small
3 business definition in its rulemaking package.

4 (B) For the exclusive purpose of undertaking the economic
5 impact assessment, a “small business” means a business that is all
6 of the following:

- 7 (i) Independently owned and operated.
- 8 (ii) Not dominant in its field of operation.
- 9 (iii) Has fewer than 100 employees.

10 (C) Subparagraph (A) shall not apply to a regulation adopted
11 by the Department of Insurance that applies to an insurance
12 company.

13 (c) (1) Each state agency proposing to adopt, amend, or repeal
14 a major regulation on or after November 1, 2013, shall prepare a
15 standardized regulatory impact analysis in the manner prescribed
16 by the Department of Finance pursuant to Section 11346.36. The
17 standardized regulatory impact analysis shall address all of the
18 following:

19 (A) The creation or elimination of jobs within the state.

20 (B) *The cost-of-living impacts on residents of the state.*

21 ~~(B)~~

22 (C) The creation of new businesses or the elimination of existing
23 businesses within the state.

24 ~~(C)~~

25 (D) The competitive advantages or disadvantages for businesses
26 currently doing business within the state.

27 ~~(D)~~

28 (E) The increase or decrease of investment in the state.

29 ~~(E)~~

30 (F) The incentives for innovation in products, materials, or
31 processes.

32 ~~(F)~~

33 (G) The benefits of the regulations, including, but not limited
34 to, benefits to the health, safety, and welfare of California residents,
35 worker safety, and the state’s environment and quality of life,
36 among any other benefits identified by the agency.

37 (2) This subdivision shall not apply to the University of
38 California, the college named in Section 92200 of the Education
39 Code, or the Fair Political Practices Commission.

1 (3) Information required from state agencies for the purpose of
2 completing the analysis may be derived from existing state, federal,
3 or academic publications.

4 (d) Any administrative regulation adopted on or after January
5 1, 1993, that requires a report shall not apply to businesses, unless
6 the state agency adopting the regulation makes a finding that it is
7 necessary for the health, safety, or welfare of the people of the
8 state that the regulation apply to businesses.

9 (e) Analyses conducted pursuant to this section are intended to
10 provide agencies and the public with tools to determine whether
11 the regulatory proposal is an efficient and effective means of
12 implementing the policy decisions enacted in statute or by other
13 provisions of law in the least burdensome manner. Regulatory
14 impact analyses shall inform the agencies and the public of the
15 economic consequences of regulatory choices, not reassess
16 statutory policy. The baseline for the regulatory analysis shall be
17 the most cost-effective set of regulatory measures that are equally
18 effective in achieving the purpose of the regulation in a manner
19 that ensures full compliance with the authorizing statute or other
20 law being implemented or made specific by the proposed
21 regulation.

22 (f) *When a state agency determines that it needs to contract for*
23 *outside services in order to perform the analyses in this section,*
24 *the agency shall notify the office and the office shall select the*
25 *contractor and oversee its work.*

26 (g) *The Legislative Analyst’s Office shall adopt a standardized*
27 *cost-of-living methodology for use by all agencies. The*
28 *methodology shall also include a process for determining whether*
29 *those cost-of-living impacts are significant.*

30 (f)

31 (h) Each state agency proposing to adopt, amend, or repeal a
32 major regulation on or after November 1, 2013, and that has
33 prepared a standardized regulatory impact analysis pursuant to
34 subdivision (c), shall submit that analysis to the Department of
35 Finance upon completion. The department shall comment, within
36 30 days of receiving that analysis, on the extent to which the
37 analysis adheres to the regulations adopted pursuant to Section
38 11346.36. Upon receiving the comments from the department, the
39 agency may update its analysis to reflect any comments received
40 from the department and shall summarize the comments and the

1 response of the agency along with a statement of the results of the
2 updated analysis for the statement required by paragraph (10) of
3 subdivision (a) of Section 11346.5.

4 *(i) Each state agency proposing to adopt, amend, or repeal a*
5 *major regulation and that has prepared a standardized regulatory*
6 *impact analysis pursuant to subdivision (c) shall submit that*
7 *analysis to the Legislative Analyst’s Office upon completion. The*
8 *Legislative Analyst’s Office shall conduct an independent analysis*
9 *of the adequacy of an agency’s economic analyses prepared*
10 *pursuant to this section. The office shall also conduct its own*
11 *analysis of the cost-of-living impacts on residents of the state of*
12 *a proposed regulation. If the office finds that the cost-of-living*
13 *impacts of a proposed regulation are significant, the office shall*
14 *identify means by which the cost of the proposed regulation could*
15 *be reduced. The Legislative Analyst’s Office shall provide its*
16 *analysis and comments on these items to the state agency within*
17 *60 days. Upon receiving the comments from the Legislative*
18 *Analyst’s Office, the agency may update its analysis to reflect any*
19 *revisions or comments received and shall summarize the comments*
20 *and response of the agency along with a statement of the results*
21 *of the updated analysis for the statement required by paragraph*
22 *(10) of subdivision (a) of Section 11346.5.*

23 SEC. 2. Section 11346.37 is added to the Government Code,
24 immediately following Section 11346.36, to read:

25 11346.37. (a) The Department of Finance shall develop and
26 maintain a regulatory economic burden tracker that will gather
27 and analyze the cumulative economic burden of regulations by
28 sector of the economy. The tracker shall integrate the regulatory
29 costs across agencies that impact each sector.

30 (b) The department shall post the tracker on its internet website,
31 and shall update the tracker on an annual basis.

32 SEC. 3. Section 11346.5 of the Government Code is amended
33 to read:

34 11346.5. (a) The notice of proposed adoption, amendment, or
35 repeal of a regulation shall include the following:

36 (1) A statement of the time, place, and nature of proceedings
37 for adoption, amendment, or repeal of the regulation.

38 (2) Reference to the authority under which the regulation is
39 proposed and a reference to the particular code sections or other

1 provisions of law that are being implemented, interpreted, or made
2 specific.

3 (3) An informative digest drafted in plain English in a format
4 similar to the Legislative Counsel's digest on legislative bills. The
5 informative digest shall include the following:

6 (A) A concise and clear summary of existing laws and
7 regulations, if any, related directly to the proposed action and of
8 the effect of the proposed action.

9 (B) If the proposed action differs substantially from an existing
10 comparable federal regulation or statute, a brief description of the
11 significant differences and the full citation of the federal regulations
12 or statutes.

13 (C) A policy statement overview explaining the broad objectives
14 of the regulation and the specific benefits anticipated by the
15 proposed adoption, amendment, or repeal of a regulation, including,
16 to the extent applicable, nonmonetary benefits such as the
17 protection of public health and safety, worker safety, or the
18 environment, the prevention of discrimination, the promotion of
19 fairness or social equity, and the increase in openness and
20 transparency in business and government, among other things.

21 (D) An evaluation of whether the proposed regulation is
22 inconsistent or incompatible with existing state regulations.

23 (4) Any other matters as are prescribed by statute applicable to
24 the specific state agency or to any specific regulation or class of
25 regulations.

26 (5) A determination as to whether the regulation imposes a
27 mandate on local agencies or school districts and, if so, whether
28 the mandate requires state reimbursement pursuant to Part 7
29 (commencing with Section 17500) of Division 4.

30 (6) An estimate, prepared in accordance with instructions
31 adopted by the Department of Finance, of the cost or savings to
32 any state agency, the cost to any local agency or school district
33 that is required to be reimbursed under Part 7 (commencing with
34 Section 17500) of Division 4, other nondiscretionary cost or
35 savings imposed on local agencies, and the cost or savings in
36 federal funding to the state.

37 For purposes of this paragraph, "cost or savings" means
38 additional costs or savings, both direct and indirect, that a public
39 agency necessarily incurs in reasonable compliance with
40 regulations.

1 (7) If a state agency, in proposing to adopt, amend, or repeal
2 any administrative regulation, makes an initial determination that
3 the action may have a significant, statewide adverse economic
4 impact directly affecting business, including the ability of
5 California businesses to compete with businesses in other states,
6 it shall include the following information in the notice of proposed
7 action:

8 (A) Identification of the types of businesses that would be
9 affected.

10 (B) A description of the projected reporting, recordkeeping, and
11 other compliance requirements that would result from the proposed
12 action.

13 (C) The following statement: “The (name of agency) has made
14 an initial determination that the (adoption/amendment/peal) of
15 this regulation may have a significant, statewide adverse economic
16 impact directly affecting business, including the ability of
17 California businesses to compete with businesses in other states.
18 The (name of agency) (has/has not) considered proposed
19 alternatives that would lessen any adverse economic impact on
20 business and invites you to submit proposals. Submissions may
21 include the following considerations:

22 (i) The establishment of differing compliance or reporting
23 requirements or timetables that take into account the resources
24 available to businesses.

25 (ii) Consolidation or simplification of compliance and reporting
26 requirements for businesses.

27 (iii) The use of performance standards rather than prescriptive
28 standards.

29 (iv) Exemption or partial exemption from the regulatory
30 requirements for businesses.”

31 (8) If a state agency, in adopting, amending, or repealing any
32 administrative regulation, makes an initial determination that the
33 action will not have a significant, statewide adverse economic
34 impact directly affecting business, including the ability of
35 California businesses to compete with businesses in other states,
36 it shall make a declaration to that effect in the notice of proposed
37 action. In making this declaration, the agency shall provide in the
38 record facts, evidence, documents, testimony, or other evidence
39 upon which the agency relies to support its initial determination.

1 An agency's initial determination and declaration that a proposed
2 adoption, amendment, or repeal of a regulation may have or will
3 not have a significant, adverse impact on businesses, including the
4 ability of California businesses to compete with businesses in other
5 states, shall not be grounds for the office to refuse to publish the
6 notice of proposed action.

7 (9) A description of all cost impacts, known to the agency at
8 the time the notice of proposed action is submitted to the office,
9 that a representative private person or business would necessarily
10 incur in reasonable compliance with the proposed action.

11 If no cost impacts are known to the agency, it shall state the
12 following:

13 "The agency is not aware of any cost impacts that a
14 representative private person or business would necessarily incur
15 in reasonable compliance with the proposed action."

16 (10) A *detailed* statement of the results of the economic impact
17 assessment required by subdivision (b) of Section 11346.3 or the
18 standardized regulatory impact analysis if required by subdivision
19 (c) of Section 11346.3, a summary of any comments submitted to
20 the agency pursuant to ~~subdivision (f)~~ subdivisions (h) and (i) of
21 Section 11346.3 and the agency's response to those comments.

22 (11) The finding prescribed by subdivision (d) of Section
23 11346.3, if required.

24 (12) (A) A statement that the action would have a significant
25 effect on housing costs, if a state agency, in adopting, amending,
26 or repealing any administrative regulation, makes an initial
27 determination that the action would have that effect.

28 (B) The agency officer designated in paragraph (14) shall make
29 available to the public, upon request, the agency's evaluation, if
30 any, of the effect of the proposed regulatory action on housing
31 costs.

32 (C) The statement described in subparagraph (A) shall also
33 include the estimated costs of compliance and potential benefits
34 of a building standard, if any, that were included in the initial
35 statement of reasons.

36 (D) For purposes of model codes adopted pursuant to Section
37 18928 of the Health and Safety Code, the agency shall comply
38 with the requirements of this paragraph only if an interested party
39 has made a request to the agency to examine a specific section for

1 purposes of estimating the costs of compliance and potential
2 benefits for that section, as described in Section 11346.2.

3 (13) A statement that the adopting agency must determine that
4 no reasonable alternative considered by the agency or that has
5 otherwise been identified and brought to the attention of the agency
6 would be more effective in carrying out the purpose for which the
7 action is proposed, would be as effective and less burdensome to
8 affected private persons than the proposed action, or would be
9 more cost effective to affected private persons and equally effective
10 in implementing the statutory policy or other provision of law. For
11 a major regulation, as defined by Section 11342.548, proposed on
12 or after November 1, 2013, the statement shall be based, in part,
13 upon the standardized regulatory impact analysis of the proposed
14 regulation, as required by Section 11346.3, as well as upon the
15 benefits of the proposed regulation identified pursuant to
16 subparagraph (C) of paragraph (3).

17 (14) The name and telephone number of the agency
18 representative and designated backup contact person to whom
19 inquiries concerning the proposed administrative action may be
20 directed.

21 (15) The date by which comments submitted in writing must
22 be received to present statements, arguments, or contentions in
23 writing relating to the proposed action in order for them to be
24 considered by the state agency before it adopts, amends, or repeals
25 a regulation.

26 (16) Reference to the fact that the agency proposing the action
27 has prepared a statement of the reasons for the proposed action,
28 has available all the information upon which its proposal is based,
29 and has available the express terms of the proposed action, pursuant
30 to subdivision (b).

31 (17) A statement that if a public hearing is not scheduled, any
32 interested person or ~~his or her~~ *their* duly authorized representative
33 may request, no later than 15 days prior to the close of the written
34 comment period, a public hearing pursuant to Section 11346.8.

35 (18) A statement indicating that the full text of a regulation
36 changed pursuant to Section 11346.8 will be available for at least
37 15 days prior to the date on which the agency adopts, amends, or
38 repeals the resulting regulation.

1 (19) A statement explaining how to obtain a copy of the final
2 statement of reasons once it has been prepared pursuant to
3 subdivision (a) of Section 11346.9.

4 (20) If the agency maintains an ~~Internet Web site~~ *internet*
5 *website* or other similar forum for the electronic publication or
6 distribution of written material, a statement explaining how
7 materials published or distributed through that forum can be
8 accessed.

9 (21) If the proposed regulation is subject to Section 11346.6, a
10 statement that the agency shall provide, upon request, a description
11 of the proposed changes included in the proposed action, in the
12 manner provided by Section 11346.6, to accommodate a person
13 with a visual or other disability for which effective communication
14 is required under state or federal law and that providing the
15 description of proposed changes may require extending the period
16 of public comment for the proposed action.

17 (b) The agency representative designated in paragraph (14) of
18 subdivision (a) shall make available to the public upon request the
19 express terms of the proposed action. The representative shall also
20 make available to the public upon request the location of public
21 records, including reports, documentation, and other materials,
22 related to the proposed action. If the representative receives an
23 inquiry regarding the proposed action that the representative cannot
24 answer, the representative shall refer the inquiry to another person
25 in the agency for a prompt response.

26 (c) This section shall not be construed in any manner that results
27 in the invalidation of a regulation because of the alleged inadequacy
28 of the notice content or the summary or cost estimates, or the
29 alleged inadequacy or inaccuracy of the housing cost estimates, if
30 there has been substantial compliance with those requirements.

31 SEC. 4. Section 11349 of the Government Code is amended
32 to read:

33 11349. The following definitions govern the interpretation of
34 this chapter:

35 (a) "Necessity" means the record of the rulemaking proceeding
36 demonstrates by substantial evidence the need for a regulation to
37 effectuate the purpose of the statute, court decision, or other
38 provision of law that the regulation implements, interprets, or
39 makes specific, taking into account the totality of the record. For

1 purposes of this standard, evidence includes, but is not limited to,
2 facts, studies, and expert opinion.

3 (b) “Authority” means the provision of law which permits or
4 obligates the agency to adopt, amend, or repeal a regulation.

