



LOS ANGELES COUNTY
COMMISSION ON HIV



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PUBLIC POLICY COMMITTEE EXTENDED MEETING

Monday, April 1, 2024
1:00pm-4:00pm (PST)

Vermont Corridor
510 S. Vermont Ave. Terrace Conference Room TK11

****Valet Parking: 523 Shatto Place, LA 90020****

Agenda and meeting materials will be posted on our website
at <http://hiv.lacounty.gov/Meetings>

As a building security protocol, attendees entering the building must notify the parking attendant and security personnel that they are attending a Commission on HIV meeting to access the Terrace Conference Room (9th Floor).

Members of the Public May Join in Person or Virtually.

For Members of the Public Who Wish to Join Virtually, Register Here:

<https://lacountyboardofsupervisors.webex.com/weblink/register/r90c6f05074193248a06207047eeeb3e>

To Join by Telephone: +1-213-306-3065 U.S. Toll

Password: POLICY Meeting ID/Access Code: 2530 316 4652

Notice of Teleconferencing Sites:

Bartz-Altadonna Community Health Center
43322 Gingham Ave, Lancaster, CA 93535



Scan QR code to download an electronic copy of the meeting agenda and packet on your smart device. Please note that hard copies of materials will not be made available during meetings unless otherwise determined by staff in alignment with the County's green initiative to recycle and reduce waste. ** If meeting packet is not yet available, check back 2-3 days prior to meeting; meeting packet subject to change. Agendas will be posted 72 hours prior to meeting per Brown Act.*

together.

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For application assistance, call (213) 738-2816 or email hivcomm@lachiv.org



LOS ANGELES COUNTY
COMMISSION ON HIV



510 S. Vermont Ave., 14th Floor, Los Angeles CA 90020
MAIN: 213.738.2816 EML: hivcomm@lachiv.org WEBSITE: <https://hiv.lacounty.gov>

**AGENDA FOR THE REGULAR MEETING OF THE
LOS ANGELES COUNTY COMMISSION ON HIV
PUBLIC POLICY COMMITTEE**

MONDAY, APRIL 1, 2024 | 1:00 PM – 4:00 PM

510 S. Vermont Ave
Terrace Level Conference Room TK11
Los Angeles, CA 90020
Validated Parking: 523 Shatto Place, Los Angeles 90020

For those attending in person, as a building security protocol, attendees entering from the first-floor lobby must notify security personnel that they are attending the Commission on HIV meeting in order to access the Terrace Conference Room (9th floor) where our meetings are held.

NOTICE OF TELECONFERENCING SITE:
Bartz-Altadonna Community Health Center
43322 Gingham Ave, Lancaster, CA 93535

MEMBERS OF THE PUBLIC:

To Register + Join by Computer:

<https://lacountyboardofsupervisors.webex.com/weblink/register/r90c6f05074193248a06207047eeeeb3e>

To Join by Telephone: 1-213-306-3065 U.S. Toll

Password: POLICY Meeting ID/Access Code: 2530 316 4652

Public Policy Committee Members:			
Katja Nelson, MPP Co-Chair	Lee Kochems, MA Co-Chair	Alasdair Burton	Mary Cummings
Felipe Findley, PA-C, MPAS, AAHIVS	Paul Nash, PhD, CPsychol, AFBPsS, FHEA	Leonardo Real	Ricky Rosales
Ronnie Osorio (<i>alternate</i>)			
QUORUM: 6			

AGENDA POSTED: March 28, 2024.

SUPPORTING DOCUMENTATION: Supporting documentation can be obtained via the Commission on HIV Website at: <http://hiv.lacounty.gov> or in person. The Commission Offices are located at 510 S. Vermont Ave., 14th Floor Los Angeles, 90020. Validated parking is available at 523 Shatto Place, Los Angeles 90020. ****Hard copies of materials will not be made available during meetings unless otherwise determined by staff in alignment with the County’s green initiative to recycle and reduce waste.***

PUBLIC COMMENT: Public Comment is an opportunity for members of the public to comment on an agenda item, or any item of interest to the public, before or during the Commission’s consideration of the item, that is within the subject matter jurisdiction of the Commission. To submit Public Comment, you may join the virtual meeting via your smart device and post your Public Comment in the Chat box -or- email your Public Comment to hivcomm@lachiv.org -or- submit your Public Comment electronically [here](#). All Public Comments will be made part of the official record.

ATTENTION: Any person who seeks support or endorsement from the Commission on any official action may be subject to the provisions of Los Angeles County Code, Chapter 2.160 relating to lobbyists. Violation of the lobbyist ordinance may result in a fine and other penalties. For information, call (213) 974-1093.

ACCOMMODATIONS: Interpretation services for the hearing impaired and translation services for languages other than English are available free of charge with at least 72 hours’ notice before the meeting date. To arrange for these services, please contact the Commission Office at (213) 738-2816 or via email at HIVComm@lachiv.org.

Los servicios de interpretación para personas con impedimento auditivo y traducción para personas que no hablan Inglés están disponibles sin costo. Para pedir estos servicios, póngase en contacto con Oficina de la Comisión al (213) 738-2816 (teléfono), o por correo electrónico á HIVComm@lachiv.org, por lo menos setenta y dos horas antes de la junta.

I. ADMINISTRATIVE MATTERS

- | | | |
|--|------------------|-------------------|
| 1. Call to Order & Meeting Guidelines/Reminders | | 1:00 PM – 1:03 PM |
| 2. Introductions, Roll Call, & Conflict of Interest Statements | | 1:03 PM – 1:05 PM |
| 3. Approval of Agenda | MOTION #1 | 1:05 PM – 1:07 PM |
| 4. Approval of Meeting Minutes | MOTION #2 | 1:07 PM – 1:10 PM |

II. PUBLIC COMMENT 1:10 PM – 1:15 PM

- 5. Opportunity for members of the public to address the Committee of items of interest that are within the jurisdiction of the Committee. For those who wish to provide public comment may do so in person, electronically by clicking [here](#), or by emailing hivcomm@lachiv.org.

III. COMMITTEE NEW BUSINESS ITEMS

- 6. Opportunity for Committee members to recommend new business items for the full body or a committee level discussion on non-agendized Matters not posted on the agenda, to be discussed and (if requested) placed on the agenda for action at a future meeting, or matters requiring immediate action because of an emergency situation, or where the need to take action arose subsequent to the posting of the agenda.

IV. REPORTS

- | | | |
|---|--|-------------------|
| 7. Executive Director/Staff Report | | 1:15 PM – 1:25 PM |
| a. Operations and Programmatic Updates | | |
| 8. Co-Chair Report | | 1:25 PM – 1:40 PM |
| a. 2024 Workplan and Meeting Calendar—Updates | | |

b. Draft statement on Palestine—Updates

V. DISCUSSION ITEMS

10. 2024 Legislative Docket—Review 1:40 PM – 2:40 PM

VI. BREAK

2:40pm—2:50pm

VII. DISCUSSION ITEMS CONT.

11. 2023-2024 Policy Priorities—Review 2:50 PM – 3:15 PM

12. State Policy & Budget-- Updates 3:15 PM – 3:25 PM

13. Federal Policy-- Updates 3:25 PM – 3:35 PM

14. County Policy-- Updates 3:35 PM – 3:45 PM

a. DPH Memo in response to STD Board of Supervisors (BOS) motion

VIII. NEXT STEPS

3:45 PM – 3:55 PM

13. Task/Assignments Recap

14. Agenda development for the next meeting

IX. ANNOUNCEMENTS

3:55 PM – 4:00 PM

15. Opportunity for members of the public and the committee to make announcements

X. ADJOURNMENT

4:00 PM

16. Adjournment for the meeting of April 1, 2024.

PROPOSED MOTIONS	
MOTION #1	Approve the Agenda Order as presented or revised.
MOTION #2	Approve the Public Policy Committee minutes, as presented or revised.