5 (c) “Clarity” means written or displayed so that the meaning of
6 regulations will be easily understood by those persons directly
7 affected by them.

8 (d) “Consistency” means being in harmony with, and not in
9 conflict with or contradictory to, existing statutes, court decisions,
10 or other provisions of law.

11 (e) “Reference” means the statute, court decision, or other
12 provision of law which the agency implements, interprets, or makes
13 specific by adopting, amending, or repealing a regulation.

14 (f) “Nonduplication” means that a regulation does not serve the
15 same purpose as a state or federal statute or another regulation.
16 This standard requires that an agency proposing to amend or adopt
17 a regulation must identify any state or federal statute or regulation
18 which is overlapped or duplicated by the proposed regulation and
19 justify any overlap or duplication. This standard is not intended
20 to prohibit state agencies from printing relevant portions of
21 enabling legislation in regulations when the duplication is necessary
22 to satisfy the clarity standard in paragraph (3) of subdivision (a)
23 of Section 11349.1. This standard is intended to prevent the
24 indiscriminate incorporation of statutory language in a regulation.

25 (g) “*Cost-of-living impacts on residents of the state*” means the
26 *cost of essentials and consumer staples, including, but not limited*
27 *to, housing, transportation, food, taxes, and health care and the*
28 *increase or decrease in these costs as a result of a proposed*
29 *regulation in California both at the time of consideration and the*
30 *foreseeable future.*

31 SEC. 5. Section 11349.1 of the Government Code is amended
32 to read:

33 11349.1. (a) The office shall review all regulations adopted,
34 amended, or repealed pursuant to the procedure specified in Article
35 5 (commencing with Section 11346) and submitted to it for
36 publication in the California Code of Regulations Supplement and
37 for transmittal to the Secretary of State and make determinations
38 using all of the following standards:

- 39 (1) Necessity.
40 (2) Authority.

- 1 (3) Clarity.
- 2 (4) Consistency.
- 3 (5) Reference.
- 4 (6) Nonduplication.
- 5 (7) *Cost-of-living impacts on residents of the state.*

6 In reviewing regulations pursuant to this section, the office shall
7 restrict its review to the regulation and the record of the rulemaking
8 proceeding. The office shall approve the regulation or order of
9 repeal if it complies with the standards set forth in this section and
10 with this chapter.

11 (b) In reviewing proposed regulations for the criteria in
12 subdivision (a), the office may consider the clarity of the proposed
13 regulation in the context of related regulations already in existence.
14 *In addition, in reviewing the proposed regulations for cost-of-living*
15 *impacts on residents of the state, the office shall use the*
16 *standardized methodology developed by the Legislative Analyst's*
17 *Office pursuant to subdivision (g) of Section 11346.3.*

18 (c) The office shall adopt regulations governing the procedures
19 it uses in reviewing regulations submitted to it. The regulations
20 shall provide for an orderly review and shall specify the methods,
21 standards, presumptions, and principles the office uses, and the
22 limitations it observes, in reviewing regulations to establish
23 compliance with the standards specified in subdivision (a). The
24 regulations adopted by the office shall ensure that it does not
25 substitute its judgment for that of the rulemaking agency as
26 expressed in the substantive content of adopted regulations.

27 (d) The office shall return any regulation subject to this chapter
28 to the adopting agency if any of the following occur:

29 (1) The adopting agency has not prepared the estimate required
30 by paragraph (6) of subdivision (a) of Section 11346.5 and has not
31 included the data used and calculations made and the summary
32 report of the estimate in the file of the rulemaking.

33 (2) The agency has not complied with Section 11346.3.
34 “Noncompliance” means that the agency failed to complete the
35 economic impact assessment or standardized regulatory impact
36 analysis required by Section 11346.3 or failed to include the
37 assessment or analysis in the file of the rulemaking proceeding as
38 required by Section 11347.3.

39 (3) The adopting agency has prepared the estimate required by
40 paragraph (6) of subdivision (a) of Section 11346.5, the estimate

1 indicates that the regulation will result in a cost to local agencies
2 or school districts that is required to be reimbursed under Part 7
3 (commencing with Section 17500) of Division 4, and the adopting
4 agency fails to do any of the following:

5 (A) Cite an item in the Budget Act for the fiscal year in which
6 the regulation will go into effect as the source from which the
7 Controller may pay the claims of local agencies or school districts.

8 (B) Cite an accompanying bill appropriating funds as the source
9 from which the Controller may pay the claims of local agencies
10 or school districts.

11 (C) Attach a letter or other documentation from the Department
12 of Finance which states that the Department of Finance has
13 approved a request by the agency that funds be included in the
14 Budget Bill for the next following fiscal year to reimburse local
15 agencies or school districts for the costs mandated by the
16 regulation.

17 (D) Attach a letter or other documentation from the Department
18 of Finance which states that the Department of Finance has
19 authorized the augmentation of the amount available for
20 expenditure under the agency's appropriation in the Budget Act
21 which is for reimbursement pursuant to Part 7 (commencing with
22 Section 17500) of Division 4 to local agencies or school districts
23 from the unencumbered balances of other appropriations in the
24 Budget Act and that this augmentation is sufficient to reimburse
25 local agencies or school districts for their costs mandated by the
26 regulation.

27 (4) The proposed regulation conflicts with an existing state
28 regulation and the agency has not identified the manner in which
29 the conflict may be resolved.

30 (5) The agency did not make the alternatives determination as
31 required by paragraph (4) of subdivision (a) of Section 11346.9.

32 (e) The office shall notify the Department of Finance of all
33 regulations returned pursuant to subdivision (d).

34 (f) The office shall return a rulemaking file to the submitting
35 agency if the file does not comply with subdivisions (a) and (b)
36 of Section 11347.3. Within three state working days of the receipt
37 of a rulemaking file, the office shall notify the submitting agency
38 of any deficiency identified. If no notice of deficiency is mailed
39 to the adopting agency within that time, a rulemaking file shall be
40 deemed submitted as of the date of its original receipt by the office.

1 A rulemaking file shall not be deemed submitted until each
 2 deficiency identified under this subdivision has been corrected.

3 (g) Notwithstanding any other law, return of the regulation to
 4 the adopting agency by the office pursuant to this section is the
 5 exclusive remedy for a failure to comply with subdivision (c) of
 6 Section 11346.3 or paragraph (10) of subdivision (a) of Section
 7 11346.5.

8 SEC. 6. Section 11349.3 of the Government Code is amended
 9 to read:

10 11349.3. (a) The office shall either approve a regulation
 11 submitted to it for review and transmit it to the Secretary of State
 12 for filing or disapprove it within 30 working days after the
 13 regulation has been submitted to the office for ~~review~~. *review or*
 14 *60 working days for major regulations*. If the office fails to act
 15 within ~~30 days~~, *the the specified time*, the regulation shall be
 16 deemed to have been approved and the office shall transmit it to
 17 the Secretary of State for filing.

18 (b) *For major regulations, the office shall hold a public hearing*
 19 *on the submitted regulation within 30 working days after the*
 20 *regulation has been submitted to the office for review. The office*
 21 *shall allow for public testimony and comment before the office*
 22 *acts on the regulation.*

23 ~~(b)~~

24 (c) If the office disapproves a regulation, it shall return it to the
 25 adopting agency within the ~~30-day period~~ *time* specified in
 26 subdivision (a) accompanied by a notice specifying the reasons
 27 for disapproval. Within seven calendar days of the issuance of the
 28 notice, the office shall provide the adopting agency with a written
 29 decision detailing the reasons for disapproval. *If one of the reasons*
 30 *for disapproval includes a significant cost-of-living impact, the*
 31 *office shall then require the agency to pursue a less costly*
 32 *alternative or explain in detail why a less costly alternative is*
 33 *infeasible*. No regulation shall be disapproved except for failure
 34 to comply with the standards set forth in Section 11349.1 or for
 35 failure to comply with this chapter.

36 ~~(e)~~

37 (d) If an agency determines, on its own initiative, that a
 38 regulation submitted pursuant to subdivision (a) should be returned
 39 by the office prior to completion of the office’s review, it may
 40 request the return of the regulation. All requests for the return of

1 a regulation shall be memorialized in writing by the submitting
2 agency no later than one week following the request. Any
3 regulation returned pursuant to this subdivision shall be resubmitted
4 to the office for review within the one-year period specified in
5 subdivision (b) of Section 11346.4 or shall comply with Article 5
6 (commencing with Section 11346) prior to resubmission.
7 ~~(d)~~
8 (e) The office shall not initiate the return of a regulation pursuant
9 to subdivision ~~(e)~~ (d) as an alternative to disapproval pursuant to
10 subdivision ~~(b)~~ (c).

MEMORANDUM

DATE	April 10, 2026
TO	Legislative and Regulatory Affairs Committee Members
FROM	Cynthia Whitney, Central Services Manager
SUBJECT	Agenda Item 5(d)(4) - SB 934 (Wiener) Sexual orientation or gender identity change efforts: actions for recovery of damages; statute of limitations

Background

Senate Bill 934 (SB 934) was introduced on January 29, 2026, by Senator Scott Wiener.

This bill expresses the Legislature's intent to enact legislation that would provide individuals harmed by sexual orientation or gender identity change efforts performed by licensed mental health providers with additional time to seek civil remedies for those harms. Under existing law, engaging in sexual orientation change efforts with a patient under 18 years of age is considered unprofessional conduct and subject to disciplinary action by the provider's licensing board.

The Board of Psychology (Board) is monitoring this bill because it relates directly to sexual orientation change efforts by licensed mental health providers, which are regulated as unprofessional conduct and fall within the Board's disciplinary authority.

Action Requested

This item is for informational purposes only. There is no action required at this time.

Attachment #1: Bill Text – [Weblink](#)

Introduced by Senator Wiener

(Principal coauthor: Assembly Member Lee)

(Coauthors: Senators Cabaldon, Cervantes, Durazo, Gonzalez, Laird, Menjivar, Padilla, Pérez, Smallwood-Cuevas, and Wahab)

(Coauthors: Assembly Members Bauer-Kahan, Bonta, Elhawary, Mark González, Haney, Jackson, Solache, Ward, Wilson, and Zbur)

January 29, 2026

An act relating to healing arts.

LEGISLATIVE COUNSEL'S DIGEST

SB 934, as introduced, Wiener. Sexual orientation change efforts: remedies.

Existing law prohibits a mental health provider, as defined, from engaging in sexual orientation change efforts, as defined, with a patient under 18 years of age. Existing law provides that any sexual orientation change efforts attempted on a patient under 18 years of age by a mental health provider shall be considered unprofessional conduct and shall subject the provider to discipline by the provider's licensing entity.

This bill would state the intent of the Legislature to enact legislation that would provide individuals who have been harmed by sexual orientation or gender identity change efforts by licensed mental health providers to have adequate time to seek civil remedies.

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

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

- 1 SECTION 1. It is the intent of the Legislature to enact
- 2 legislation that would provide individuals who have been harmed

- 1 by sexual orientation or gender identity change efforts by licensed
- 2 mental health providers with adequate time to seek civil remedies
- 3 for the harms they have suffered.

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MEMORANDUM

DATE	April 10, 2026
TO	Legislative and Regulatory Affairs Committee Members
FROM	Cynthia Whitney, Central Services Manager
SUBJECT	Agenda Item 5(d)(5) SB 1146 (Gonzalez) Advertisement claims; health-related consumer products and services: artificial intelligence

Background

Senate Bill 1146 (SB 1146) was introduced on February 18, 2026, by Senator Lena Gonzalez.

The bill would require advertisements promoting health-related consumer products or services that use the image, audio, or video of a natural person that is generated or substantially altered using artificial intelligence (AI) or other computer technology to include a clear and conspicuous disclosure indicating that the media was generated or altered by AI. The bill establishes requirements for how disclosures must appear in visual and audio media and authorizes enforcement actions to be brought by the Attorney General or a district attorney in a civil action.

The Board of Psychology (Board) is monitoring this bill because it pertains to advertising requirements related to health-related products or services, which may intersect with advertising and public communications by healing arts licensees, including psychologists.

Action Requested

This item is for informational purposes only. There is no action required at this time.

Attachment #1: Bill Text – [Weblink](#)

Introduced by Senator GonzalezFebruary 18, 2026

An act to add Section 651.4 to the Business and Professions Code, relating to advertisements.

LEGISLATIVE COUNSEL'S DIGEST

SB 1146, as introduced, Gonzalez. Health-related consumer products and services: artificial intelligence.

Existing law makes it unlawful for any person doing business in California and advertising to consumers in California to make any false or misleading advertising claim.

Existing law makes it unlawful for healing arts licensees, as specified, to disseminate or cause to be disseminated any form of public communication containing a false, fraudulent, misleading, or deceptive statement, claim, or image in order to induce the provision of services or products in connection with their licensed professional practice or business. Existing law makes a violation of these provisions punishable as a misdemeanor.

This bill would require an advertisement that uses the image, audio, or video of a natural person that is generated or substantially altered using artificial intelligence or other computer technology to promote the sale of a health-related consumer product or service to include a clear and conspicuous disclosure that the image, audio, or video, as applicable, of the person in the advertisement was generated or substantially altered by artificial intelligence. The bill would also define terms for its purposes.

This bill would require actions for relief brought pursuant to this bill to be prosecuted exclusively by the Attorney General or a district

attorney in the name of the people of the State of California, and would provide that a violation of the bill does not constitute a misdemeanor.

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 651.4 is added to the Business and
2 Professions Code, to read:

3 651.4. (a) For purposes of this section, the following
4 definitions apply:

5 (1) “Artificial intelligence” means an engineered or
6 machine-based system that varies in its level of autonomy and that
7 can, for explicit or implicit objectives, infer from the input it
8 receives how to generate outputs that can influence physical or
9 virtual environments.

10 (2) (A) “Generated or substantially altered using artificial
11 intelligence or other computer technology” means when visual or
12 audio media of a natural person is either of the following:

13 (i) Entirely created using artificial intelligence or other computer
14 technology and would appear to a reasonable person to be
15 authentic.

16 (ii) Materially altered by artificial intelligence or other computer
17 technology and that alteration would cause a reasonable person to
18 have a fundamentally different understanding of the altered media
19 when comparing it to an unaltered version.

20 (B) Any visual or audio media of a natural person is not
21 “generated or substantially altered using artificial intelligence or
22 other computer technology” if the media is immaterially altered
23 by artificial intelligence or other computer technology, including
24 a cosmetic adjustment, color edit, cropped image, or resized image.

25 (3) “Health-related consumer product or service” means a
26 product or service that is marketed for use primarily for personal,
27 family, or household purposes, and is marketed as having a health
28 benefit. Examples include, but are not limited to, dietary
29 supplements and medical goods and services.

30 (4) “Natural person” means a natural human individual, and
31 does not include a firm, partnership, association, corporation,
32 limited liability company, or cooperative association.

1 (b) An advertisement that uses the image, audio, or video of a
2 natural person that is generated or substantially altered using
3 artificial intelligence or other computer technology to promote the
4 sale of a health-related consumer product or service shall include
5 a clear and conspicuous disclosure that the image, audio, or video,
6 as applicable, of the person in the advertisement was generated or
7 substantially altered by artificial intelligence, and shall comply
8 with all of the following:

9 (1) For visual media, the text of the disclosure shall appear in
10 a prominent location and in a size that is easily readable by the
11 average viewer. For visual media that is video, that disclosure shall
12 be displayed for the duration of the video.

13 (2) For audio-only media, the disclosure shall be read in a clearly
14 spoken manner and in a pitch that can be easily heard by the
15 average listener, at the beginning of the audio, at the end of the
16 audio, and, if the audio is greater than two minutes in length,
17 interspersed within the audio at intervals of not greater than two
18 minutes each.

19 (c) Advertisements subject to this section shall comply with all
20 other applicable state and federal laws. This section does not
21 abrogate, narrow, or otherwise limit any other applicable state or
22 federal law. This section does not authorize use of a person's
23 likeness for commercial purposes without the individual's consent.

24 (d) (1) Actions for relief pursuant to this section may be
25 prosecuted exclusively in a court of competent jurisdiction in a
26 civil action brought in the name of the people of the State of
27 California by the Attorney General or by any district attorney. This
28 section shall not be deemed to create a private right of action, or
29 limit any existing private right of action.

30 (2) A violation of this section shall not constitute a misdemeanor
31 for purposes of this article.

32 (3) This section does not alter or negate any rights, obligations,
33 or immunities of an interactive computer service provider under
34 Section 230 of Title 47 of the United States Code.

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MEMORANDUM

DATE	April 10, 2026
TO	Legislative and Regulatory Affairs Committee Members
FROM	Cynthia Whitney, Central Services Manager
SUBJECT	Agenda Item 5(d)(6) - SB 1159 (Cabaldon) Artificial intelligence: transparency and governance

Background

Senate Bill 1159 (SB 1159) was introduced on February 18, 2026, by Senator Christopher Cabaldon.

The bill would clarify that, for purposes of several California transparency and governance laws—including the California Public Records Act, Bagley-Keene Open Meeting Act, Ralph M. Brown Act, Administrative Procedure Act, Political Reform Act of 1974, and the California Environmental Quality Act—terms such as “person,” “interested person,” “participant,” and “member of the public” do not include artificial intelligence (AI) systems, autonomous agents, robots, or other nonhuman entities. The bill states that these laws are intended to enable participation by natural persons and legally recognized entities and seeks to prevent automated AI systems from overwhelming governmental processes through mass submissions or automated engagement.

The Board of Psychology (Board) is monitoring this bill because it affects statutes governing public participation, rulemaking processes, and public records requests, including the Administrative Procedure Act and Bagley-Keene Open Meeting Act, which apply to boards within the Department of Consumer Affairs.

Action Requested

This item is for informational purposes only. There is no action required at this time.

Attachment #1: Bill Text – [Weblink](#)

Introduced by Senator CabaldonFebruary 18, 2026

An act to add Section 17.5 to the Government Code, relating to artificial intelligence.

LEGISLATIVE COUNSEL'S DIGEST

SB 1159, as introduced, Cabaldon. Artificial intelligence: transparency and governance.

The California Constitution provides that people have the right of access to information concerning the conduct of the people's business. Various provisions of existing law, including the California Public Records Act, the Bagley-Keene Open Meeting Act, and the Ralph M. Brown Act, provide, with some exceptions, for public access to government records and meetings of government bodies. Among those acts, the California Public Records Act defines "person" to include any natural person, corporation, partnership, limited liability company, firm, or association.

Existing law, the Political Reform Act of 1974, imposes various requirements and limitations with respect to the conduct of public officials, campaign expenditures and disclosures, political advertisements, lobbying, the ballot pamphlet, and other aspects of political reform. The act defines "person" to mean an individual, proprietorship, firm, partnership, joint venture, syndicate, business trust, company, corporation, limited liability company, association, committee, and any other organization or group of persons acting in concert.

Existing law, the Administrative Procedure Act, governs, among other things, the procedures for the adoption, amendment, or repeal of regulations by state agencies and for the review of those regulatory actions by the Office of Administrative Law.

Existing law, the California Environmental Quality Act (CEQA), requires a lead agency, as defined, to prepare, or cause to be prepared, and certify the completion of an environmental impact report on a project that it proposes to carry out or approve that may have a significant effect on the environment or to adopt a negative declaration if it finds that the project will not have that effect. CEQA defines “person” to include any person, firm, association, organization, partnership, business, trust, corporation, limited liability company, company, district, county, city and county, city, town, and, among other things, the state.

This bill would specify that, for purposes of the California Public Records Act, the Bagley-Keene Open Meeting Act, the Ralph M. Brown Act, the Political Reform Act of 1974, the Administrative Procedure Act, and CEQA, “person,” “interested person,” “participant,” “member of the public,” as applicable, and any other similar terms under each act referring to those who may engage with governmental agencies, do not include artificial intelligence, as defined, systems, autonomous agents, robots, or other nonhuman entities, whether physical or digital. The bill would make findings and declarations related to these provisions.

The California Constitution requires local agencies, for the purpose of ensuring public access to the meetings of public bodies and the writings of public officials and agencies, to comply with a statutory enactment that amends or enacts laws relating to public records or open meetings and contains findings demonstrating that the enactment furthers the constitutional requirements relating to this purpose.

This bill would make legislative findings to that effect.

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

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

1 SECTION 1. (a) (1) Subdivision (b) of Section 3 of Article
2 1 of the California Constitution establishes that “the people have
3 the right of access to information concerning the conduct of the
4 people’s business.” California’s transparency and governance laws,
5 including the Administrative Procedure Act (Chapter 3.5
6 (commencing with Section 11340) Chapter 4 (commencing with
7 Section 11370), Chapter 4.5 (commencing with Section 11400),
8 and Chapter 5 (commencing with Section 11500) of Part 1 of

1 Division 3 of Title 2 of the Government Code), the Bagley-Keene
2 Open Meeting Act (Article 9 (commencing with Section 11120)
3 of Chapter 1 of Part 1 of Division 3 of Title 2 of the Government
4 Code), the California Environmental Quality Act (Division 13
5 (commencing with Section 21000) of the Public Resources Code),
6 the California Public Records Act (Division 10 (commencing with
7 Section 7920.000) of Title 1 of the Government Code), the Political
8 Reform Act of 1974 (Title 9 (commencing with Section 81000)
9 of the Government Code), and the Ralph M. Brown Act (Chapter
10 9 (commencing with Section 54950) of Part 1 of Division 2 of
11 Title 5 of the Government Code), implement this constitutional
12 mandate by enabling natural persons to participate in and observe
13 governmental processes.

14 (2) Artificial intelligence (AI) systems can now be programmed
15 to automatically and continuously engage with governmental
16 processes at scales and speeds that far exceed human capacity. AI
17 systems have the ability to submit thousands or millions of
18 automated public records requests, generate mass public comments
19 on proposed regulations, file automated petitions for rulemaking,
20 or otherwise flood governmental agencies with interactions that
21 simulate human participation but lack genuine human deliberation
22 or judgment.

23 (3) Automated mass engagement would overwhelm government
24 agencies, divert limited public resources from serving actual
25 constituents, drown out genuine human participation, and transform
26 deliberative processes into meaningless exchanges with machines.
27 Public comment periods would become ineffective if agencies
28 must process thousands of AI-generated submissions, and the
29 administrative burden would undermine the purpose of California's
30 transparency laws. This threat is not theoretical. In the United
31 Kingdom, AI-powered platforms have already enabled automated
32 generation of planning objections, prompting warnings from
33 experts that such systems will overwhelm public agencies.

34 (4) California's transparency and governance laws referenced
35 in paragraph (1) presuppose participants who possess
36 consciousness, moral agency, deliberative judgment, and
37 membership in the political community. AI systems, regardless of
38 their sophistication, lack these essential attributes of personhood.
39 Consistent with the United States Patent and Trademark Office's
40 November 2025 guidance recognizing that AI systems are tools

1 to support human activity rather than independent actors, and with
2 the European Union’s AI Act adopted in 2024 protecting the
3 fundamental rights of natural persons, California law maintains
4 the distinction between human beings and artificial intelligence.

5 (b) Therefore, it is the intent of the Legislature to clarify that,
6 for purposes of California’s transparency and governance laws
7 referenced in subdivision (a), the terms “person,” “interested
8 person,” “member of the public,” and any other similar terms
9 referring to those who may engage with governmental agencies
10 under those laws, refer to natural persons and legally recognized
11 entities capable of genuine participation in democratic governance,
12 not AI systems that could be programmed to simulate participation
13 at scales that would overwhelm governmental processes.

14 SEC. 2. Section 17.5 is added to the Government Code, to read:

15 17.5. (a) For purposes of all of the following acts, the terms
16 “person,” “interested person,” “participant,” “member of the
17 public,” as applicable, and any other similar terms under each act
18 referring to those who may engage with governmental agencies,
19 do not include artificial intelligence systems, autonomous agents,
20 robots, or other nonhuman entities, whether physical or digital:

21 (1) The California Public Records Act (Division 10
22 commencing with Section 7920.000) of Title 1).

23 (2) The Bagley-Keene Open Meeting Act (Article 9
24 commencing with Section 11120) of Chapter 1 of Part 1 of
25 Division 3 of Title 2).

26 (3) The Administrative Procedure Act (Chapter 3.5
27 commencing with Section 11340) Chapter 4 (commencing with
28 Section 11370), Chapter 4.5 (commencing with Section 11400),
29 and Chapter 5 (commencing with Section 11500) of Part 1 of
30 Division 3 of Title 2).

31 (4) The Ralph M. Brown Act (Chapter 9 (commencing with
32 Section 54950) of Part 1 of Division 2 of Title 5).

33 (5) The Political Reform Act of 1974 (Title 9 (commencing
34 with Section 81000)).

35 (6) The California Environmental Quality Act (Division 13
36 commencing with Section 21000) of the Public Resources Code).

37 (b) For purposes of this section, “artificial intelligence” means
38 an engineered or machine-based system that varies in its level of
39 autonomy and that can, for explicit or implicit objectives, infer

1 from the input it receives how to generate outputs that can influence
2 physical or virtual environments.

3 SEC. 3. The Legislature finds and declares that Section 2 of
4 this act, which adds Section 17.5 to the Government Code, furthers,
5 within the meaning of paragraph (7) of subdivision (b) of Section
6 3 of Article I of the California Constitution, the purposes of that
7 constitutional section as it relates to the right of public access to
8 the meetings of local public bodies or the writings of local public
9 officials and local agencies. Pursuant to paragraph (7) of
10 subdivision (b) of Section 3 of Article I of the California
11 Constitution, the Legislature makes the following findings:

12 The clarification made by this act serves the public interest by
13 preserving the integrity and functionality of California's democratic
14 institutions, preventing automated systems from displacing genuine
15 human participation, protecting public resources from being
16 consumed by responding to machine-generated requests, and
17 ensuring that governmental decisions remain responsive to the
18 people of California.

MEMORANDUM

DATE	April 10, 2026
TO	Legislative and Regulatory Affairs Committee Members
FROM	Cynthia Whitney, Central Services Manager
SUBJECT	Agenda Item 5(d)(7) - AB 1598 (Quirk-Silva) Behavioral sciences

Background

Assembly Bill 1598 (AB 1598) was introduced on January 16, 2026, by Assemblymember Sharon Quirk-Silva.

Existing law requires the Board of Behavioral Sciences (BBS) to regulate individuals licensed or registered under the Licensed Marriage and Family Therapist Act (LMFTA), the Clinical Social Worker Practice Act (CSWPA), and the Licensed Professional Clinical Counselor Act (LPCCA), with violations considered crimes. These acts currently have differing exemptions for certain medical professionals and other behavioral science professionals, attorneys, and certain religious personnel.

This bill would revise and recast those provisions to make them consistent across those three acts.

Specifically, the bill would provide that LMFTA, the CSWPA, and the LPCCA do not prevent qualified members of other professional groups, including those referenced above, from doing work of a psychosocial nature consistent with the standards, ethics, and scope of practice of their respective professions. The bill would prohibit those other professionals from stating or implying that they are licensed or registered under the LMFTA, the CSWPA, or the LPCCA, as specified.

The bill also exempts a religious official of any denomination, when providing faith-based counseling as part of their regular duties for a recognized faith-based organization, subject to certain criteria.

The bill includes additional related provisions.

The Board of Psychology (Board) is monitoring this bill because it pertains to “psychosocial” and “psychotherapy”. At this time, the bill does not directly impact the Board’s licensees, but staff will continue monitoring for potential impacts.

Action Requested

This item is for informational purposes only. There is no action required at this time.

Attachment #1: Bill Text – [Weblink](#)

AMENDED IN ASSEMBLY MARCH 18, 2026

CALIFORNIA LEGISLATURE—2025–26 REGULAR SESSION

ASSEMBLY BILL

No. 1598

Introduced by Assembly Member Quirk-Silva

January 16, 2026

An act to amend Sections 4980.01, 4980.397, 4980.399, 4980.40, 4980.41, 4980.43, 4980.50, 4984.01, 4984.7, 4984.72, 4989.20, 4989.68, 4992.05, 4992.09, 4992.1, 4996.1, 4996.3, 4996.4, 4996.13, 4996.23, 4996.28, 4999.22, 4999.46, 4999.50, 4999.52, 4999.53, 4999.55, 4999.64, 4999.100, and 4999.120 of, and to repeal Sections 4980.398, 4992.07, and 4999.46.1 of, the Business and Professions Code, relating to healing arts.

LEGISLATIVE COUNSEL'S DIGEST

AB 1598, as amended, Quirk-Silva. Behavioral sciences.

Existing law establishes the Board of Behavioral Sciences within the Department of Consumer Affairs and requires the board to regulate licensees and registrants under the Licensed Marriage and Family Therapist Act (LMFTA), the Educational Psychologist Practice Act (EPPA), the Clinical Social Worker Practice Act (CSWPA), and the Licensed Professional Clinical Counselor Act (LPCCA). Existing law makes a violation of those acts a crime.

The LMFTA, the CSWPA, and the LPCCA each contain varying provisions limiting their application to the practice of certain medical and other behavioral science professionals, attorneys, and certain religious personnel, including priests, rabbis, and ministers of the gospel of any religious denomination.

This bill would revise and recast those provisions to make them consistent across those 3 acts. Specifically, the bill would provide that

LMFTA, the CSWPA, and the LPCCA do not prevent qualified members of other professional groups, including those referenced above, from doing work of a psychosocial nature consistent with the standards, ethics, and scope of practice of their respective professions. The bill would prohibit those other professionals from stating or implying that they are licensed or registered under the LMFTA, the CSWPA, or the LPCCA, as specified. The bill would exempt a religious official of any denomination, including those specified above and imams, when providing faith-based counseling services as part of their regular professional duties for an established and legally recognizable faith-based entity if certain criteria are met.

Existing law establishes examination and experiential requirements under the LMFTA, the EPPA, the CSWPA, and the LPCCA to qualify for licensure or registration under those acts, and requires an applicant for licensure or registration to have passed certain examinations or obtain specified experience within a certain timeline for it to be accepted by the board. In this regard, existing law generally requires the applicant to gain the required experience no more than 6 years before the board receives the application. For licensed educational psychologists, the EPPA authorizes the board to accept a passing score on a written examination administered by the board for a period of 6 years from the date the examination was taken. Under the LMFTA, the CSWPA, and the LPCCA, registrants and applicants for licensure, registration, or a subsequent registration number are required to pass a California law and ethics examination. The LMFTA, the CSWPA, and the LPCCA require an applicant for licensure to pass a clinical examination within 7 years from the initial attempt, unless the applicant obtains a passing score on the current version of the California law and ethics examination.