HYBRID MEETING GUIDELINES, ETIQUETTE & REMINDERS (Updated 3.22.23)

- This meeting is a **Brown-Act meeting** and is being recorded.
 - The conference room speakers are *extremely* sensitive and will pick up even the slightest of sounds, i.e., whispers. If you prefer that your private or side conversations, not be included in the meeting recording which, is accessible to the public, we respectfully request that you step outside of the room to engage in these conversations.
 - Turn off your ringers/notifications on your smart devices so as not to disrupt the meeting.
 - Your voice is important, and we want to ensure that it is captured accurately on the record. Please be respectful of one another and minimize crosstalk.

- The **meeting packet** can be found on the Commission's website at <https://hiv.lacounty.gov/meetings/> or accessed via the QR code provided. Hard copies of materials will not be provided in compliance with the County's green initiative to recycle and reduce waste.

- Please comply with the **Commission's Code of Conduct** located in the meeting packet

- Public Comment** for members of the public can be submitted in person, electronically @ https://www.surveymonkey.com/r/public_comments or via email at hivcomm@lachiv.org. *For members of the public attending virtually, you may also submit your public comment via the Chat box. Should you wish to speak on the record, please use the "Raised Hand" feature or indicate your request in the Chat Box and staff will call upon and unmute you at the appropriate time. Please note that all attendees are muted unless otherwise unmuted by staff.*

- For individuals joining in person, to mitigate any potential streaming interference for those joining virtually, we respectfully ask that you **not simultaneously log into the virtual option of this meeting via WebEx.**

- Committee members invoking **AB 2449 for "Just Cause" or "Emergency Circumstances"** must communicate their intentions to staff and/or co-chairs no later than the start of the meeting. Members requesting to join pursuant to AB 2449 must have their audio and video on, at all times, and disclose whether there is a person over the age of 18 in the room in order to be counted toward quorum and have voting privileges. For members joining virtually due to "Emergency Circumstances", a vote will be conducted by the Committee/COH for approval.

- Members will be required to explicitly state their agency's **Ryan White Program Part A and/or CDC prevention conflicts of interest** on the record (versus referring to list in the packet). A list of conflicts can be found in the meeting packet and are recorded on the back of members' name plates, courtesy of staff.



CODE OF CONDUCT

The Commission on HIV welcomes commissioners, guests, and the public into a space where people of all opinions and backgrounds are able to contribute. In this space, we challenge ourselves to be self-reflective and committed to an ongoing understanding of each other and the complex intersectionality of the lives we live. We create a safe environment where we celebrate differences while striving for consensus in the fights against our common enemies: HIV and STDs. We build trust in each other by having honest, respectful, and productive conversations. As a result, the Commission has adopted and is consistently committed to implementing the following guidelines for Commission, committee, and associated meetings.

All participants and stakeholders should adhere to the following:

- 1) We approach all our interactions with compassion, respect, and transparency.**
- 2) We respect others' time by starting and ending meetings on time, being punctual, and staying present.**
- 3) We listen with intent, avoid interrupting others, and elevate each other's voices.**
- 4) We encourage all to bring forth ideas for discussion, community planning, and consensus.**
- 5) We focus on the issue, not the person raising the issue.**
- 6) Be flexible, open-minded, and solution-focused.**
- 7) We give and accept respectful and constructive feedback.**
- 8) We keep all issues on the table (no "hidden agendas"), avoid monopolizing discussions and minimize side conversations.**
- 9) We have no place in our deliberations for racist, sexist, homophobic, transphobic, and other discriminatory statements, and "-isms" including misogyny, ableism, and ageism.**
- 10) We give ourselves permission to learn from our mistakes.**

In response to violation of the Code of Conduct which results in meeting disruption, Include provisions of SB 1100 which states in part, ". . . authorize the presiding member of the legislative body conducting a meeting or their designee to remove, or cause the removal of, an individual for disrupting the meeting Removal to be preceded by a warning to the individual by the presiding member of the legislative body or their designee that the individual's behavior is disrupting the meeting and that the individual's failure to cease their behavior may result in their removal." Complaints related to internal Commission matters such as alleged violation of the Code of Conduct or other disputes among members are addressed and resolved in adherence to Policy/Procedure #08.3302." (Commission Bylaws, Article VII, Section 4.)



LOS ANGELES COUNTY
COMMISSION ON HIV



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HIVCOMM@LACHIV.ORG • <http://hiv.lacounty.gov> • VIRTUAL WEBEX MEETING

Presence at meetings is recorded based on the attendance roll call. Only members of the Commission on HIV are accorded voting privileges and must verbally acknowledge their attendance in order to vote. Approved meeting minutes are available on the Commission's website; meeting recordings are available upon request.

**PUBLIC POLICY COMMITTEE
MEETING MINUTES**

March 4, 2024

Draft

COMMITTEE MEMBERS			
P = Present A = Absent EA = Excused Absence			
Katja Nelson, MPP, Co-Chair	P	Felipe Findley, PA-C, MPAS, AAHIVS	P
Lee Kochems, MA, Co-Chair	P	Bridget Gordon	A
Alasdair Burton	P	Paul Nash, PhD, CPsychol, AFBPsS, FHEA	P
Sandra Cuevas	P	Ricky Rosales	P
Mary Cummings	P	Ronnie Osorio	EA
COMMISSION STAFF AND CONSULTANTS			
Cheryl Barrit, Lizette Martinez, and Jose Rangel-Garibay			

*Some participants may not have been captured. Attendance can be corrected by emailing the Commission.
*Members of the public may confirm their attendance by contacting Commission staff at hivcomm@lachiv.org.
*Meeting minutes may be corrected up to one year from the date of approval.

Meeting and agenda materials can be found on the Commission's website at <https://hiv.lacounty.gov/public-policy-committee/>

I. ADMINISTRATIVE MATTERS

1. CALL TO ORDER & MEETING GUIDELINES/REMINDERS

The meeting was called to order at 1:03pm.

2. INTRODUCTIONS, ROLL CALL, & CONFLICTS OF INTEREST STATEMENTS

Ricky Rosales led introductions and asked attendees to state their conflicts of interest.

3. APPROVAL OF AGENDA

MOTION #1: Approve the Agenda Order as presented or revised. *(Passed by consensus).*

4. APPROVAL OF MEETING MINUTES

MOTION #2: Approve the January 8, 2024 Public Policy Committee minutes, as presented or revised. *(Passed by consensus).*

II. PUBLIC COMMENT

5. OPPORTUNITY FOR MEMBERS OF THE PUBLIC TO ADDRESS THE COMMITTEE ON ITEMS OF INTEREST THAT ARE WITHIN THE JURISDICTION OF THE COMMITTEE. FOR THOSE WHO

WISH TO PROVIDE PUBLIC COMMENT MAY DO SO IN PERSON, ELECTRONICALLY BY CLICKING [HERE](#), OR BY EMAILING HIVCOMM@LACHIV.ORG.

There were no public comments.

III. COMMITTEE NEW BUSINESS ITEMS

- 6. OPPORTUNITY FOR COMMISSION MEMBERS TO RECOMMEND NEW BUSINESS ITEMS FOR THE FULL BODY OR A COMMITTEE LEVEL DISCUSSION ON NON-AGENDIZED MATTERS NOT POSTED ON THE AGENDA, TO BE DISCUSSED AND (IF REQUESTED) PLACED ON THE AGENDA FOR ACTION AT A FUTURE MEETING, OR MATTERS REQUIRING IMMEDIATE ACTION BECAUSE OF AN EMERGENCY SITUATION, OR WHERE THE NEED TO TAKE ACTION AROSE SUBSEQUENT TO THE POSTING OF THE AGENDA.**

There were no committee new business items.

IV. REPORTS

7. EXECUTIVE DIRECTOR/STAFF REPORT

- Cheryl Barrit, Executive Director of COH, reported that the Annual Report for the COH was submitted to the Board of Supervisors on February 28, 2024. The Annual Report documents COH activities and how the COH is performing its duties and responsibilities. The document is posted on the COH website under the “Our Work” tab.
- C. Barrit also reported the Executive Committee sent a letter to the BOS regarding the protection of HIV funding at the federal level. This is a response to a discussion at the February full COH meeting around ongoing threats to HIV funding at the federal level where it was suggested to draft a letter to the BOS alerting about the issue. A copy of the letter is included in the meeting packet. C. Barrit encouraged attendees to review the key messages document in the meeting packet which they can use when speaking to BOS members, health deputies and when providing public comments. C. Barrit also mentioned a letter put together under the leadership of Congresswoman Maxine Waters along with other democratic congress members, uplifting their concerns around the proposed Republican-led cuts to HIV funding at the federal level. A copy the letter is included in the meeting packet.

8. CO-CHAIR REPORT

a. Commissioner Commitments: “How are you fulfilling your role/responsibilities as a Commissioner?”

C. Barrit noted that this item is to gauge whether committee members need more technical assistance in understanding and fulfilling their role and responsibilities as commissioners.

b. Draft 2024 Workplan and Meeting Calendar

K. Nelson provided an overview of the draft 2024 Committee Workplan and meeting

calendar. She noted that the Committee will be having discussions on the 2023-2024 Legislative Docket and the 2024 Policy Priorities document in March. Under item 4, “Viral Hepatitis” was added to the list to mirror Ending the Epidemics (ETE) language. For item 6, the Committee will monitor any bills and initiatives around harm reduction efforts such as legislation regarding the investment of opioid funds. For item 7, K. Nelson noted that the PPC co-chairs determined to postpone the items until 2025. The Committee decided to adopt their 2024 workplan and meeting calendar.

- c. The Committee held a discussion around the draft ceasefire statement provided by Felipe Findley and Sandra Cuevas. The Committee decided to revise the draft statement and focus the intent of the statement on the impact the war in Gaza has had on the HIV continuum of care and service delivery system. F. Findley and S. Cuevas will draft the next iteration of the document and share with COH staff to include in the meeting packet for the discussion at the April 1, 2024 PPC meeting.

- d. **Ryan White Care Act Modernization Project**

The Committee discussed this item during the workplan review.

V. **DISCUSSION ITEMS**

9. **2023-2024 LEGISLATIVE DOCKET – UPDATES**

The Committee will review bill recommendations and hold their deliberations at the April 1, 2024 PPC meeting.

10. **2024 POLICIES PRIORITY**

K. Nelson led a discussion on revisions to the 2024 Policy Priorities document and asked Committee members to choose 3 issues to prioritize in 2024. The poll determined that the top 3 issues were Sexual Health, Housing, and Substance Use. Committee members also discussed adding “workforce development” to the document. The Committee will conduct another poll at their April 1, 2024 meeting and begin to identify and monitor existing activities related to the prioritized issues.

11. **STATE POLICY & BUDGET UPDATE**

K. Nelson shared that the state budget deficit will be bigger than anticipated. The ETE will finalize their budget asks by March 20, 2024 and will meet in preparation for the “Day of Action” on April 23, 2024.

12. **FEDERAL POLICY UPDATE**

K. Nelson shared that Continuing Resolutions will be common this fiscal year and will monitor and changes to the 2024 federal budget.

13. **COUNTY POLICY UPDATE**

- **DPH Memo in Response to STD Board of Supervisors (BOS) Motions**

K. Nelson will work with COH staff to encourage Commissioners to participate in BOS meetings when HIV-related items are on the meeting agenda.

- **2023 Public Comment Schedule for Health Deputies Meetings and BOS Meetings**
C. Barrit has sent reminders to the PPC members that signed up to provide public comment. In the reminder, she includes the agenda for the BOS and Health Deputies meetings and a confirmation that the meeting is taking place.

VI. NEXT STEPS

14. TASK/ASSIGNMENTS RECAP

- ➡ COH staff will

15. AGENDA DEVELOPMENT FOR THE NEXT MEETING

- Review and update the 2023-2024 Legislative Docket
- Review and updated the 2024 Policy Priorities document
- Discuss the draft ceasefire statement

VII. ANNOUNCEMENTS

16. OPPORTUNITY FOR MEMBERS OF THE PUBLIC AND THE COMMITTEE TO MAKE ANNOUNCEMENTS

There were no announcements.

VIII. ADJOURNMENT

17. ADJOURNMENT FOR THE MEETING OF MARCH 4, 2024.

The meeting was adjourned at 3:09pm.



COMMISSION MEMBER "CONFLICTS-OF-INTEREST"

Updated 3/27/24

In accordance with the Ryan White Program (RWP), conflict of interest is defined as any financial interest in, board membership, current or past employment, or contractual agreement with an organization, partnership, or any other entity, whether public or private, that receives funds from the Ryan White Part A program. These provisions also extend to direct ascendants and descendants, siblings, spouses, and domestic partners of Commission members and non-Commission Committee-only members. Based on the RWP legislation, HRSA guidance, and Commission policy, it is mandatory for Commission members to state all conflicts of interest regarding their RWP Part A/B and/or CDC HIV prevention-funded service contracts prior to discussions involving priority-setting, allocation, and other fiscal matters related to the local HIV continuum. Furthermore, Commission members must recuse themselves from voting on any specific RWP Part A service category(ies) for which their organization hold contracts. ***An asterisk next to member's name denotes affiliation with a County subcontracted agency listed on the addendum.**

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
ALVAREZ	Miguel	No Affiliation	No Ryan White or prevention contracts
ARRINGTON	Jayda	Unaffiliated consumer	No Ryan White or prevention contracts
BALLESTEROS	AI	JWCH, INC.	HIV Testing Storefront
			HIV Testing & Syphilis Screening, Diagnosis, & inked Referral...(CSV)
			STD Screening, Diagnosis, and Treatment
			Health Education/Risk Reduction (HERR)
			Mental Health
			Oral Healthcare Services
			Transitional Case Management
			Ambulatory Outpatient Medical (AOM)
			Benefits Specialty
			Biomedical HIV Prevention
			Medical Care Coordination (MCC)
Transportation Services			
BURTON	Alasdair	No Affiliation	No Ryan White or prevention contracts
CAMPBELL	Danielle	T.H.E. Clinic, Inc.	Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)
			Transportation Services
CIELO	Mikhaela	LAC & USC MCA Clinic	Biomedical HIV Prevention
CONOLLY	Lilieth	No Affiliation	No Ryan White or prevention contracts
CUEVAS	Sandra	Pacific AIDS Education and Training - Los Angeles	No Ryan White or prevention contracts
CUMMINGS	Mary	Bartz-Altadonna Community Health Center	No Ryan White or prevention contracts
DAVIES	Erika	City of Pasadena	HIV Testing Storefront
			HIV Testing & Sexual Networks
DONNELLY	Kevin	Unaffiliated consumer	No Ryan White or prevention contracts

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
FERGUSON	Kerry	ViiV Healthcare	No Ryan White or prevention contracts
FINDLEY	Felipe	Watts Healthcare Corporation	Transportation Services
			Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)
			Oral Health Care Services
			Biomedical HIV Prevention
			STD Screening, Diagnosis and Treatment
FRAMES	Arlene	Unaffiliated consumer	No Ryan White or prevention contracts
FULLER	Luckie	Invisible Men	No Ryan White or prevention contracts
GERSH (SBP Member)	Lauren	APLA Health & Wellness	Case Management, Home-Based
			Benefits Specialty
			Nutrition Support
			HIV Testing Social & Sexual Networks
			STD Screening, Diagnosis and Treatment
			Sexual Health Express Clinics (SHEx-C)
			Health Education/Risk Reduction
			Biomedical HIV Prevention
			Oral Healthcare Services
			Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)
			HIV and STD Prevention Services in Long Beach
			Transportation Services
			Residential Care Facility - Chronically Ill
Data to Care Services			
GONZALEZ	Felipe	Unaffiliated consumer	No Ryan White or Prevention Contracts
GORDON	Bridget	Unaffiliated consumer	No Ryan White or prevention contracts
GREEN	Joseph	Unaffiliated consumer	No Ryan White or prevention contracts
HALFMAN	Karl	California Department of Public Health, Office of AIDS	Part B Grantee
HARDY	David	LAC-USC Rand Schrader Clinic	No Ryan White or prevention contracts
HERRERA	Ismael "Ish"	Unaffiliated consumer	No Ryan White or prevention contracts
KOCHEMS	Lee	Unaffiliated consumer	No Ryan White or prevention contracts
KING	William	W. King Health Care Group	No Ryan White or prevention contracts