This bill, instead, would require applicants for licensure under the LMFTA, the EPPA, the CSWPA, and the LPCCA, to obtain the relevant experience and to pass the relevant examination within 7 years preceding the date on which the board receives the application. The bill would require those applicants and registrants under the LMFTA, the CSWPA, and the LPCCA who submit applications to the board on and after January 1, 2030, to have passed the California law and ethics examination no more than 7 years before the board receives the application, as specified.

Existing law authorizes an associate marriage and family therapist registration, an associate clinical social worker registration, or an associate professional clinical counselor registration to be renewed a

maximum of 5 times and prohibits a registration from being renewed beyond 6 years from the last day of the month of issuance. Existing law authorizes an applicant to apply for a subsequent registration number when no renewals are possible if certain requirements are met. Existing law prohibits an applicant who is issued a subsequent associate registration number from being employed or volunteering in a private practice.

This bill would increase the maximum number of renewals for those registrations to 6 and would extend the renewal deadline to 7 years from the last day of the month of issuance. The bill would authorize an applicant applying for or holding a subsequent associate registration number to request a 2-year hardship extension of the subsequent associate registration number to allow them to be employed or volunteer at one private practice or professional *corporation* employer, subject to specified conditions and requirements, including signing an application under penalty of perjury. By expanding the crime of perjury, the bill would impose a state-mandated local program.

Existing law establishes a \$20 fee for rescoring a written examination under the LMFTA, the EPPA, the CSWPA, and the LPCCA.

This bill would delete that fee.

This bill would delete obsolete provisions and make other technical and nonsubstantive changes.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes.

State-mandated local program: yes.

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

- 1 SECTION 1. Section 4980.01 of the Business and Professions
- 2 Code is amended to read:
- 3 4980.01. (a) Nothing in this chapter shall prevent qualified
- 4 members of other professional groups from doing work of a
- 5 psychosocial nature consistent with the standards, ethics, and scope
- 6 of practice of their respective professions. However, ~~they~~ *these*
- 7 *qualified members* shall not hold themselves out to the public by
- 8 any title or description of services incorporating the words

1 ~~psychosocial, psychotherapy, or marriage and family therapist,~~
2 ~~“psychosocial,” “psychotherapy,” or “marriage and family~~
3 ~~therapist,”~~ and shall not state or imply that they are licensed or
4 registered to practice marriage and family therapy. These qualified
5 members of other professional groups include, but are not limited
6 to, the following:

7 (1) A physician and surgeon certified pursuant to Chapter 5
8 (commencing with Section 2000).

9 (2) A registered nurse licensed pursuant to Chapter 6
10 (commencing with Section 2700).

11 (3) A psychologist licensed pursuant to Chapter 6.6
12 (commencing with Section 2900).

13 (4) Members of the State Bar.

14 (5) Educational psychologists licensed pursuant to Chapter 13.5
15 (commencing with Section 4989.10).

16 (6) Clinical social workers licensed pursuant to Chapter 14
17 (commencing with Section 4991).

18 (7) Licensed professional clinical counselors pursuant to Chapter
19 16 (commencing with Section 4999.10).

20 (b) This chapter shall not be construed to constrict, limit, or
21 withdraw the Medical Practice Act (Chapter 5 (commencing with
22 Section 2000)), the Clinical Social Worker Practice Act (Chapter
23 14 (commencing with Section 4991)), the Nursing Practice Act
24 (Chapter 6 (commencing with Section 2700)), the Licensed
25 Professional Clinical Counselor Act (Chapter 16 (commencing
26 with Section 4999.10)), or the Psychology Licensing Law (Chapter
27 6.6 (commencing with Section 2900)).

28 (c) This chapter shall not apply to any priest, rabbi, imam, or
29 minister of the gospel, or other religious official of any
30 denomination when providing faith-based counseling services as
31 part of their regular professional duties for an established and
32 legally recognizable faith-based entity, such as a church,
33 synagogue, mosque, or other recognized religious organization,
34 provided that all of the following criteria are met.

35 (1) The services are performed solely under the direct auspices
36 of that faith-based entity.

37 (2) A separate fee, beyond their customary compensation from
38 that faith-based entity, is not charged or received.

39 (3) They do not hold themselves out to the public by any title
40 or description of services incorporating the words ~~psychosocial,~~

1 ~~psychotherapy, or marriage and family therapist, “psychosocial,”~~
2 ~~“psychotherapy,” or “marriage and family therapist,”~~ and shall
3 not state or imply that they are licensed or registered to practice
4 marriage and family therapy.

5 (4) The services provided are limited to counseling services
6 provided in a religious or spiritual context and do not involve the
7 diagnosis or treatment of mental health disorders.

8 (d) This chapter shall not apply to an unlicensed or unregistered
9 employee or volunteer working in a governmental entity, a school,
10 a college, a university, or an institution that is both nonprofit and
11 charitable if both of the following apply:

12 (1) The work of the employee or volunteer is performed under
13 the oversight and direction of the entity.

14 (2) (A) On and after July 1, 2020, the employee or volunteer
15 provides a client, prior to initiating psychotherapy services or as
16 soon as practicably possible thereafter, a notice written in at least
17 12-point type that is in substantially the following form:

18
19 NOTICE TO CLIENTS

20 The (name of office or unit) of the (name of agency) receives
21 and responds to complaints regarding the practice of psychotherapy
22 by any unlicensed or unregistered practitioner providing services
23 at (name of agency). To file a complaint, contact (telephone
24 number, email address, internet website, or mailing address of
25 agency).

26 The Board of Behavioral Sciences receives and responds to
27 complaints regarding services provided by individuals licensed
28 and registered by the board. If you have a complaint and are unsure
29 if your practitioner is licensed or registered, please contact the
30 Board of Behavioral Sciences at 916-574-7830 for assistance or
31 utilize the board’s online license verification feature by visiting
32 www.bbs.ca.gov.

33
34 (B) The delivery of the notice described in subparagraph (A)
35 to the client shall be documented.

36 (e) A marriage and family therapist licensed under this chapter
37 is a licentiate for purposes of paragraph (2) of subdivision (a) of
38 Section 805, and thus is a health care provider subject to the
39 provisions of Section 2290.5 pursuant to subdivision (b) of that
40 section.

1 (f) Notwithstanding subdivisions (c) and (d), all persons
2 registered as associates or licensed under this chapter shall not be
3 exempt from this chapter or the jurisdiction of the board.

4 SEC. 2. Section 4980.397 of the Business and Professions
5 Code is amended to read:

6 4980.397. (a) A registrant or an applicant for licensure as a
7 marriage and family therapist shall pass the following two
8 examinations as prescribed by the board:

9 (1) A California law and ethics examination.

10 (2) A clinical examination administered by the board or by a
11 public or private organization, as specified by the board in
12 regulations.

13 (b) The board shall grant eligibility to take the California law
14 and ethics examination upon approval of an application for
15 registration or an application for licensure, and submission of the
16 required application and fee.

17 (c) The board may grant an applicant for licensure eligibility to
18 take the clinical examination only upon meeting all of the following
19 requirements:

20 (1) Completion of all required supervised work experience.

21 (2) Completion of all education requirements.

22 (3) Passage of the California law and ethics examination.

23 SEC. 3. Section 4980.398 of the Business and Professions
24 Code is repealed.

25 SEC. 4. Section 4980.399 of the Business and Professions
26 Code is amended to read:

27 4980.399. (a) Each applicant and registrant shall obtain a
28 passing score on a board-administered California law and ethics
29 examination in order to qualify for licensure. The California law
30 and ethics examination shall be passed no more than seven years
31 prior to the board's receipt of the application for initial license
32 issuance.

33 (b) If an applicant fails the California law and ethics
34 examination, they may retake the examination after any waiting
35 period specified in regulation, upon payment of the required fees
36 and submission of a reexamination application.

37 (c) The board shall not issue a subsequent associate registration
38 number unless the applicant has passed the California law and
39 ethics examination no more than seven years prior to the board's

1 receipt of the application for the subsequent associate registration
2 number.

3 (d) Notwithstanding any other provision of law, the seven-year
4 age limit on the California law and ethics examination shall not
5 apply to any application for initial license issuance or subsequent
6 associate registration number received by the board on or before
7 January 1, 2030.

8 (e) A registrant shall complete a minimum of three hours of
9 continuing education on the subject of California law and ethics
10 during each renewal period to be eligible to renew their registration.
11 The coursework shall be obtained from a board-accepted provider
12 of continuing education, as specified in Section 4980.54.

13 SEC. 5. Section 4980.40 of the Business and Professions Code
14 is amended to read:

15 4980.40. An applicant for licensure shall satisfy all of the
16 following qualifications:

17 (a) Meet the educational requirements of Section 4980.36 or
18 both Sections 4980.37 and 4980.41, as applicable.

19 (b) Be at least 18 years of age.

20 (c) Have at least two years of supervised experience as specified
21 in this chapter and its corresponding regulations.

22 (d) Successfully pass a California law and ethics examination
23 and a clinical examination, as specified in Section 4980.397. Each
24 examination shall be passed no more than seven years prior to the
25 board's receipt of the application for initial license issuance.

26 (e) Not be subject to denial of licensure under Section 480. The
27 board shall not issue a registration or license to any person who
28 has been convicted of a crime in this or another state or in a
29 territory of the United States that involves sexual abuse of children
30 or who is required to register pursuant to Section 290 of the Penal
31 Code or the equivalent in another state or territory, in accordance
32 with Section 480.

33 SEC. 6. Section 4980.41 of the Business and Professions Code
34 is amended to read:

35 4980.41. (a) An applicant for licensure whose education
36 qualifies them under Section 4980.37 shall complete the following
37 coursework or training in order to be eligible to sit for the clinical
38 examination as specified in Section 4980.397:

39 (1) A two semester or three quarter unit course in California
40 law and professional ethics for marriage and family therapists,

1 which shall include, but not be limited to, the following areas of
2 study:

3 (A) Contemporary professional ethics and statutory, regulatory,
4 and decisional laws that delineate the profession's scope of
5 practice.

6 (B) The therapeutic, clinical, and practical considerations
7 involved in the legal and ethical practice of marriage and family
8 therapy, including family law.

9 (C) The current legal patterns and trends in the mental health
10 profession.

11 (D) The psychotherapist-patient privilege, confidentiality, the
12 patient dangerous to self or others, and the treatment of minors
13 with and without parental consent.

14 (E) A recognition and exploration of the relationship between
15 a practitioner's sense of self and human values and their
16 professional behavior and ethics.

17 This course may be considered as part of the 48 semester or 72
18 quarter unit requirements contained in Section 4980.37.

19 (2) A minimum of seven contact hours of training or coursework
20 in child abuse assessment and reporting as specified in Section 28
21 and any regulations promulgated thereunder.

22 (3) A minimum of 10 contact hours of training or coursework
23 in human sexuality as specified in Section 25, and any regulations
24 promulgated thereunder. When coursework in a master's or
25 doctor's degree program is acquired to satisfy this requirement, it
26 shall be considered as part of the 48 semester or 72 quarter unit
27 requirement contained in Section 4980.37.

28 (4) For persons who began graduate study on or after January
29 1, 1986, a master's or doctor's degree qualifying for licensure shall
30 include specific instruction in alcoholism and other chemical
31 substance dependency as specified by regulation. When coursework
32 in a master's or doctor's degree program is acquired to satisfy this
33 requirement, it shall be considered as part of the 48 semester or
34 72 quarter unit requirement contained in Section 4980.37.
35 Coursework required under this paragraph may be satisfactory if
36 taken either in fulfillment of other educational requirements for
37 licensure or in a separate course. The applicant may satisfy this
38 requirement by successfully completing this coursework from a
39 master's or doctoral degree program at an accredited or approved
40 institution, as described in subdivision (b) of Section 4980.37, or

1 from a board-accepted provider of continuing education, as
2 described in Section 4980.54.

3 (5) For persons who began graduate study during the period
4 commencing on January 1, 1995, and ending on December 31,
5 2003, a master's or doctor's degree qualifying for licensure shall
6 include coursework in spousal or partner abuse assessment,
7 detection, and intervention. For persons who began graduate study
8 on or after January 1, 2004, a master's or doctor's degree qualifying
9 for licensure shall include a minimum of 15 contact hours of
10 coursework in spousal or partner abuse assessment, detection, and
11 intervention strategies, including knowledge of community
12 resources, cultural factors, and same gender abuse dynamics.
13 Coursework required under this paragraph may be satisfactory if
14 taken either in fulfillment of other educational requirements for
15 licensure or in a separate course. The applicant may satisfy this
16 requirement by successfully completing this coursework from a
17 master's or doctoral degree program at an accredited or approved
18 institution, as described in subdivision (b) of Section 4980.37, or
19 from a board-accepted provider of continuing education, as
20 described in Section 4980.54.

21 (6) For persons who began graduate study on or after January
22 1, 2001, an applicant shall complete a minimum of a two semester
23 or three quarter unit survey course in psychological testing. When
24 coursework in a master's or doctor's degree program is acquired
25 to satisfy this requirement, it may be considered as part of the 48
26 semester or 72 quarter unit requirement of Section 4980.37.

27 (7) For persons who began graduate study on or after January
28 1, 2001, an applicant shall complete a minimum of a two semester
29 or three quarter unit survey course in psychopharmacology. When
30 coursework in a master's or doctor's degree program is acquired
31 to satisfy this requirement, it may be considered as part of the 48
32 semester or 72 quarter unit requirement of Section 4980.37.

33 (b) The requirements added by paragraphs (6) and (7) of
34 subdivision (a) are intended to improve the educational
35 qualifications for licensure in order to better prepare future
36 licentiates for practice and are not intended in any way to expand
37 or restrict the scope of practice for licensed marriage and family
38 therapists.

39 SEC. 7. Section 4980.43 of the Business and Professions Code
40 is amended to read:

1 4980.43. (a) Except as provided in subdivision (b), all
2 applicants shall have an active associate registration with the board
3 in order to gain postdegree hours of supervised experience.

4 (b) (1) Postdegree hours of experience gained before the
5 issuance of an associate registration shall be credited toward
6 licensure if all of the following apply:

7 (A) The registration applicant applies for the associate
8 registration and the board receives the application within 90 days
9 of the granting of the qualifying master's degree or doctoral degree.

10 (B) For applicants completing graduate study on or after January
11 1, 2020, the experience is obtained at a workplace that, prior to
12 the registration applicant gaining supervised experience hours,
13 requires completed Live Scan fingerprinting. The applicant shall
14 provide the board with a copy of that completed State of California
15 "Request for Live Scan Service" form with the application for
16 licensure.

17 (C) The board subsequently grants the associate registration.

18 (2) The applicant shall not be employed or volunteer in a private
19 practice or a professional corporation until the applicant has been
20 issued an associate registration by the board.

21 (c) Supervised experience that is obtained for purposes of
22 qualifying for licensure shall be related to the practice of marriage
23 and family therapy and comply with the following:

24 (1) A minimum of 3,000 hours completed during a period of at
25 least 104 weeks.