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
MARTINEZ (PP&A Member)	Miguel	Children's Hospital Los Angeles	Ambulatory Outpatient Medical (AOM)
			HIV Testing Storefront
			STD Screening, Diagnosis and Treatment
			Biomedical HIV Prevention
			Medical Care Coordination (MCC)
			Transportation Services
			Promoting Healthcare Engagement Among Vulnerable Populations
MARTINEZ-REAL	Leonardo	Unaffiliated consumer	No Ryan White or prevention contracts
MAULTSBY	Leon	Charles R. Drew University	Biomedical HIV Prevention
			HIV Testing Storefront
			HIV Testing Social & Sexual Networks
MENDOZA	Vilma	Unaffiliated consumer	No Ryan White or prevention contracts
MINTLINE (SBP Member)	Mark	Western University of Health Sciences (No Affiliation)	No Ryan White or prevention contracts
MOLETTE	Andre	Men's Health Foundation	Biomedical HIV Prevention
			Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)
			Promoting Healthcare Engagement Among Vulnerable Populations
			Sexual Health Express Clinics (SHEx-C)
			Transportation Services
			Data to Care Services
MURRAY	Derek	City of West Hollywood	No Ryan White or prevention contracts
NASH	Paul	University of Southern California	Biomedical HIV Prevention

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
NELSON	Katja	APLA Health & Wellness	Case Management, Home-Based
			Benefits Specialty
			Nutrition Support
			HIV Testing Social & Sexual Networks
			STD Screening, Diagnosis and Treatment
			Sexual Health Express Clinics (SHEX-C)
			Health Education/Risk Reduction
			Biomedical HIV Prevention
			Oral Healthcare Services
			Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)
			HIV and STD Prevention Services in Long Beach
			Transportation Services
			Residential Care Facility - Chronically Ill
Data to Care Services			
OSORIO	Ronnie	Center For Health Justice (CHJ)	Transitional Case Management - Jails
			Promoting Healthcare Engagement Among Vulnerable Populations
PATEL	Byron	Los Angeles LGBT Center	Ambulatory Outpatient Medical (AOM)
			HIV Testing Storefront
			HIV Testing Social & Sexual Networks
			STD Screening, Diagnosis and Treatment
			Health Education/Risk Reduction
			Biomedical HIV Prevention
			Medical Care Coordination (MCC)
			Promoting Healthcare Engagement Among Vulnerable Populations
Transportation Services			
PERÉZ	Mario	Los Angeles County, Department of Public Health, Division of HIV and STD Programs	Ryan White/CDC Grantee
RICHARDSON	Dechelle	AMAAD Institute	Community Engagement/EHE
ROBINSON	Erica	Health Matters Clinic	No Ryan White or prevention contracts
ROSALES	Ricky	City of Los Angeles AIDS Coordinator	No Ryan White or prevention contracts
RUSSEL	Daryl	Unaffiliated consumer	No Ryan White or prevention contracts
SATTAH	Martin	Rand Schrader Clinic LA County Department of Health Services	No Ryan White or prevention contracts

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
SAN AGUSTIN	Harold	JWCH, INC.	HIV Testing Storefront
			HIV Testing & Syphilis Screening, Diagnosis, & inked Referral...(CSV)
			STD Screening, Diagnosis and Treatment
			Health Education/Risk Reduction
			Mental Health
			Oral Healthcare Services
			Transitional Case Management
			Ambulatory Outpatient Medical (AOM)
			Benefits Specialty
			Biomedical HIV Prevention
			Medical Care Coordination (MCC)
			Transportation Services
SOLIS *	Juan	UCLA Labor Center	See attached subcontractor's list
SPENCER	LaShonda	Oasis Clinic (Charles R. Drew University/Drew CARES)	Biomedical HIV Prevention
			HIV Testing Storefront
			HIV Testing Social & Sexual Networks
STALTER	Kevin	Unaffiliated consumer	No Ryan White or prevention contracts
TALLEY	Lambert	Grace Center for Health & Healing (No Affiliation)	No Ryan White or prevention contracts
VALERO	Justin	No Affiliation	No Ryan White or prevention contracts
WEEDMAN	Jonathan	ViaCare Community Health	Biomedical HIV Prevention
YBARRA	Russell	Capitol Drugs	No Ryan White or prevention contracts



LOS ANGELES COUNTY COMMISSION ON HIV

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DUTY STATEMENT, COMMISSIONER (subject to change)

POLICY:

- 1) Candidates for membership on the Commission on HIV must complete a membership application and are evaluated/scored by the Commission's Operations Committee, consistent with Policy/ Procedure #09.4205 (*Commission Membership Evaluation and Nomination Process*). The Operations Committee recommends candidates for membership to the Commission, which, in turn nominates them to the Board of Supervisors by a majority vote. The Board of Supervisors is responsible for appointing members to the Commission.

DUTIES AND RESPONSIBILITIES: In order to be an effective, active member of the Commission on HIV, an individual must meet the following demands of Commission membership:

1. Representation/Accountability:

- Possess a thorough knowledge of HIV/AIDS/STI issues and affected communities, and the organization or constituency the member represents;
- Continually and consistently convey two-way information and communication between the organization/constituency the member represents and the Commission;
- Provide the perspective of the organization/constituency the member represents and the Commission to other, relevant organizations regardless of the member's personal viewpoint;
- Participate and cast votes in a manner that is best for the entire County, regardless of the personal opinions of the member personal or the interests/opinions of the organization/constituency the member represents.

2 Commitment/Participation:

- a) Commitment to fill a full two-year Commission term.
- b) A pledge to:
 - respect the views of other members and stakeholders, regardless of race, ethnicity, sexual orientation, HIV status or other factors;
 - comply with "Robert's Rules of Order, Newly Revised", the Ralph M. Brown Act, the Commission's Code of Conduct and applicable HIPAA rules and requirements;
 - consider the views of others with an open mind;
 - actively and regularly participate in the ongoing decision-making processes; and
 - support and promote decisions resolved and made by the Commission when representing the Commission.
- c) A commitment to devote a minimum of ten hours per month to Commission/committee attendance, preparation and other work as required by your Commission membership.
- d) Each year of the two-year term, the Commissioner is expected to attend* and participate in, at a minimum, these activities:
 - Two all-day Commission orientation meetings (*first year only*) and assorted orientations and trainings of shorter length throughout the year;
 - One to two half-day County commission orientations (*alternate years*);
 - One half- to full-day Commission meeting monthly;
 - One two- to three-hour committee meeting once a month;
 - All relevant priority- and allocation-setting meetings;
 - One all-day Commission Annual Meeting in the Fall;
 - Assorted voluntary workgroups, task forces and special meetings as required due to committee assignment and for other Commission business.

**Stipulation: Failure to attend the required meetings may result in a Commissioner's removal from the body.*

3 Knowledge/Skills:

- a) A commitment to constantly develop, build, enhance and expand knowledge about the following topics:
 - general information about HIV/STIs and its impact on the local community;
 - a comprehensive HIV/STI continuum of care/prevention services, low-income support services, and health and human service delivery;
 - the Commission's annual HIV service priorities, allocations and plans;
 - the Ryan White Program, County health service and Medicaid information and other information related to funding and service support.



2024 WORK PLAN – PUBLIC POLICY COMMITTEE—ADOPTED

Committee Name: PUBLIC POLICY COMMITTEE (PPC)				
Co-Chairs: Katja Nelson, Lee Kochems			Committee Adoption Date: 3/4/24	
Purpose of Work Plan: To focus and prioritize key activities for COH Committees and subgroups for 2024				
#	TASK/ACTIVITY	DESCRIPTION	TARGET DATE	STATUS/NOTES/OTHER COMMITTEES INVOLVED
1	Review and refine 2024 workplan	COH staff to review and update 2024 workplan monthly	Ongoing, as needed	Workplan revised/updated on: 12/04/23, 01/04/24, 1/31/24, 2/29/24, 3/28/24
2	Develop 2023-2024 Legislative Docket and update as needed.	Review legislation aligned with information gathered from public hearing(s) as well as recommendations from Commission taskforces, caucuses, and workgroups to develop the Commission docket, and discuss legislative position for each bill.	Sep 2024	The COH staff will monitor bill status and update docket as needed.
3	Develop 2023-2024 Policy Priorities document and update as needed.	The Committee will revise the Policy Priorities document to include the alignment of priorities from Commission stakeholder groups	May 2024	The Committee will review and update their policy priorities document as needed.
4	Continue to advocate for an effective County-wide response to the STI crisis in Los Angeles County.	The Committee will review government actions that impact funding and implementation of sexual health and HIV services. Assess and monitor federal, state, and local government policies and budgets that impact HIV, STIs, Viral Hepatitis and other sexual health issues.	Ongoing	Track and monitor BOS correspondence website and BOS agenda items related to the County-wide response to the STI crisis in Los Angeles County. Commissioners are encouraged to provide public comments at BOS meetings.
5	Continue to advocate for an effective County-wide response to the Act Now Against Meth (ANAM) platform.	The Committee will review government actions that impact funding and implementation of sexual health and HIV services. Assess and monitor federal, state, and local government policies and budgets that impact activities under the ANAM platform.	Ongoing	Track and monitor BOS correspondence website and BOS agenda items related to the County-wide response to the ANAM platform. Commissioners are encouraged to provide public comments at BOS meetings.
6	Monitor and support Harm Reduction efforts in LA County and LA City	The Committee will review government actions that impact funding and implementation of harm reduction efforts in Los Angeles and Los Angeles County.	Ongoing	Track and monitor legislation related to the investment of Opioid settlement funds.
7	Efforts to Modernize the Ryan White Care Act (RWCA)	The Committee developed a policy brief outline. The policy brief will summarize key issues to address and include in a modernized RWCA legislation.	Postponed to 2025	Committee co-chairs met with COH staff and determined to postpone the development of a white paper on RWCA modernization to 2025.

DRAFT STATEMENT ON WAR IN GAZA

FOR PUBLIC POLICY COMMITTEE DISCUSSION PURPOSES ON APRIL 1, 2024

“Just as “Silence = Death” applies to our fight to end AIDS, so too does it apply to the complicity of genocide against Palestinians.” *AIDS Coalition to Unleash Power (ACT UP) New York*, <https://actupny.com/bds/>

The Vision of the Los Angeles County Commission on HIV is to be a comprehensive, sustainable, accessible system of prevention and care that empowers people at-risk, living with or affected by HIV to make decisions and to maximize their lifespans and quality of life. We have pledged to operationalize the Anti-Racism, Diversity, and Inclusion Initiative that “articulates an anti-racist agenda that guides, governs, and increases the County’s ongoing commitment to fighting racism in all its dimensions.”

We open our general commission meeting with a *Land Acknowledgement* of the original inhabitants of Los Angeles County, including (in no particular order) the Fernandeano Tataviam Band of Mission Indians, Gabrielino Tongva Indians of California Tribal Council, Gabrieleno/Tongva San Gabriel Band of Mission Indians, Gabrieleño Band of Mission Indians – Kizh Nation, San Manuel Band of Mission Indians, San Fernando Band of Mission Indians.

In addition, through our Los Angeles County Comprehensive HIV Plan (2022-2026) we acknowledge and support efforts that address the impact of structural racism including incarceration “as a force in LA and across the country that destabilizes communities, disrupts family relationships, and magnifies the accumulation of health and social disadvantage for already marginalized populations” on the HIV epidemic. Taken together, we understand the disproportionate impact of HIV on these same marginalized communities, particularly indigenous, Black and Latinx communities.

Moreover, we as a Commission have supported Divestment/Investment legislation from the local to federal, such as supporting the LA County Alternatives to Incarceration Plan, which calls for divestment from systems of incarceration, closing Men’s Central Jail, towards healthcare including the current COH fight for more funding in the current STI crisis. On the federal level we supported the BREATHE ACT in support of the Movement for Black Lives which was an invest/divest bill which called for divestment in systems of incarceration towards non-carceral efforts. In addition, we support efforts that call for the reauthorization of PEPFAR which is federal funding in the fight against HIV/AIDS in more than 50 countries worldwide.

THEREFORE, we join the efforts of dozens of healthcare institutions including national leaders in the fight against HIV/AIDS in condemning the genocide, settler-colonialism, and occupation of Palestine.

ACTUP has always been a rainbow coalition fighting in the struggles for queer and trans liberation, healthcare access, disability justice, and anti-colonialism and anti-imperialism. We recognize that same-sex marriage is still illegal in Israel, and that efforts to pinkwash genocide stem back to the US-backed “Brand Israel” campaign.[16] As settlers marched for Pride in Tel Aviv, Queer and trans Palestinians have been brutalized by the Israeli Occupying Forces (IOF) in Gaza and the West Bank. The IOF trains with countless police departments in the Deadly Exchange, including with the New York Police Department (NYPD), which have assaulted ACT UP members since our group’s founding in 1987. ACT UP NY is proud to be a diverse group of non-partisan individuals united in anger to end HIV/AIDS, with many of our members and leaders being part of the LGBTQ community. This is why we join the call of Queers For Liberation to call for an immediate and permanent ceasefire in Gaza.

FOR PUBLIC POLICY COMMITTEE DISCUSSION PURPOSES ON APRIL 1, 2024

In our undying belief that healthcare is a human right, that housing and food security are healthcare, we therefore oppose Israel's ongoing genocide and apartheid. This is why we join the calls for an immediate and permanent ceasefire in Gaza and are endorsing the BDS Movement.

Boycott, Divestment, Sanctions (BDS) is a non-violent movement founded in 2005 by a coalition of Palestinian-led organizations to uphold "the simple principle that Palestinians are entitled to the same rights as the rest of humanity."^[13] BDS recognizes Israel as an occupying and colonizing force that discriminates against Palestinian citizens of Israel and denies Palestinian refugees the right to return home. Inspired by the South African anti-apartheid movement, BDS is a call to action to pressure Israel to comply with international law by meeting three demands:

- 1. Ending its occupation and colonization of all Arab lands and dismantling the Wall.*
- 2. Recognizing the fundamental rights of the Arab-Palestinian citizens of Israel to full equality.*
- 3. Respecting, protecting, and promoting the rights of Palestinian refugees to return to their homes and properties as stipulated in UN Resolution 194.*

AIDS Coalition to Unleash Power (ACT UP) New York, <https://actupny.com/bds/>

As of March 31, 2024, at least 32,782 Palestinians have been killed and 75,298 wounded in Israeli attacks on Gaza since October 7. The revised death toll in Israel from Hamas's October 7 attack stands at 1,139, with about 100 still held captive. The World Health Organization and the United Nations have called the offensive on Gaza a "public health disaster" and warns that infectious diseases may ultimately kill more people than Israel's military offensive. Many lessons in fighting infectious diseases globally such as COVID-19 were derived from the global fight against HIV/AIDS.

Prior to the War in Gaza, the HIV/AIDS epidemic in the Middle East and North Africa, and in particular Palestine, was considered of growing concern. In 2018, the United Nations AIDS Program reported about 220,000 people infected with HIV and living with AIDS in the Middle East and North Africa (MENA), 35% of them are children and about 18,000 are new HIV infections. In Palestine and surrounding regions, the HIV/AIDS rates are underestimated due to insufficient investment in surveillance and collection and analysis of data in addition to high social stigma. This includes homophobia, harassment, discrimination and criminalization and religious faiths including Islam, Christianity and Judaism do not support non-marital sexual behaviors, which is the main risk factor associated with HIV infection. Moreover, armed conflict and displacement have already proven to be a driver of the HIV epidemic globally. For example, as of 2020, the patterns of HIV spread within Libya were traced and risk factors determined during the 8-month conflict period between February and October of 2011. We can only imagine what the toll will be with this continued conflict and mass displacement of Palestinians within and outside of Gaza.