26 (2) A maximum of 40 hours in any seven consecutive days.

27 (3) A minimum of 1,700 hours obtained after the qualifying
28 master's or doctoral degree was awarded.

29 (4) A maximum of 1,300 hours obtained prior to the award date
30 of the qualifying master's or doctoral degree.

31 (5) A maximum of 750 hours of counseling and direct supervisor
32 contact prior to the award date of the qualifying master's or
33 doctoral degree.

34 (6) Hours of experience shall not be gained prior to completing
35 either 12 semester units or 18 quarter units of graduate instruction.

36 (7) Hours of experience shall not have been gained more than
37 seven years prior to the date the application for licensure was
38 received by the board, except that up to 500 hours of clinical
39 experience gained in the supervised practicum required by
40 subdivision (c) of Section 4980.37 and subparagraph (B) of

1 paragraph (1) of subdivision (d) of Section 4980.36 shall be exempt
2 from this seven-year requirement.

3 (8) A minimum of 1,750 hours of direct clinical counseling with
4 individuals, groups, couples, or families, that includes not less than
5 500 total hours of experience in diagnosing and treating couples,
6 families, and children.

7 (9) A maximum of 1,200 hours gained under the supervision
8 of a licensed educational psychologist providing educationally
9 related mental health services that are consistent with the scope
10 of practice of an educational psychologist, as specified in Section
11 4989.14.

12 (10) A maximum of 1,250 hours of nonclinical practice,
13 consisting of direct supervisor contact, administering and
14 evaluating psychological tests, writing clinical reports, writing
15 progress or process notes, client-centered advocacy, and
16 workshops, seminars, training sessions, or conferences directly
17 related to marriage and family therapy that have been approved
18 by the applicant's supervisor.

19 (11) It is anticipated and encouraged that hours of experience
20 will include working with elders and dependent adults who have
21 physical or mental limitations that restrict their ability to carry out
22 normal activities or protect their rights.

23 This subdivision shall only apply to hours gained on and after
24 January 1, 2010.

25 SEC. 8. Section 4980.50 of the Business and Professions Code
26 is amended to read:

27 4980.50. (a) Every applicant who meets the educational and
28 experience requirements and applies for a license as a marriage
29 and family therapist shall be examined by the board. The
30 examinations shall be as set forth in Section 4980.397 and as
31 specified in regulation. The examinations shall be given at least
32 twice a year at a time and place and under supervision as the board
33 may determine. The board shall examine the candidate with regard
34 to the candidate's knowledge and professional skills and judgment
35 in the utilization of appropriate techniques and methods.

36 (b) The board shall not deny any applicant who has submitted
37 a complete application for examination, admission to the licensure
38 examinations required by this section if the applicant meets the
39 educational and experience requirements of this chapter, and has

1 not committed any acts or engaged in any conduct that would
2 constitute grounds to deny licensure.

3 (c) The board shall not deny any applicant, whose application
4 for licensure is complete, admission to the clinical examination,
5 nor shall the board postpone or delay any applicant’s clinical
6 examination, solely upon the receipt by the board of a complaint
7 alleging acts or conduct that would constitute grounds to deny
8 licensure.

9 (d) If an applicant for examination who has passed the California
10 law and ethics examination is the subject of a complaint or is under
11 board investigation for acts or conduct that, if proven to be true,
12 would constitute grounds for the board to deny licensure, the board
13 shall permit the applicant to take the clinical examination for
14 licensure, but may notify the applicant that licensure will not be
15 granted pending completion of the investigation.

16 (e) Notwithstanding Section 135, the board may deny any
17 applicant who has previously failed either the California law and
18 ethics examination or the clinical examination permission to retake
19 either examination pending completion of the investigation of any
20 complaints against the applicant. Nothing in this section shall
21 prohibit the board from denying an applicant admission to any
22 examination or refusing to issue a license to any applicant when
23 an accusation or statement of issues has been filed against the
24 applicant pursuant to Sections 11503 and 11504 of the Government
25 Code, respectively, or the applicant has been denied in accordance
26 with subdivision (b) of Section 485.

27 (f) Notwithstanding any other provision of law, the board may
28 destroy all examination materials two years following the date of
29 an examination.

30 (g) The clinical examination shall be passed no more than seven
31 years prior to the board’s receipt of the application for initial
32 license issuance.

33 (h) An applicant for licensure who has qualified pursuant to this
34 chapter shall be issued a license as a marriage and family therapist
35 in the form that the board deems appropriate.

36 SEC. 9. Section 4984.01 of the Business and Professions Code
37 is amended to read:

38 4984.01. (a) The associate marriage and family therapist
39 registration shall expire one year from the last day of the month
40 in which it was issued.

1 (b) To renew the registration, subject to the additional limitations
2 imposed by subdivision (d), the registrant shall, on or before the
3 expiration date of the registration, complete all of the following
4 actions:

5 (1) Apply for renewal on a form prescribed by the board.

6 (2) Pay a renewal fee prescribed by the board.

7 (3) Notify the board whether they have been convicted, as
8 defined in Section 490, of a misdemeanor or felony, and whether
9 any disciplinary action has been taken against them by a regulatory
10 or licensing board in this or any other state subsequent to the last
11 renewal of the registration.

12 (4) Certify under penalty of perjury their compliance with the
13 continuing education requirements set forth in Section 4980.54.

14 (c) An expired registration may be renewed by completing all
15 of the actions described in paragraphs (1) to (4), inclusive, of
16 subdivision (b).

17 (d) The registration may be renewed a maximum of six times.
18 No registration shall be renewed or reinstated beyond seven years
19 from the last day of the month during which it was issued,
20 regardless of whether it has been revoked. When no further
21 renewals are possible, an applicant may apply for and obtain a
22 subsequent associate registration number if the applicant meets
23 the educational requirements for a subsequent associate registration
24 number and has passed the California law and ethics examination
25 no more than seven years prior to the board's receipt of the
26 application for the subsequent associate registration number.

27 (e) An applicant who is issued a subsequent associate
28 registration number pursuant to subdivision (d) shall not be
29 employed or volunteer in a private practice.

30 (f) Notwithstanding subdivision (e), an applicant applying for
31 or who currently holds a subsequent associate registration number
32 may request that the board grant them a one-time,
33 two-consecutive-year hardship extension to allow them to be
34 employed or volunteer at one private practice or professional
35 corporation employer with their subsequent associate registration
36 ~~number.~~ *number in accordance with the following:*

37 (1) An associate shall not be issued more than one extension.

38 (2) The extension is only valid for the one private practice or
39 professional corporation employer for which it is requested.

- 1 (3) Work for the employer shall not commence or continue until
- 2 the extension is approved by the board.
- 3 (4) The application shall be jointly signed under penalty of
- 4 perjury and dated by the associate, the supervisor, and, if the
- 5 supervisor is not employed by the supervisee’s employer or is a
- 6 volunteer, a representative of the employer.
- 7 (5) The board shall grant the extension provided that the
- 8 application is signed, all information required is provided, and
- 9 good cause is demonstrated. The application shall contain all of
- 10 the following:
 - 11 (A) The date the extension is needed to commence or continue
 - 12 work for the employer.
 - 13 (B) The name of the employer where the associate will be
 - 14 gaining hours.
 - 15 (C) An attestation that the employer is a private practice or a
 - 16 professional corporation.
 - 17 (D) The name, license type, and license number of the current
 - 18 supervisor.
 - 19 (E) A showing of good cause for the applicant being unable to
 - 20 complete the licensure process within seven years. Good cause
 - 21 may include, but is not limited to, extended medical leave, family
 - 22 caregiving responsibilities, difficulties finding employment, or
 - 23 circumstances beyond the applicant’s control.
 - 24 (F) A description of the plan for the associate to gain the needed
 - 25 hours toward licensure during the two-year extension period.
- 26 SEC. 10. Section 4984.7 of the Business and Professions Code
- 27 is amended to read:
 - 28 4984.7. The board shall assess the following fees relating to
 - 29 the licensure of marriage and family therapists:
 - 30 (a) The application fee for an associate registration shall be one
 - 31 hundred fifty dollars (\$150). The board may adopt regulations to
 - 32 set the fee at a higher amount, up to a maximum of three hundred
 - 33 dollars (\$300).
 - 34 (b) The annual renewal fee for an associate registration shall be
 - 35 one hundred fifty dollars (\$150). The board may adopt regulations
 - 36 to set the fee at a higher amount, up to a maximum of three hundred
 - 37 dollars (\$300).
 - 38 (c) The fee for the application for licensure shall be two hundred
 - 39 fifty dollars (\$250). The board may adopt regulations to set the

1 fee at a higher amount, up to a maximum of five hundred dollars
2 (\$500).

3 (d) (1) (A) The fee for the board-administered clinical
4 examination, if the board chooses to adopt this examination in
5 regulations, shall be two hundred fifty dollars (\$250). The board
6 may adopt regulations to set the fee at a higher amount, up to a
7 maximum of five hundred dollars (\$500). If the board chooses to
8 adopt an examination administered by a public or private
9 organization, as specified by the board in regulations, then the
10 examination fee shall be determined by, and paid directly to, that
11 organization.

12 (B) The fee for the California law and ethics examination shall
13 be one hundred fifty dollars (\$150). The board may adopt
14 regulations to set the fee at a higher amount, up to a maximum of
15 three hundred dollars (\$300).

16 (2) An applicant who fails to appear for an examination, after
17 having been scheduled to take the examination, shall forfeit the
18 examination fee.

19 (3) The amount of the examination fees shall be based on the
20 actual cost to the board of developing, purchasing, and grading
21 each examination and the actual cost to the board of administering
22 each examination. The examination fees shall be adjusted
23 periodically by regulation to reflect the actual costs incurred by
24 the board.

25 (e) The fee for the issuance of an initial license shall be two
26 hundred dollars (\$200). The board may adopt regulations to set
27 the fee at a higher amount, up to a maximum of four hundred
28 dollars (\$400).

29 (f) The fee for the two-year license renewal shall be two hundred
30 dollars (\$200). The board may adopt regulations to set the fee at
31 a higher amount, up to a maximum of four hundred dollars (\$400).

32 (g) The renewal delinquency fee shall be one-half of the fee for
33 license renewal. A person who permits their license to expire is
34 subject to the delinquency fee.

35 (h) The fee for issuance of a replacement registration, license,
36 or certificate shall be twenty dollars (\$20).

37 (i) The fee for issuance of a certificate or letter of good standing
38 shall be twenty-five dollars (\$25).

39 (j) The fee for issuance of a retired license shall be forty dollars
40 (\$40).

1 SEC. 11. Section 4984.72 of the Business and Professions
2 Code is amended to read:

3 4984.72. An applicant who fails the clinical examination may,
4 within one year from the notification date of that failure, retake
5 the examination as regularly scheduled without further application
6 upon payment of the fee for the examination. Thereafter, the
7 applicant shall not be eligible for further examination until they
8 file a new application, meet all requirements in effect on the date
9 of application, and pay all required fees.

10 SEC. 12. Section 4989.20 of the Business and Professions
11 Code is amended to read:

12 4989.20. (a) The board may issue a license as an educational
13 psychologist if the applicant satisfies, with proof satisfactory to
14 the board, the following requirements:

15 (1) Possession of, at minimum, a master's degree in psychology,
16 educational psychology, school psychology, counseling and
17 guidance, or a degree deemed equivalent by the board. This degree
18 shall be obtained from an educational institution approved by the
19 board according to the regulations adopted under this chapter.

20 (2) Attainment of 18 years of age.

21 (3) Is not subject to denial of licensure pursuant to Section 480.

22 (4) Successful completion of 60 semester units or 90 quarter
23 units of postgraduate study in pupil personnel services.

24 (5) Two school terms of full-time, or the equivalent to full-time,
25 experience as a licensed or credentialed school psychologist in the
26 public schools or in another school setting as specified in
27 regulations. The experience shall be gained over a period of at
28 least two school terms. The applicant shall not be credited with
29 experience obtained more than seven years immediately preceding
30 the date on which the application for licensure was received by
31 the board.

32 (6) If the experience required by paragraph (5) was completed
33 while holding a California credential in a school located in
34 California, completion of one of the following:

35 (A) A minimum of 1,200 hours of supervised professional
36 experience in an accredited school psychology program.

37 (B) One school term of full-time, or the equivalent to full-time,
38 experience as a California credentialed school psychologist in the
39 California public schools, or in another school setting as specified
40 in regulations, obtained under the direction of a California-licensed

1 educational psychologist. The experience shall be gained over a
2 period of at least one school term. The applicant shall not be
3 credited with experience obtained more than seven years
4 immediately preceding the date on which the application for
5 licensure was received by the board.

6 (7) If the experience required by paragraph (5) was not
7 completed while holding a California credential in a school located
8 in California, completion of one of the following:

9 (A) A minimum of 1,200 hours of supervised professional
10 experience gained in California in an accredited school psychology
11 program, gained no more than seven years immediately preceding
12 the date on which the application for licensure was received by
13 the board.

14 (B) One school term of full-time, or the equivalent to full-time,
15 experience as a California credentialed school psychologist in the
16 California public schools, or in another school setting as specified
17 in regulations, obtained under the direction of a California licensed
18 educational psychologist. The experience shall be gained over a
19 period of at least one school term. The applicant shall not be
20 credited with experience obtained more than seven years
21 immediately preceding the date on which the application for
22 licensure was received by the board.

23 (8) Passage of the licensed educational psychologist written
24 examination administered by the board. This examination shall be
25 passed no more than seven years prior to the board's receipt of the
26 application for initial license issuance.

27 (b) For purposes of this section, the following definitions apply:

28 (1) "Full time" means the days or hours of creditable service
29 the employer requires to be performed by the employee in a school
30 term under their collective bargaining agreement or employment
31 agreement. It shall consist of a minimum of 175 days, or 1,050
32 hours, per school term.

33 (2) "Equivalent to full time" means the days or hours of
34 creditable service that a person who is employed on a part-time
35 basis would be required to perform in a school term if they were
36 employed full time in that part-time position.

37 (3) "School term" means a minimum period of 35 weeks
38 beginning the first day and ending the last day creditable service
39 is required to be performed by a member employed on a full-time
40 basis, excluding any period that has been excluded pursuant to a

1 publicly available written contractual agreement. The school term
 2 shall also be the same for an individual who is not employed on a
 3 full-time basis who is performing the same duties as a member
 4 employed on a full-time basis.

5 SEC. 13. Section 4989.68 of the Business and Professions
 6 Code is amended to read:

7 4989.68. The board shall assess the following fees relating to
 8 the licensure of educational psychologists:

9 (a) The application fee for licensure shall be two hundred fifty
 10 dollars (\$250). The board may adopt regulations to set the fee at
 11 a higher amount, up to a maximum of five hundred dollars (\$500).

12 (b) The fee for issuance of the initial license shall be two
 13 hundred dollars (\$200). The board may adopt regulations to set
 14 the fee at a higher amount, up to a maximum of four hundred
 15 dollars (\$400).

16 (c) The fee for the two-year license renewal shall be two hundred
 17 dollars (\$200). The board may adopt regulations to set the fee at
 18 a higher amount, up to a maximum of four hundred dollars (\$400).

19 (d) The delinquency fee shall be one-half of the fee for license
 20 renewal. A person who permits their license to expire shall be
 21 subject to the delinquency fee.

22 (e) The written examination fee shall be two hundred fifty
 23 dollars (\$250). The board may adopt regulations to set the fee at
 24 a higher amount, up to a maximum of five hundred dollars (\$500).

25 An applicant who fails to appear for an examination, once having
 26 been scheduled, shall forfeit any examination fees they paid.

27 (f) The fee for issuance of a replacement registration, license,
 28 or certificate shall be twenty dollars (\$20).

29 (g) The fee for issuance of a certificate or letter of good standing
 30 shall be twenty-five dollars (\$25).

31 (h) The fee for issuance of a retired license shall be forty dollars
 32 (\$40).

33 SEC. 14. Section 4992.05 of the Business and Professions
 34 Code is amended to read:

35 4992.05. (a) A registrant or an applicant for licensure as a
 36 clinical social worker shall pass the following two examinations
 37 as prescribed by the board:

- 38 (1) A California law and ethics examination.
- 39 (2) A clinical examination.

1 (b) The board shall grant eligibility to take the California law
2 and ethics examination upon approval of an application for
3 registration or an application for licensure, and submission of the
4 required application and fee.

5 (c) The board may grant an applicant for licensure eligibility to
6 take the clinical examination only upon meeting all of the following
7 requirements:

8 (1) Completion of all education requirements.

9 (2) Passage of the California law and ethics examination.

10 (3) Completion of all required supervised work experience.

11 SEC. 15. Section 4992.07 of the Business and Professions
12 Code is repealed.

13 SEC. 16. Section 4992.09 of the Business and Professions
14 Code is amended to read:

15 4992.09. (a) Each applicant and registrant shall obtain a
16 passing score on a board-administered California law and ethics
17 examination in order to qualify for licensure. The California law
18 and ethics examination shall be passed no more than seven years
19 prior to the board's receipt of the application for initial license
20 issuance.

21 (b) If an applicant fails the California law and ethics
22 examination, they may retake the examination after any waiting
23 period as specified in regulation, upon payment of the required
24 fees and submission of a reexamination application.

25 (c) The board shall not issue a subsequent associate registration
26 number unless the applicant has passed the California law and
27 ethics examination no more than seven years prior to the board's
28 receipt of the application for the subsequent associate registration
29 number.

30 (d) Notwithstanding any other provision of law, the seven-year
31 age limit on the California law and ethics examination shall not
32 apply to any application for initial license issuance or subsequent
33 associate registration number received by the board on or before
34 January 1, 2030.

35 (e) A registrant shall complete a minimum of three hours of
36 continuing education on the subject of California law and ethics
37 during each renewal period to be eligible to renew their registration.
38 The coursework shall be obtained from a board-accepted provider
39 of continuing education, as specified in Section 4996.22.

1 SEC. 17. Section 4992.1 of the Business and Professions Code
2 is amended to read:

3 4992.1. (a) Only individuals who have the qualifications
4 prescribed by the board under this chapter are eligible to take an
5 examination under this chapter.

6 (b) Every applicant who is issued a clinical social worker license
7 shall be examined by the board.

8 (c) Notwithstanding any other provision of law, the board may
9 destroy all examination materials two years following the date of
10 an examination.

11 (d) The board shall not deny any applicant, whose application
12 for licensure is complete, admission to the clinical examination,
13 nor shall the board postpone or delay any applicant's clinical
14 examination, solely upon the receipt by the board of a complaint
15 alleging acts or conduct that would constitute grounds to deny
16 licensure.

17 (e) If an applicant for examination who has passed the California
18 law and ethics examination is the subject of a complaint or is under
19 board investigation for acts or conduct that, if proven to be true,
20 would constitute grounds for the board to deny licensure, the board
21 shall permit the applicant to take the clinical examination for
22 licensure, but may notify the applicant that licensure will not be
23 granted pending completion of the investigation.

24 (f) Notwithstanding Section 135, the board may deny any
25 applicant who has previously failed either the California law and
26 ethics examination or the clinical examination permission to retake
27 either examination pending completion of the investigation of any
28 complaint against the applicant. Nothing in this section shall
29 prohibit the board from denying an applicant admission to any
30 examination, or refusing to issue a license to any applicant when
31 an accusation or statement of issues has been filed against the
32 applicant pursuant to Section 11503 or 11504 of the Government
33 Code, or the applicant has been denied in accordance with
34 subdivision (b) of Section 485.

35 (g) The clinical examination shall be passed no more than seven
36 years prior to the board's receipt of the application for initial
37 license issuance.

38 SEC. 18. Section 4996.1 of the Business and Professions Code
39 is amended to read:

1 4996.1. The board shall issue a clinical social worker license
2 to each applicant who qualifies pursuant to this article and who
3 successfully passes a California law and ethics examination and
4 a clinical examination. Each examination shall be passed no more
5 than seven years prior to the board's receipt of the application for
6 initial license issuance.

7 SEC. 19. Section 4996.3 of the Business and Professions Code
8 is amended to read:

9 4996.3. The board shall assess the following fees relating to
10 the licensure of clinical social workers:

11 (a) The application fee for registration as an associate clinical
12 social worker shall be one hundred fifty dollars (\$150). The board
13 may adopt regulations to set the fee at a higher amount, up to a
14 maximum of three hundred dollars (\$300).

15 (b) The fee for annual renewal of an associate clinical social
16 worker registration shall be one hundred fifty dollars (\$150). The
17 board may adopt regulations to set the fee at a higher amount, up
18 to a maximum of three hundred dollars (\$300).

19 (c) The fee for application for licensure shall be two hundred
20 fifty dollars (\$250). The board may adopt regulations to set the
21 fee at a higher amount, up to a maximum of five hundred dollars
22 (\$500).

23 (d) (1) (A) The fee for the board-administered clinical
24 examination, if the board chooses to adopt this examination in
25 regulations, shall be two hundred fifty dollars (\$250). The board
26 may adopt regulations to set the fee at a higher amount, up to a
27 maximum of five hundred dollars (\$500).

28 (B) The fee for the California law and ethics examination shall
29 be one hundred fifty dollars (\$150). The board may adopt
30 regulations to set the fee at a higher amount, up to a maximum of
31 three hundred dollars (\$300).

32 (2) An applicant who fails to appear for an examination, after
33 having been scheduled to take the examination, shall forfeit the
34 examination fees.

35 (3) The amount of the examination fees shall be based on the
36 actual cost to the board of developing, purchasing, and grading
37 each examination and the actual cost to the board of administering
38 each examination. The written examination fees shall be adjusted
39 periodically by regulation to reflect the actual costs incurred by
40 the board.

1 (e) The fee for issuance of an initial license shall be two hundred
 2 dollars (\$200). The board may adopt regulations to set the fee at
 3 a higher amount, up to a maximum of four hundred dollars (\$400).

4 (f) The fee for the two-year license renewal shall be two hundred
 5 dollars (\$200). The board may adopt regulations to set the fee at
 6 a higher amount, up to a maximum of four hundred dollars (\$400).

7 (g) The renewal delinquency fee shall be one-half of the fee for
 8 license renewal. A person who permits their license to expire shall
 9 be subject to the delinquency fee.

10 (h) The fee for issuance of a replacement registration, license,
 11 or certificate shall be twenty dollars (\$20).

12 (i) The fee for issuance of a certificate or letter of good standing
 13 shall be twenty-five dollars (\$25).

14 (j) The fee for issuance of a retired license shall be forty dollars
 15 (\$40).

16 SEC. 20. Section 4996.4 of the Business and Professions Code
 17 is amended to read:

18 4996.4. An applicant who fails the clinical examination may,
 19 within one year from the notification date of failure, retake that
 20 examination as regularly scheduled, without further application,
 21 upon payment of the required examination fees. Thereafter, the
 22 applicant shall not be eligible for further examination until they
 23 file a new application, meet all current requirements, and pay all
 24 required fees.

25 SEC. 21. Section 4996.13 of the Business and Professions
 26 Code is amended to read:

27 4996.13. (a) Nothing in this article shall prevent qualified
 28 members of other professional groups from doing work of a
 29 psychosocial nature consistent with the standards, ethics, and scope
 30 of practice of their respective professions. However, ~~they~~ *these*
 31 *qualified members* shall not hold themselves out to the public by
 32 any title or description of services incorporating the words
 33 ~~psychosocial, psychotherapy, or clinical social worker,~~
 34 *“psychosocial,” “psychotherapy,” or “clinical social worker,”*
 35 and shall not state or imply that they are licensed or registered to
 36 practice clinical social work. These qualified members of other
 37 professional groups include, but are not limited to, the following:

38 (1) A physician and surgeon certified pursuant to Chapter 5
 39 (commencing with Section 2000).

1 (2) A registered nurse licensed pursuant to Chapter 6
2 (commencing with Section 2700).

3 (3) A psychologist licensed pursuant to Chapter 6.6
4 (commencing with Section 2900).

5 (4) Members of the State Bar.

6 (5) Marriage and family therapists licensed pursuant to Chapter
7 13 (commencing with Section 4980).

8 (6) Educational psychologists licensed pursuant to Chapter 13.5
9 (commencing with Section 4989.10).

10 (7) Licensed professional clinical counselors pursuant to Chapter
11 16 (commencing with Section 4999.10).

12 (b) This article shall not apply to any priest, rabbi, imam,
13 minister of the gospel, or other religious official of any
14 denomination when providing faith-based counseling services as
15 part of their regular professional duties for an established and
16 legally recognizable faith-based entity, such as a church,
17 synagogue, mosque, or other recognized religious organization,
18 provided that all of the following criteria are met:

19 (1) The services are performed solely under the direct auspices
20 of that faith-based entity.

21 (2) A separate fee, beyond their customary compensation from
22 that faith-based entity, is not charged or received.

23 (3) They do not hold themselves out to the public by any title
24 or description of services incorporating the words ~~psychosocial,~~
25 ~~psychotherapy,~~ or ~~clinical social worker,~~ “*psychosocial,*”
26 “*psychotherapy,*” or “*clinical social worker,*” and shall not state
27 or imply that they are licensed or registered to practice clinical
28 social work.

29 (4) The services provided are limited to counseling services
30 provided in a religious or spiritual context and do not involve the
31 diagnosis or treatment of mental health disorders.

32 SEC. 22. Section 4996.23 of the Business and Professions
33 Code is amended to read:

34 4996.23. (a) To qualify for licensure, each applicant shall
35 complete 3,000 hours of post-master’s degree supervised
36 experience related to the practice of clinical social work. Except
37 as provided in subdivision (b), experience shall not be gained until
38 the applicant is registered as an associate clinical social worker.

1 (b) Postdegree hours of experience gained before the issuance
2 of an associate registration shall be credited toward licensure if all
3 of the following apply:

4 (1) The registration applicant applies for the associate
5 registration and the board receives the application within 90 days
6 of the granting of the qualifying master's or doctoral degree.

7 (2) For applicants completing graduate study on or after January
8 1, 2020, the experience is obtained at a workplace that, prior to
9 the registration applicant gaining supervised experience hours,
10 requires completed Live Scan fingerprinting. The applicant shall
11 provide the board with a copy of that completed "State of
12 California Request for Live Scan Service" form with the
13 application for licensure.

14 (3) The board subsequently grants the associate registration.

15 (c) The applicant shall not be employed or volunteer in a private
16 practice or a professional corporation until the applicant has been
17 issued an associate registration by the board.

18 (d) The experience shall be as follows:

19 (1) (A) At least 1,700 hours shall be gained under the
20 supervision of a licensed clinical social worker. The remaining
21 required supervised experience may be gained under the
22 supervision of a physician and surgeon who is certified in
23 psychiatry by the American Board of Psychiatry and Neurology,
24 licensed professional clinical counselor, licensed marriage and
25 family therapist, psychologist licensed pursuant to Chapter 6.6
26 (commencing with Section 2900), licensed educational
27 psychologist, or licensed clinical social worker.

28 (B) A maximum of 1,200 hours gained under the supervision
29 of a licensed educational psychologist providing educationally
30 related mental health services that are consistent with the scope
31 of practice of an educational psychologist, as specified in Section
32 4989.14.

33 (2) A minimum of 2,000 hours in clinical psychosocial
34 diagnosis, assessment, and treatment, including psychotherapy or
35 counseling; however, at least 750 hours shall be face-to-face
36 individual or group psychotherapy provided in the context of
37 clinical social work services.

38 (3) A maximum of 1,000 hours in client-centered advocacy,
39 consultation, evaluation, research, direct supervisor contact, and
40 workshops, seminars, training sessions, or conferences directly

1 related to clinical social work that have been approved by the
2 applicant's supervisor.

3 (4) A minimum of two years of supervised experience is required
4 to be obtained over a period of not less than 104 weeks and shall
5 have been gained within the seven years immediately preceding
6 the date on which the application for licensure was received by
7 the board.

8 (5) No more than 40 hours of experience may be credited in
9 any seven consecutive days.

10 (6) For hours gained on or after January 1, 2010, no more than
11 six hours of supervision, whether individual, triadic, or group
12 supervision, shall be credited during any single week.

13 SEC. 23. Section 4996.28 of the Business and Professions
14 Code is amended to read:

15 4996.28. (a) Registration as an associate clinical social worker
16 shall expire one year from the last day of the month during which
17 it was issued. To renew a registration, subject to the additional
18 limitations imposed by subdivision (c), the registrant shall, on or
19 before the expiration date of the registration, complete all of the
20 following actions:

21 (1) Apply for renewal on a form prescribed by the board.

22 (2) Pay a renewal fee prescribed by the board.

23 (3) Notify the board whether they have been convicted, as
24 defined in Section 490, of a misdemeanor or felony, and whether
25 any disciplinary action has been taken by a regulatory or licensing
26 board in this or any other state, subsequent to the last renewal of
27 the registration.

28 (4) Certify under penalty of perjury their compliance with the
29 continuing education requirements set forth in Section 4996.22.

30 (b) An expired registration may be renewed by completing all
31 of the actions described in paragraphs (1) to (4), inclusive, of
32 subdivision (a).

33 (c) A registration as an associate clinical social worker may be
34 renewed a maximum of six times. No registration shall be renewed
35 or reinstated beyond seven years from the last day of the month
36 during which the registration was issued, regardless of whether
37 the registration has been revoked. When no further renewals are
38 possible, an applicant may apply for and obtain a subsequent
39 associate clinical social worker registration number if the applicant
40 meets all requirements for registration in effect at the time of their

1 application for a subsequent associate clinical social worker
2 registration number and has passed the California law and ethics
3 examination pursuant to Section 4992.09 no more than seven years
4 prior to the board’s receipt of the application for the subsequent
5 associate registration number.

6 (d) An applicant issued a subsequent associate registration
7 number pursuant to subdivision~~(d)~~ (c) shall not be employed or
8 volunteer in a private practice.

9 (e) Notwithstanding subdivision (d), an applicant applying for
10 or who currently holds a subsequent associate registration number
11 may request that the board grant them a one-time,
12 two-consecutive-year hardship extension to allow them to be
13 employed or volunteer at one private practice or professional
14 corporation employer with their subsequent associate registration
15 ~~number.~~ *number in accordance with the following:*

16 (1) An associate shall not be issued more than one extension.