We follow the leadership, guidance and urgency of ACT UP that on World AIDS Day 2023, joined Palestinian solidarity activists, LGBTQ+, and healthcare advocates to demand the US government "Fund Healthcare Not Warfare." We join them in their call for HIV/AIDS service institutions to "to take a stand for human consciousness, call for a ceasefire, support BDS, and remain steadfast in their beliefs of justice, equality, and welfare of all people. We are committed to fighting AIDS, homophobia, transphobia, Islamophobia, antisemitism, and oppression of all kinds. This endorsement is a fierce commitment to those beliefs."



LOS ANGELES COUNTY
COMMISSION ON HIV



2023-2024 Legislative Docket | Approval Date: Last approved by COH on 6/8/23. **Updated 03/11/24.**
POSITIONS: SUPPORT | OPPOSE | SUPPORT w/AMENDMENTS | OPPOSE unless AMENDED | WATCH

BILL	TITLE	DESCRIPTION / COMMENTS	Recommended Position	STATUS
AB 2007 (Boerner)	Establish Unicorn Homes Pilot Program	<p><i>Establishes a 3-year pilot program—the Unicorn Homes Transitional Housing for Homeless LGBTQ+ Youth Program—to place unhoused LGBTQ+ youth with affirming volunteer host families and provide trauma-informed crisis intervention care, with the ultimate goal of reunification with the youth’s family when possible.</i></p> <p>https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202320240AB2007</p>		<p>20-MAR-24</p> <p>Referred to Coms. On H. & C.D. and HUM. S.</p>
AB 2034 (Rodriguez)	Crimes: loitering for the purpose of engaging in a prostitution offense	<p><i>This bill would make it a misdemeanor to loiter in a public place with the intent to commit prostitution, as defined, and make other conforming changes. By creating a new crime, this bill would impose a state-mandated local program.</i></p> <p>https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202320240AB2034</p>		<p>07-MAR-24</p> <p>In Committee Hearing postponed.</p>
AB 2523 (Patterson)	Needle and syringe exchange services	<p><i>Existing law authorizes the State Department of Public Health to authorize certain entities to apply to the department to provide hypodermic needle and syringe exchange in any location where the department determines that the conditions exist for the rapid spread of HIV, viral hepatitis, or any other potentially deadly or disabling infections that are spread through the sharing of used hypodermic needles and syringes.</i></p> <p><i>This bill would instead authorize a clean needle and syringe exchange project in any city, county, or city and county that chooses to participate. The bill would instead require the department to authorize the entities to apply to the department after the approval from the participating city, county, or city and county, and would instead authorize the department to reauthorize the program with the approval of the participating city, county, or city and county. The bill would prohibit the department from authorizing a clean needle and syringe exchange project without the approval of the city, county, or city and county.</i></p> <p><i>This bill would require the department to send a written and an email notice to the affected city, county, or city and county. The bill would require the department to provide the biennial report to the city, county, or city and county.</i></p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB2523</p>		<p>21-MAR-24</p> <p>Referred to Com. on HEALTH.</p>

BILL	TITLE	DESCRIPTION / COMMENTS	Recommended Position	STATUS
AB 2229 (Wilson)	California Healthy Youth Act: menstrual health education	<p><i>This bill would include in the definition of “comprehensive sexual health education” the topic of menstrual health, defined to mean a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity, in relation to the menstrual cycle. The bill would that instruction and materials also teach pupils about the menstrual cycle, premenstrual syndrome and pain management, menstrual hygiene, menstrual disorders, menstrual irregularities, menopause, menstrual stigma, and any other relevant topics related to the menstrual cycle.</i></p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB2229</p>		<p>26-FEB-24</p> <p>Referred to Committee on Education.</p>
AB 2258 (Zbur)	Health care coverage: cost sharing	<p><i>This bill would prohibit a group or individual non-grandfathered health care service plan contract or health insurance policy issued, amended, or renewed on or after 1/1/2025, from imposing a cost-sharing requirement for items or services that are integral to the provision of preventive care services and screenings. The bill would require those contracts and policies to cover items and services for preventive care services and screenings, including home test kits for sexually transmitted disease and specified cancer screenings.</i></p> <p>https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202320240AB2258</p>		<p>26-FEB-24</p> <p>Referred to Committee on Health.</p>
AB 2442 (Zbur)	Expedite Licensure for Gender-Affirming Care Providers	<p><i>Expands the network of gender-affirming care providers in the state to improve accessibility of care by expediting licensure applications for health care providers who intend to provide gender-affirming health care or gender-affirming mental health care in California.</i></p> <p>https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202320240AB2442</p>		<p>04-MAR-24</p> <p>Referred to Committee on B. & P.</p>
AB 2498 (Zbur and Quirk-Silva)	Housing: the California Housing Security Act	<p><i>This bill would establish the California Housing Security Program to provide a housing subsidy to eligible persons to reduce housing insecurity and help Californians meet their basic housing needs. The bill would require the Department of Housing and Community Development to establish a 2-year pilot program in up to 4 counties and to establish guidelines that include the amount of the subsidy necessary to cover the portion of a person’s rent to prevent homelessness but shall not exceed \$2,000 per month. Under the bill, the subsidy would not be considered income for purposes of determining eligibility or benefits for any other public assistance program, nor would participation in other benefits exclude a person from eligibility for the subsidy. Under the bill, an undocumented person, as specified, who otherwise qualifies for the subsidy would be eligible for the subsidy.</i></p> <p>https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202320240AB2498</p>		<p>26-FEB-24</p> <p>Referred to Committee on H. & C.D.</p>

BILL	TITLE	DESCRIPTION / COMMENTS	Recommended Position	STATUS
AB 3031 (Lee and Low)	LGBTQ+ Commission	Establishes a statewide LGBTQ+ Commission representing California's diverse LGBTQ+ community to shine a light on the unique challenges LGBTQ+ people face, assess and monitor programs and legislation to address systemic barriers, and make recommendations to improve the health, safety, and well-being of LGBTQ+ Californians. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB3031		11-MAR-24 Referred to Com. on HUM. S.
SB 953 (Menjivar)	Medi-Cal: Menstrual products	This bill would add menstrual products as a covered benefit to the Medi-Cal schedule of benefits, subject to federal approval and federal financial participation. Requires DHCS to seek any federal approval necessary to implement this benefit. Defines "menstrual products" as a device for use in connection with a person's menstrual cycle. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB953		21-MAR-24 Referred to Com. on APPR.
SB 954 (Menjivar)	Sexual health: contraceptives	This bill requires all public high schools to make condoms available to students by the start of the 2025-26 school year and requires schools to provide information to students on the availability of condoms, as well as other sexual health information. Prohibits public schools from preventing distribution of condoms or preventing a school-based health center from making condoms available and easily accessible to students at the school-based health center site. Prohibits from restricting sales of nonprescription contraception on the basis of age. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB954		26-MAR-24 Set for hearing April 10.
SB 957 (Wiener)	Data collection: sexual orientation and gender identity	Requires the California Departments of Public Health (CDPH) to collect demographic data, including sexual orientation, gender orientation (SOGI), and intersexuality data, from third parties on any forms of electronic data systems, unless prohibited by federal or state law. Adds SOGI to the information reported for the purpose of statewide or local immunization information systems. Requires CDPH to prepare an annual report concerning SOGI data. https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202320240SB957		26-MAR-24 Set for hearing April 2.
SB 959 (Menjivar)	Trans-inclusive care: resources and support services	Creates an online resource for transgender, gender non-conforming, and intersex (TGI) Californians and their families to combat misinformation and provide accurate information about access to trans-inclusive health care, existing legal protections for patients and providers, and other available support services. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB959		14-MAR-24 Set for hearing April 3.
SB 990 (Padilla)	Office of Emergency Services: State Emergency Plan: LGBTQ+ individuals	Requires California to update the State Emergency Plan to include LGBTQ+ inclusive policies and best practices to ensure that LGBTQ+ people can access affirming services and resources before, during, and after an emergency or natural disaster. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB990		20-MAR-24 Referred to Com. on G.O.