17 (2) The extension is only valid for the one private practice or
18 professional corporation employer for which it is requested.

19 (3) Work for the employer shall not commence or continue until
20 the extension is approved by the board.

21 (4) The application shall be jointly signed under penalty of
22 perjury and dated by the associate, the supervisor, and, if the
23 supervisor is not employed by the supervisee’s employer or is a
24 volunteer, a representative of the employer.

25 (5) The board shall grant the extension provided that the
26 application is signed, all information required is provided, and
27 good cause is demonstrated. The application shall contain all of
28 the following:

29 (A) The date the extension is needed to commence or continue
30 work for the employer.

31 (B) The name of the employer where the associate will be
32 gaining hours.

33 (C) An attestation that the employer is a private practice or a
34 professional corporation.

35 (D) The name, license type, and license number of the current
36 supervisor.

37 (E) A showing of good cause for the applicant being unable to
38 complete the licensure process within seven years. Good cause
39 may include, but is not limited to, extended medical leave, family

1 caregiving responsibilities, difficulties finding employment, or
2 circumstances beyond the applicant’s control.

3 (F) A description of the plan for the associate to gain the needed
4 hours toward licensure during the two-year extension period.

5 SEC. 24. Section 4999.22 of the Business and Professions
6 Code is amended to read:

7 4999.22. (a) Nothing in this chapter shall prevent qualified
8 members of the other professional groups from doing work of a
9 psychosocial nature consistent with the standards, ethics, and scope
10 of practice of their respective professions. However, these qualified
11 ~~persons~~ *members* shall not hold themselves out to the public by
12 any title or description of services incorporating the words
13 “psychosocial,” “psychotherapy,” or “professional clinical
14 counselor” and shall not state that they are licensed or registered
15 to practice professional clinical counseling. ~~Qualified These~~
16 *qualified* members of other professional groups include, but are
17 not limited to, the following:

18 (1) A physician and surgeon certified pursuant to Chapter 5
19 (commencing with Section 2000).

20 (2) A registered nurse licensed pursuant to Chapter 6
21 (commencing with Section 2700).

22 (3) A psychologist licensed pursuant to Chapter 6.6
23 (commencing with Section 2900).

24 (4) Members of the State Bar.

25 (5) Marriage and family therapists licensed pursuant to Chapter
26 13 (commencing with Section 4980).

27 (6) Educational psychologists licensed pursuant to Chapter 13.5
28 (commencing with Section 4989.10).

29 (7) Clinical social workers licensed pursuant to Chapter 14
30 (commencing with Section 4991).

31 (b) This chapter shall not be construed to constrict, limit, or
32 withdraw ~~provisions~~ of the Medical Practice Act (Chapter 5
33 (commencing with Section 2000)), the Clinical Social Worker
34 Practice Act (Chapter 14 (commencing with Section 4991)), the
35 Nursing Practice Act (Chapter 6 (commencing with Section 2700)),
36 the Psychology Licensing Law (Chapter 6.6 (commencing with
37 Section 2900)), or the Licensed Marriage and Family Therapist
38 Act (Chapter 13 (commencing with Section 4980)).

39 (c) This chapter shall not apply to any priest, rabbi, imam,
40 minister of the gospel, or other religious official of any

1 denomination when providing faith-based counseling services as
2 part of their regular professional duties for an established and
3 legally recognizable faith-based entity, such as a church,
4 synagogue, mosque, or other recognized religious organization,
5 provided that all of the following criteria are met:

6 (1) The services are performed solely under the direct auspices
7 of that faith-based entity.

8 (2) A separate fee, beyond their customary compensation from
9 that faith-based entity, is not charged or received.

10 (3) They do not hold themselves out to the public by any title
11 or description of services incorporating the words ~~psychosocial,~~
12 ~~psychotherapy, or professional clinical counselor,~~ “*psychosocial,*”
13 “*psychotherapy,*” or “*professional clinical counselor,*” and shall
14 not state or imply that they are licensed or registered to practice
15 professional clinical counseling.

16 (4) The services provided are limited to counseling services
17 provided in a religious or spiritual context and do not involve the
18 diagnosis or treatment of mental health disorders.

19 (d) This chapter shall not apply to an unlicensed or unregistered
20 employee or volunteer working in a governmental entity, a school,
21 a college, a university, or an institution that is both nonprofit and
22 charitable, if both of the following apply:

23 (1) The work of the employee or volunteer is performed under
24 the oversight and direction of the entity.

25 (2) (A) On and after July 1, 2020, the employee or volunteer
26 provides a client, prior to initiating psychotherapy services or as
27 soon as practicably possible thereafter, a notice written in at least
28 12-point type that is in substantially the following form:

29

30 NOTICE TO CLIENTS

31 The (Name of office or unit) of the (Name of agency) receives
32 and responds to complaints regarding the practice of psychotherapy
33 by any unlicensed or unregistered practitioner providing services
34 at (Name of agency). To file a complaint, contact (Telephone
35 number, email address, internet website, or mailing address of
36 agency).

37 The Board of Behavioral Sciences receives and responds to
38 complaints regarding services provided by individuals licensed
39 and registered by the board. If you have a complaint and are unsure
40 if your practitioner is licensed or registered, please contact the

1 Board of Behavioral Sciences at 916-574-7830 for assistance or
2 utilize the board’s online license verification feature by visiting
3 www.bbs.ca.gov.

4

5 (B) The delivery of the notice described in subparagraph (A)
6 to the client shall be documented.

7 (e) Notwithstanding subdivisions (c) and (d), all persons
8 registered as associates or licensed under this chapter shall not be
9 exempt from this chapter or the jurisdiction of the board.

10 SEC. 25. Section 4999.46 of the Business and Professions
11 Code is amended to read:

12 4999.46. (a) Except as provided in subdivision (b), all
13 applicants shall have an active associate registration with the board
14 in order to gain postdegree hours of supervised experience. An
15 associate or applicant for licensure shall be under the supervision
16 of a supervisor at all times. An associate shall inform each client,
17 before performing any professional services, that the associate is
18 unlicensed and under supervision.

19 (b) (1) Postdegree hours of experience gained before the
20 issuance of an associate registration shall be credited toward
21 licensure if all of the following apply:

22 (A) The registration applicant applies for the associate
23 registration and the board receives the application within 90 days
24 of the granting of the qualifying master’s degree or doctoral degree.

25 (B) For applicants completing graduate study on or after January
26 1, 2020, the experience is obtained at a workplace that, prior to
27 the registration applicant gaining supervised experience hours,
28 requires completed Live Scan fingerprinting. The applicant shall
29 provide the board with a copy of that completed State of California
30 “Request for Live Scan Service” form with their application for
31 licensure.

32 (C) The board subsequently grants the associate registration.

33 (2) The applicant shall not be employed or volunteer in a private
34 practice or a professional corporation until they have been issued
35 an associate registration by the board.

36 (c) Supervised experience that is obtained for the purposes of
37 qualifying for licensure shall be related to the practice of
38 professional clinical counseling and comply with the following:

39 (1) A minimum of 3,000 postdegree hours performed over a
40 period of not less than two years (104 weeks).

1 (2) Not more than 40 hours in any seven consecutive days.

2 (3) Not less than 1,750 hours of direct clinical counseling with
3 individuals, groups, couples, or families using a variety of
4 psychotherapeutic techniques and recognized counseling
5 interventions.

6 (4) A maximum of 1,250 hours of nonclinical practice,
7 consisting of direct supervisor contact, administering and
8 evaluating psychological tests, writing clinical reports, writing
9 progress or process notes, client-centered advocacy, and
10 workshops, seminars, training sessions, or conferences directly
11 related to professional clinical counseling that have been approved
12 by the applicant’s supervisor.

13 (5) A maximum of 1,200 hours gained under the supervision
14 of a licensed educational psychologist providing educationally
15 related mental health services that are consistent with the scope
16 of practice of an educational psychologist, as specified in Section
17 4989.14.

18 (d) Experience hours shall not have been gained more than seven
19 years prior to the date the application for licensure was received
20 by the board.

21 SEC. 26. Section 4999.46.1 of the Business and Professions
22 Code is repealed.

23 SEC. 27. Section 4999.50 of the Business and Professions
24 Code is amended to read:

25 4999.50. (a) The board may issue a professional clinical
26 counselor license to any person who meets all of the following
27 requirements:

28 (1) They have received a master’s or doctoral degree described
29 in Section 4999.32 or 4999.33, as applicable.

30 (2) They have completed at least 3,000 hours of supervised
31 experience in the practice of professional clinical counseling.

32 (3) They provide evidence of a passing score, as determined by
33 the board, on the examinations designated in Section 4999.53.
34 Each examination shall be passed no more than seven years prior
35 to the board’s receipt of the application for initial license issuance.

36 (b) An applicant for licensure who has satisfied the requirements
37 of this chapter shall be issued a license as a professional clinical
38 counselor.

39 SEC. 28. Section 4999.52 of the Business and Professions
40 Code is amended to read:

1 4999.52. (a) Every applicant for a license as a professional
2 clinical counselor shall take one or more examinations, as
3 determined by the board, to ascertain their knowledge, professional
4 skills, and judgment in the utilization of appropriate techniques
5 and methods of professional clinical counseling.

6 (b) The examinations shall be given at least twice a year at a
7 time and place and under supervision as the board may determine.

8 (c) The board shall not deny any applicant admission to an
9 examination who has submitted a complete application for
10 examination admission if the applicant meets the educational and
11 experience requirements of this chapter and has not committed
12 any acts or engaged in any conduct that would constitute grounds
13 to deny licensure.

14 (d) The board shall not deny any applicant, whose application
15 for licensure is complete, admission to the clinical examination,
16 nor shall the board postpone or delay any applicant's clinical
17 examination, solely upon the receipt by the board of a complaint
18 alleging acts or conduct that would constitute grounds to deny
19 licensure.

20 (e) If an applicant for the examination specified by paragraph
21 (2) of subdivision (a) of Section 4999.53, who has passed the
22 California law and ethics examination, is the subject of a complaint
23 or is under board investigation for acts or conduct that, if proven
24 to be true, would constitute grounds for the board to deny licensure,
25 the board shall permit the applicant to take this examination, but
26 may notify the applicant that licensure will not be granted pending
27 completion of the investigation.

28 (f) Notwithstanding Section 135, the board may deny any
29 applicant who has previously failed either the California law and
30 ethics examination, or the examination specified by paragraph (2)
31 of subdivision (a) of Section 4999.53, permission to retake either
32 examination pending completion of the investigation of any
33 complaints against the applicant.

34 (g) Nothing in this section shall prohibit the board from denying
35 an applicant admission to any examination or refusing to issue a
36 license to any applicant when an accusation or statement of issues
37 has been filed against the applicant pursuant to Section 11503 or
38 11504 of the Government Code, respectively, or the application
39 has been denied in accordance with subdivision (b) of Section 485.

1 (h) Notwithstanding any other provision of law, the board may
2 destroy all examination materials two years following the date of
3 an examination.

4 (i) The clinical examination shall be passed no more than seven
5 years prior to the board’s receipt of the application for initial
6 license issuance.

7 SEC. 29. Section 4999.53 of the Business and Professions
8 Code is amended to read:

9 4999.53. (a) A registrant or an applicant for licensure as a
10 professional clinical counselor shall pass the following
11 examinations as prescribed by the board:

- 12 (1) A California law and ethics examination.
- 13 (2) A clinical examination administered by the board, or the
14 National Clinical Mental Health Counselor Examination if the
15 board finds that this examination meets the prevailing standards
16 for validation and use of the licensing and certification tests in
17 California.

18 ~~(3)~~

19 (b) The board shall grant eligibility to take the California law
20 and ethics examination upon approval of an application for
21 registration or an application for licensure and submission of the
22 required application and fee.

23 ~~(b)~~

24 (c) The board may grant an applicant for licensure eligibility to
25 take the clinical examination or the National Clinical Mental Health
26 Counselor Examination, as established by the board through
27 regulation, only upon meeting all of the following requirements:

- 28 (1) Completion of all required supervised work experience.
- 29 (2) Completion of all education requirements.
- 30 (3) Passage of the California law and ethics examination.

31 SEC. 30. Section 4999.55 of the Business and Professions
32 Code is amended to read:

33 4999.55. (a) Each applicant and registrant shall obtain a
34 passing score on a board-administered California law and ethics
35 examination in order to qualify for licensure. The California law
36 and ethics examination shall be passed no more than seven years
37 prior to the board’s receipt of the application for initial license
38 issuance.

39 (b) If an applicant fails the California law and ethics
40 examination, they may retake the examination after any waiting

1 period as specified in regulation upon payment of the required fees
2 and submission of a reexamination application.

3 (c) The board shall not issue a subsequent associate registration
4 number unless the applicant has passed the California law and
5 ethics examination no more than seven years prior to the board's
6 receipt of the application for the subsequent associate registration
7 number.

8 (d) Notwithstanding any other provision of law, the seven-year
9 age limit on the California law and ethics examination shall not
10 apply to any application for initial license issuance or subsequent
11 associate registration number received by the board on or before
12 January 1, 2030.

13 (e) A registrant shall complete a minimum of three hours of
14 continuing education ~~in~~ on the subject of California law and ethics
15 during each renewal period in order to be eligible to renew their
16 registration. The coursework shall be obtained from a
17 board-accepted provider of continuing education, as specified in
18 Section 4999.76.

19 SEC. 31. Section 4999.64 of the Business and Professions
20 Code is amended to read:

21 4999.64. An applicant who fails the examination specified in
22 paragraph (2) of subdivision (a) of Section 4999.53 may, within
23 one year from the notification date of that failure, retake the
24 examination as regularly scheduled without further application
25 upon payment of the fee for the examination. Thereafter, the
26 applicant shall not be eligible for further examination until they
27 file a new application, meet all requirements in effect on the date
28 of application, and pay all required fees.

29 SEC. 32. Section 4999.100 of the Business and Professions
30 Code is amended to read:

31 4999.100. (a) An associate registration shall expire one year
32 from the last day of the month in which it was issued.

33 (b) To renew a registration subject to the additional limitations
34 imposed by subdivision (d), the registrant, on or before the
35 expiration date of the registration, shall do the following:

36 (1) Apply for a renewal on a form prescribed by the board.

37 (2) Pay a renewal fee prescribed by the board.

38 (3) Notify the board whether they have been convicted, as
39 defined in Section 490, of a misdemeanor or felony, or whether
40 any disciplinary action has been taken by any regulatory or

1 licensing board in this or any other state, subsequent to the
2 registrant's last renewal.

3 (4) Certify under penalty of perjury their compliance with the
4 continuing education requirements set forth in Section 4999.76.

5 (c) An expired registration may be renewed by completing all
6 of the actions described in paragraphs (1) to (4), inclusive, of
7 subdivision (b).

8 (d) The associate registration may be renewed a maximum of
9 six times. Registration shall not be renewed or reinstated beyond
10 seven years from the last day of the month during which it was
11 issued, regardless of whether it has been revoked. When no further
12 renewals are possible, an applicant may apply for and obtain a
13 subsequent associate registration number if the applicant meets
14 the educational requirements for a subsequent associate registration
15 number and has passed the California law and ethics examination
16 described in Section 4999.53 no more than seven years prior to
17 the board's receipt of the application for the subsequent registration
18 number.

19 (e) An applicant who is issued a subsequent associate
20 registration number pursuant to subdivision (d) shall not be
21 employed or volunteer in a private practice.

22 (f) Notwithstanding subdivision (e), an applicant applying for
23 or who currently holds a subsequent associate registration number
24 may request that the board grant them a one-time,
25 two-consecutive-year hardship extension to allow them to be
26 employed or volunteer at one private practice or professional
27 corporation employer with their subsequent associate registration
28 number in accordance with the following:

29 (1) An associate shall not be issued more than one extension.

30 (2) The extension is only valid for the one private practice or
31 professional corporation employer for which it is requested.

32 (3) Work for the employer shall not commence or continue until
33 the extension is approved by the board.

34 (4) The application shall be jointly signed under penalty of
35 perjury and dated by the associate, the supervisor, and, if the
36 supervisor is not employed by the supervisee's employer or is a
37 volunteer, a representative of the employer.

38 (5) The board shall grant the extension provided that the
39 application is signed, all information required is provided, and

1 good cause is demonstrated. The application shall contain all of
2 the following:

3 (A) The date the extension is needed to commence or continue
4 work for the employer.

5 (B) The name of the employer where the associate will be
6 gaining hours.

7 (C) An attestation that the employer is a private practice or a
8 professional corporation.

9 (D) The name, license type, and license number of the current
10 supervisor.

11 (E) A showing of good cause for the applicant being unable to
12 complete the licensure process within seven years. Good cause
13 may include, but is not limited to, extended medical leave, family
14 caregiving responsibilities, difficulties finding employment, or
15 circumstances beyond the applicant's control.

16 (F) A description of the plan for the associate to gain the needed
17 hours toward licensure during the two-year extension period.

18 SEC. 33. Section 4999.120 of the Business and Professions
19 Code is amended to read:

20 4999.120. The board shall assess the following fees relating
21 to the licensure of professional clinical counselors:

22 (a) The fee for the application for licensure shall be two hundred
23 fifty dollars (\$250). The board may adopt regulations to set the
24 fee at a higher amount, up to a maximum of five hundred dollars
25 (\$500).

26 (b) The fee for the application for associate registration shall
27 be one hundred fifty dollars (\$150). The board may adopt
28 regulations to set the fee at a higher amount, up to a maximum of
29 three hundred dollars (\$300).

30 (c) (1) (A) The fee for the board-administered clinical
31 examination, if the board chooses to adopt this examination in
32 regulations, shall be two hundred fifty dollars (\$250). The board
33 may adopt regulations to set the fee at a higher amount, up to a
34 maximum of five hundred dollars (\$500).

35 (B) The fee for the California law and ethics examination shall
36 be one hundred fifty dollars (\$150). The board may adopt
37 regulations to set the fee at a higher amount, up to a maximum of
38 three hundred dollars (\$300).

1 (2) An applicant who fails to appear for an examination, after
2 having been scheduled to take the examination, shall forfeit the
3 examination fees.

4 (3) The amount of the examination fees shall be based on the
5 actual cost to the board of developing, purchasing, and grading
6 each examination and the actual cost to the board of administering
7 each examination. The written examination fees shall be adjusted
8 periodically by regulation to reflect the actual costs incurred by
9 the board.

10 (d) The fee for the issuance of a license shall be two hundred
11 dollars (\$200). The board may adopt regulations to set the fee at
12 a higher amount, up to a maximum of four hundred dollars (\$400).

13 (e) The fee for the annual renewal of an associate registration
14 shall be one hundred fifty dollars (\$150). The board may adopt
15 regulations to set the fee at a higher amount, up to a maximum of
16 three hundred dollars (\$300).

17 (f) The fee for the two-year license renewal shall be two hundred
18 dollars (\$200). The board may adopt regulations to set the fee at
19 a higher amount, up to a maximum of four hundred dollars (\$400).

20 (g) The renewal delinquency fee shall be one-half of the fee for
21 license renewal. A person who permits their license to expire shall
22 be subject to the delinquency fee.

23 (h) The fee for issuance of a retired license shall be forty dollars
24 (\$40).

25 (i) The fee for issuance of a replacement license or registration
26 shall be twenty dollars (\$20).

27 (j) The fee for issuance of a certificate or letter of good standing
28 shall be twenty-five dollars (\$25).

29 SEC. 34. No reimbursement is required by this act pursuant to
30 Section 6 of Article XIII B of the California Constitution because
31 the only costs that may be incurred by a local agency or school
32 district will be incurred because this act creates a new crime or
33 infraction, eliminates a crime or infraction, or changes the penalty
34 for a crime or infraction, within the meaning of Section 17556 of
35 the Government Code, or changes the definition of a crime within
36 the meaning of Section 6 of Article XIII B of the California
37 Constitution.

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MEMORANDUM

DATE	April 10, 2026
TO	Legislative and Regulatory Affairs Committee Members
FROM	Cynthia Whitney, Central Services Manager
SUBJECT	Agenda Item 7(a-g) – Status Review of Regulations in Development

The following is a list of the Board of Psychology’s (Board) regulatory packages, and their status in the rule-making process:

a) Update on 16 CCR sections 1395.2 – Disciplinary Guidelines and Uniform Standards Related to Substance-Abusing Licensees

Preparing Regulatory Package	Initial Departmental Review	Notice with OAL and Hearing	Notice of Modified Text and Hearing	Preparation of Final Documentation	Final Departmental Review	Submission to OAL for Review	OAL Approval and Board Implementation
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Initial Stage. This phase includes Agency approval for completed initial regulatory package. This phase also includes the public comment period of the proposed regulatory changes.

At its August 18, 2023, meeting, the Board voted to adopt proposed regulatory language amending the Disciplinary Guidelines, which were last amended in April 2015. The Board’s vote included amendments to the document incorporated by reference and the addition of uniform standards related to substance-abusing licensees. Following the Board’s adoption, the regulatory package underwent multiple reviews by Budget staff and Regulatory Counsel. Budget staff and Regulatory Counsel recommended that the Board review and adopt revised proposed regulatory text and the updated document incorporated by reference.

At the August 22, 2025, meeting, the Board reviewed the revised proposed regulatory text and updated document incorporated by reference and voted to refer the Disciplinary Guidelines to the Enforcement Committee for further review and additional revisions. The revised package was subsequently presented to the Board

at the November 6–7, 2025, Board Meeting. The Board voted to adopt the updated Disciplinary Guidelines.

On March 27, 2026, the regulatory package was approved by Agency and sent to OAL for approval of publishing. The regulatory package was approved for publishing by OAL on April 3, 2026. The 45-public comment period started on April 10th.

b) Title 16 CCR section 1396.8 – Standards of Practice for Telehealth Services

Preparing Regulatory Package	Initial Departmental Review	Notice with OAL and Hearing	Notice of Modified Text and Hearing	Preparation of Final Documentation	Final Departmental Review	Submission to OAL for Review	OAL Approval and Board Implementation
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In 2023, the Board conducted a Barriers to Telehealth survey. The surveys were sent to licensees who provide telehealth services and consumers. As a result of the survey, the Enforcement Committee was asked to review telehealth requirements (including Health Insurance Portability Accountability Act, Business and Professions Code Section 2290.5, and California Code of Regulations section 1396.8) to make sure licensees who are providing telehealth services are in compliance. The Enforcement Committee identified amendments to California Code of Regulations section 1396.8. At the February 27, 2025, Board Meeting, the Board adopted the revised proposed regulatory text.

The 45-day comment period concluded, and no adverse comments were received. The final regulation package was submitted to the Office of Administrative Law (OAL).

This package was approved by OAL on March 25, 2026, and will be effective July 1, 2026.

c) Update on 16 CCR sections 1380.6, 1393, 1396, 1396.1, 1396.2, 1396.4, 1396.5, 1397, 1397.1, 1397.2, 1397.35, 1397.37, 1397.39, 1397.50, 1397.51, 1397.52, 1397.53, 1397.54, 1397.55 - Enforcement Provisions

Preparing Regulatory Package	Initial Departmental Review	Notice with OAL and Hearing	Notice of Modified Text and Hearing	Preparation of Final Documentation	Final Departmental Review	Submission to OAL for Review	OAL Approval and Board Implementation
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Production Phase. This phase includes Board-approved text, and collaborative reviews by Board staff, Regulatory Counsel, and Budget staff to prepare the initial documents for submission to the Director and Agency.

In December 2022, the Board’s Enforcement Committee and staff completed a comprehensive review of enforcement-related provisions in Business and Professions Code sections 2902 through 2986. The review identified the need for technical and conforming amendments to align the Board’s regulations with current statutory language and enforcement practices.

Specifically, the proposed regulatory package would:

- Clarify that the term “licensee” includes both licensed psychologists and registered psychological associates.
- Remove gender-specific terminology and replace it with gender-neutral language.
- Update procedures related to petitions, modifications, and termination of probation to reflect current Board practices.

At its February 2–3, 2023 meeting, the Board voted to adopt the proposed regulatory text. In November 2025, Board staff, Regulatory Counsel, and Budget staff reconvened for a kick-off meeting to establish next steps. At that meeting, it was determined that the Enforcement Unit would review the previously Board-approved proposed text to assess whether updates are necessary. If revisions are warranted, Board staff will amend the proposed text and present to the Board for review.

d) Title 16 CCR sections 1381, 1387, 1387.10, 1388, 1388.6, 1389, and 1389.1 – Applications – Implementation of AB 282

Preparing Regulatory Package	Initial Departmental Review	Notice with OAL and Hearing	Notice of Modified Text and Hearing	Preparation of Final Documentation	Final Departmental Review	Submission to OAL for Review	OAL Approval and Board Implementation
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Drafting Phase. This phase includes drafting proposed regulatory text and collaborative reviews by Board staff, Budget staff, and Regulatory Counsel.

On May 19, 2023, the Board approved the statutory and regulatory changes that would implement the Examination for Professional Practice in Psychology (EPPP) part 2 Skills Exam, effective January 1, 2026, along with the Assembly Bill 282 (AB 282) (Aguiar-Curry, Ch. 45, Stat. of 2023) mandates that allow applicants as specified to take any and all examinations required for licensure. On May 10, 2024, Board approved amended regulatory language.

On October 22, 2024, the Association of State and Provincial Psychology Boards (ASPPB) paused the decision to make EPPP a two-part exam effective on January 1, 2026. Board staff paused the regulatory work related to implementing EPPP Part 2 based on this new development.

Board staff is currently working with Budget and Regulatory Counsel on a standalone regulatory package to implement the mandates of AB 282 and bring it to the Board for review and discussion at the August 22, 2025, Board meeting. With this change, the new anticipated implementation date has been updated to 2027.

Board staff is drafting the proposed text.

e) Title 16 CCR sections 1382, 1382.3-1382.5, and 1397.60.1-1397.70 – Research Psychoanalyst

Preparing Regulatory Package	Initial Departmental Review	Notice with OAL and Hearing	Notice of Modified Text and Hearing	Preparation of Final Documentation	Final Departmental Review	Submission to OAL for Review	OAL Approval and Board Implementation
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Drafting Phase. This phase includes drafting proposed regulatory text and collaborative reviews by Board staff, Budget staff, and Regulatory Counsel.

At its May 10, 2024, meeting, the Board voted to adopt the proposed regulatory text for Research Psychoanalysts. At its August 16, 2024, meeting, the Board adopted revised language.

On July 2, 2025, Senate Bill 775 (SB 775)—the Board’s Sunset Bill—incorporated the Board-approved proposed regulatory text, expanding the Board’s authority over Research Psychoanalysts (RPAs) and Student Research Psychoanalysts. The bill also aligned coursework and continuing professional development requirements with those of Psychologists by requiring instruction in human sexuality, child abuse assessment and reporting, and elder and dependent adult abuse assessment for initial applicants. In addition, SB 775 established new one-time coursework requirements and a Continuing Professional Development (CPD) requirement for renewing RPAs.

Following the Governor’s approval of SB 775 on October 13, 2025, Board staff, Regulatory Counsel, and Budget staff reconvened on November 24, 2025, to determine whether additional regulatory amendments were necessary to implement the new coursework and CPD requirements. It was determined that further amendments would be needed to clarify the Board’s authority and operationalize the new training standards. The one-time coursework requirements for child abuse assessment and reporting, suicide risk assessment and intervention, and any additional coursework adopted by the Board (e.g., alcohol and chemical dependency), along with the CPD requirement of 36 hours per two-year renewal period for RPAs, are anticipated to become enforceable on January 1, 2027, for initial applicants and January 1, 2028, for renewing registrants, contingent upon completion of the regulatory process.

Board staff is drafting proposed regulatory text.

f) Title 16 CCR section 1388 – Examinations (TOEFL)

Preparing Regulatory Package	Initial Departmental Review	Notice with OAL and Hearing	Notice of Modified Text and Hearing	Preparation of Final Documentation	Final Departmental Review	Submission to OAL for Review	OAL Approval and Board Implementation
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Section 100. A “Section 100” rulemaking is a simplified process for making changes without regulatory effect. This process allows an agency to update existing

regulations without completing the full rulemaking procedure required under the Administrative Procedure Act (APA).

On November 4, 2025, the Educational Testing Service (ETS) informed Board staff of updates to the Test of English as a Foreign Language (TOEFL iBT), effective January 21, 2026. ETS is implementing a revised version of the TOEFL iBT and introducing a new score scale, transitioning from the longstanding 0–120 numeric scale to a banded scale ranging from 1.0 to 6.0 in 0.5 increments.

This Section 100 package updates examination regulations to reflect ETS’s revised score scale. The amendments replace references to the prior numeric scale with the corresponding band score used to determine eligibility for extended examination time for applicants requesting accommodation based on English as a second language. Under the updated scoring system, applicants who obtained a score of 85 or below on tests taken before January 21, 2026, or a score of 4.25 or below on tests taken on or after that date, will continue to qualify for time-and-a-half (1.5x) testing time. These revisions are non-substantive and maintain accuracy and clarity in the Board’s regulations.

This Section 100 package was approved by OAL and became effective on March 30, 2026.

g) Title 16 CCR 1397.50 – Citations and Fines for Probation Violations

Preparing Regulatory Package	Initial Departmental Review	Notice with OAL and Hearing	Notice of Modified Text and Hearing	Preparation of Final Documentation	Final Departmental Review	Submission to OAL for Review	OAL Approval and Board Implementation
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Concept Phase: This phase includes a kick-off meeting to establish production steps, expectations, and timelines for developing proposed regulatory text.

This regulatory package does the following: This regulatory package amends section 1397.50 to expand the Board’s citation and fine authority to include violations of probation terms contained in Board-issued disciplinary orders. The amendments clarify that the Executive Officer or designee may issue a citation, order of abatement, and/or administrative fine when a licensee fails to comply with any condition of probation, and that such citations may be used as an intermediate enforcement tool in addition to, and not in place of, formal disciplinary action. These changes improve enforcement efficiency, promote timely correction of probation violations, and enhance consumer protection by providing the Board with a broader range of responses to non-compliance.

Action Requested:

This item is for informational purposes only. There is no action required at this time.