BILL	TITLE	DESCRIPTION / COMMENTS	Recommended Position	STATUS
SB 996 (Wilk)	Comprehensive Sexual health Education and HIV Prevention Education	<i>This bill would require the governing board of a school district to adopt a policy at a publicly noticed meeting specifying how parents and guardians of pupils may inspect the written and audiovisual educational materials used in comprehensive sexual health education and HIV prevention education are made available at each school site and publicly posted on the school district's internet website or on a school district's parent or guardian portal.</i> https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202320240SB996		14-FEB-24 Referred to committee on Education.
SB 1022 (Skinner)	Enforcement of Civil Rights	<i>Enables the Civil Rights Department to investigate and prosecute long-running civil rights violations affecting groups or classes of people by making technical changes to the Fair Employment and Housing Act more effectively.</i> https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB1022		14-MAR-24 Set for hearing April 9.
SB 1278 (Laird)	World AIDS Day	<i>This bill would require the Governor to annually proclaim December 1 as World AIDS day.</i> https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB1278		18-MAR-24 Referred to Com. on RLS.
SB 1290 (Roth)	Health care coverage: essential health benefits	<i>This bill would express the intent of the Legislature to review California's essential health benefits benchmark plan and establish a new benchmark plan for the 2027 plan year. The bill would limit the applicability of the current benchmark plan benefits to plan years on or before the 2027 plan year.</i> https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202320240SB1290		21-MAR-24 Referred to Com. on HEALTH.
SB 1333 (Eggman and Roth)	Communicable diseases: HIV reporting	<i>Revises and recasts existing law to permit the California Department of Public Health (CDPH) and local health departments (LHD) to disclose personally identifying information in public health records for the coordination of, linkage to, or reengagement in care, as determined by CDPH or a LHD.</i> https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202320240SB1333		20-MAR-24 Passed Com. on HEALTH. Referred to COM. on JUD.
SB 1346 (Durazo)	Worker's compensation: aggregate disability payments	<i>This bill would authorize, on or after 1/1/2025, the Worker's Compensation Appeals Board to award temporary disability benefits if a denial of treatment requested by a treating physician is subsequently overturned by independent medical review. The bill would prohibit the temporary disability awarded by the Worker's Compensation Appeals Board from exceeding the time from the date of the treatment denial through the date of the independent medical review determination overturning the treatment denial.</i> https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202320240SB1346		26-MAR-24 Set or hearing April 10.

BILL	TITLE	DESCRIPTION / COMMENTS	Recommended Position	STATUS
SB 1368 (Bogh)	School curriculum: sexual health education and HIV prevention education: health framework: pregnancy centers	<i>This bill would require the Instructional Quality Commission, when the Health Framework for California Public Schools is next revised after 1/1/2025, to include information on pregnancy centers as a resource in that health framework. Additionally, this bill would require the department to make information about pregnancy centers available on its internet website and would require pregnancy centers to be included by school districts in the above-described information about local resources.</i> https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202320240SB1368		29-FEB-24 Referred to Com. on ED.
AB 1487 (Santiago)	Public health: Transgender, Gender Variant, and Intersex Wellness Reentry Fund	<i>Establishes the Transgender, Gender Variant, and Intersex (TGI) Wellness Reentry Fund in the State Treasury to fund grant programs focused on reentry programs to support TGI people who have experiences carceral systems.</i> https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB1487		13-OCT-23 Approved by Governor.
ACA 8 (Wilson)	Slavery	This would prohibit slavery in any form, including forced labor compelled by the use or threat of physical or legal coercion. Follow-up questions regarding the phrasing: The ACA removed “Involuntary servitude is prohibited except to punish a crime” from phrasing and added “Slavery in any form.” https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240ACA8	Support with follow-up questions	13-SEP-23 In Senate. To Com. on RLS for assignment.
AB 4 (Arambula)	Covered California: Expansion	Requires Covered California to develop options for expanding access to affordable health care coverage to Californians regardless of immigration status and report these options to the Governor and Legislature. Follow-up questions regarding the phrasing: Starting Jan. 2024, undocumented Californians 26-49 years of age will be eligible for full scope Medi-Cal coverage; however, undocumented Californians who earn too much money to qualify for Medi-Cal are excluded from being able to purchase coverage through Covered California since the federal Affordable Care Act did not extend eligibility to undocumented individuals. The Centers for Medicare and Medicaid Services would need to approve a 1332 waiver which would allow Covered California to offer coverage to undocumented immigrants. https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202320240AB4	Support with follow-up questions	13-JUL-23 In Senate. Read second time and amended. Re-referred to Com. on APPR.

BILL	TITLE	DESCRIPTION / COMMENTS	Recommended Position	STATUS
AB 598 (Wicks)	Sexual health education and HIV prevention education: school climate and safety: CA Health Kids Survey	<p>This bill requires local educational agencies and charter schools to provide students participating in comprehensive sexual health education to receive physical or digital resources and administer the California Healthy Kids Survey in specified grades, related to sexual and reproductive health.</p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB598</p>	Support	<p>05-JUL-23</p> <p>In Senate. Hearing canceled at the request of author.</p>
AB 793 (Bonta)	Privacy: reverse demands	<p>The bill bans reverse-location searches, which allow law enforcement agencies to obtain cell phone data about unspecified individuals near a certain location, and reverse-keyword searches, which allow law enforcement agencies to obtain data about unspecified individuals who used certain search terms on an internet website.</p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB793</p>	Support with Amendment	<p>30-JUN-23</p> <p>In Senate. Hearing canceled at the request of author.</p>
SB 427 (Portantino)	Health care coverage: antiretroviral drugs, devices, and products	<p>Prohibits a non-grandfathered or grandfathered health plan contract or health insurance policy from imposing any cost-sharing or utilization review requirements for antiretroviral drugs, drug devices, or drug products that are either approved by the United States Food and Drug Administration (FDA) or recommended by the federal Centers for Disease Control and Prevention (CDC) for the prevention of HIV/AIDS. Prohibits a health plan or health insurer from subjecting ARVs that are either approved by the FDA or recommended by the CDC for the prevention HIV/AIDS, to prior authorization or step therapy, but authorizes prior authorization or step therapy if at least one therapeutically equivalent version is covered without prior authorization or step therapy and the insurer provides coverage for a noncovered therapeutic equivalent antiretroviral drug, device, or product without cost sharing pursuant to an exception request. Does not require coverage by an out-of-network pharmacy, unless in the case of an emergency or if there is an out-of-network benefit. Delays implementation of this bill for an individual and small group health plan contract or insurance policy until 1/1/2025</p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB427</p>	Watch	<p><i>26-FEB-24</i></p> <p><i>From inactive file. Ordered to third reading.</i></p>

BILL	TITLE	DESCRIPTION / COMMENTS	Recommended Position	STATUS
AB 367 (Maienschein)	Controlled Substances: Enhancements	This bill, until 1/1/2029, applies the “great bodily injury” enhancement to any person who sells, furnishes, administers, or gives away fentanyl or an analog of fentanyl when the person to whom the fentanyl was sold, furnished, administered, or given suffers a significant or substantial physical injury from using the substance. Follow-up questions: The bill applies a 3-year sentence enhancement. Provides that the enhancement does not apply to juvenile offenders. https://leginfo.legislature.ca.gov/faces/billHistoryClient.xhtml?bill_id=202320240AB367	Watch	<i>01-FEB-24</i> <i>Filed with the Chief Clerk pursuant to Joint Rule 56.</i>
AB 1022 (Mathis)	Medi-Cal: Program of All-Inclusive Care for the Elderly	This bill, among other things relating to the Program of All-Inclusive Care for the Elderly (PACE) would require those capitation rates to also reflect the frailty level and risk associated with those populations. The bill would also expand an approved PACE organization’s authority to use video telehealth to conduct all assessments, as specified. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB1022	Support	<i>01-FEB-24</i> <i>Filed with the Chief Clerk pursuant to Joint Rule 56.</i>
AB 1314 (Essayli and Gallagher)	Gender identity: parental notification	This bill would, notwithstanding the consent provisions described above, provide that a parent or guardian has the right to be notified in writing within 3 days from the date any teacher, counselor, or employee of the school becomes aware that a pupil is identifying at school as a gender that does not align with the child’s sex on their birth certificate, other official records, or sex assigned at birth, using sex-segregated school programs and activities, including athletic teams and competitions, or using facilities that do not align with the child’s sex on their birth certificate, other official records, or sex assigned at birth. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB1314	Oppose	<i>01-FEB-24</i> <i>Filed with the Chief Clerk pursuant to Joint Rule 56.</i>
AB 1431 (Zbur)	Housing: the California Housing Security Act	This bill would establish the California Housing Security Program to provide a housing subsidy to eligible persons to reduce housing insecurity and help Californians meet their basic housing needs. To create the program, the bill would require the Department of Housing and Community Development to establish a 2-year pilot program in up to 4 counties, as specified. The bill would require the department to issue guidelines to establish the program that include, among other things, the amount of the subsidy that shall be the amount necessary to cover the portion of a person’s rent to prevent homelessness but shall not exceed \$2,000 per month. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB1431	Support	<i>01-FEB-24</i> <i>Filed with the Chief Clerk pursuant to Joint Rule 56.</i>
AB 1549 (Carrillo)	Medi-Cal: federally qualified health centers and rural health clinics	This bill revises the prospective payment system (PPS) per-visit rate calculation to account for staffing and care delivery models for Medi-Cal services provided by Federally Qualified Health Centers (FQHCs) and Rural Health Centers (RHCs) (collectively, health centers). https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB1549	Support	<i>01-FEB-24</i> <i>Filed with the Chief Clerk pursuant to Joint Rule 56.</i>

BILL	TITLE	DESCRIPTION / COMMENTS	Recommended Position	STATUS
SB 36 (Skinner)	Out-of-state criminal charges: prosecution related to abortion, contraception, reproductive care, and gender-affirming care	This bill would prohibit the issuance of warrants for persons who have violated the laws of another state relating to abortion, contraception, reproductive care, and gender-affirming care, that are legally protected in California. The bill would also prohibit apprehending, detaining, or arresting a bail fugitive based on such offenses, and impose criminal and civil liability for doing so. In addition, the bill would restrict the sharing of information by law enforcement related to such protected activity and provide that convictions in other states would not result in ineligibility for state benefits. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB36	Support	<i>01-FEB-24</i> <i>Returned to Secretary of Senate pursuant to Joint Rule 56.</i>
SB 37 (Caballero)	Older Adults and Adults with Disabilities Housing Stability Act	This bill establishes the Older Adults and Adults with Disabilities Housing Stability Pilot Program to provide housing subsidies to older adults and adults with disabilities who either are experiencing or at risk of experiencing homelessness, in up to five geographic regions or counties. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB37	Support	<i>29-JAN-24</i> <i>In Assembly. Held at Desk.</i>
SB 524 (Caballero)	Pharmacists: furnishing prescription medications	This bill authorizes a pharmacist to furnish medications to treat various diseases and conditions based on the results of a federal Food and Drug Administration test the pharmacist ordered, performed, or reported and adds these additional pharmacy services to the Medi-Cal schedule of benefits. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB524	Support	<i>01-FEB-24</i> <i>Returned to Secretary of Senate pursuant to Joint Rule 56.</i>

BILL	TITLE	DESCRIPTION / COMMENTS	Recommended Position	STATUS
AB 957 (Wilson)	Family law: gender identity	<p>Requires a court to consider a minor’s gender identity or gender expression when determining the best interest of the child, as specified.</p> <p>Governor’s Veto Message:</p> <p>This legislation would require a court, when determining the best interests of a child in a child custody or visitation proceeding, to consider, among other comprehensive factors, a parent's affirmation of the child's gender identity or gender expression. I appreciate the passion and values that led the author to introduce this bill. I share a deep commitment to advancing the rights of transgender Californians, an effort that has guided my decisions through many decades in public office. That said, I urge caution when the Executive and Legislative branches of state government attempt to dictate - in prescriptive terms that single out one characteristic - legal standards for the Judicial branch to apply. Other-minded elected officials, in California and other states, could very well use this strategy to diminish the civil rights of vulnerable communities. Moreover, a court, under existing law, is required to consider a child's health, safety, and welfare when determining the best interests of a child in these proceedings, including the parent's affirmation of the child's gender identity.</p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB957</p>	Support	<p>22-SEP-23</p> <p>Vetoed by Governor.</p>

BILL	TITLE	DESCRIPTION / COMMENTS	Recommended Position	STATUS
AB 1060 (Ortega)	Health care coverage: naloxone hydrochloride (NH)	<p>Requires coverage of prescription or nonprescription NH under a health plan contract or health insurance policy, and the Medi-Cal program and prohibits a them from imposing any cost-sharing requirements exceeding \$10/package of NH or another drug approved by the U.S. Food and Drug Administration (FDA) for the complete or partial reversal of an opioid overdose.</p> <p>Governor's Veto Message: This bill would require health plans to cover prescription and over the counter naloxone and all other U.S. FDA approved drugs for opioid overdose reversal, with a maximum of \$10 cost sharing. Combating the opioid crisis is one of my top priorities. I appreciate the author's shared commitment to this critical public health and public safety imperative. Together with the Legislature, we have invested more than \$1 billion to combat overdoses, support those with opioid use disorder, raise awareness, and crack down on trafficking. Further, the 2023 Budget Act included \$30 million for the CaRx Naloxone Access Initiative, to support partners in developing, manufacturing, procuring, and distributing a low-cost naloxone nasal product. While I support providing access to opioid antagonists to individuals with opioid use disorder or other risk factors, this bill would exceed the state's set of essential health benefits, which are established by the state's benchmark plan under the provisions of the federal Affordable Care Act. As such, this bill's mandate would require the state to defray the costs of coverage in Covered California. This would not only increase ongoing state General Fund costs, but it would set a new precedent by adding requirements that exceed the benchmark plan. A pattern of new coverage mandate bills like this could open the state to millions to billions of dollars in new costs to cover services relating to other health conditions. This creates uncertainty for our healthcare system's affordability. For these reasons, I cannot sign this bill.</p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB1060</p>	Support	07-OCT-23 Vetoed by Governor.

BILL	TITLE	DESCRIPTION / COMMENTS	Recommended Position	STATUS
AB 1432 (Carrillo)	Health insurance: policy	<p>This bill subjects an out-of-state policy, or certificate of group health insurance that is marketed, issued, or delivered to a Californian resident to specified provisions of the Insurance Core requiring coverage of abortion, abortion-related services, and gender-affirming care, regardless of the origin of the contract, subscriber, or master group policyholder.</p> <p>Governor's Veto Message: This bill would require any out-of-state health insurance plan regulated by the California Department of Insurance that is marketed, issued, or delivered to a California resident to provide coverage for abortion, abortion-related services, and gender-affirming care. I commend the author for working to provide additional assurances that California residents can access abortion services and gender affirming care. It is a priority of my Administration to ensure that abortion and gender-affirming care are safe, legal, and accessible. However, it is not evident that out-of-state health insurance plans serving Californians do not already cover this care. Further, though well intentioned, this bill could invite litigation where an adverse ruling would outweigh a potential benefit.</p> <p>https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202320240AB1432</p>	Support	07-OCT-23 Vetoed by Governor.

BILL	TITLE	DESCRIPTION / COMMENTS	Recommended Position	STATUS
AB 1645 (Zbur)	Health care coverage: cost sharing	<p>Prohibits a large group health plan contract or health insurance policy issued, amended, or renewed on or after 1/1/2024, or an individual or small group contract or policy issued, amended, or renewed on or after 1/1/2025, from imposing a cost-sharing requirement for office visits of specified preventive care services and screenings and for items or services that are integral to their provision. Prohibits health plan contracts and insurance policies from imposing a cost-sharing requirement, utilization review, or other specified limits on a recommended sexually transmitted infections (STI) screening, and from imposing a cost-sharing requirement for any items and services integral to a STI screening, as specified. Requires a health plan or insurer to directly reimburse specified nonparticipating providers or facilities of STI screening, specified rates for screening tests and integral items and services rendered and prohibits the nonparticipating provider from billing or collecting a cost-sharing amount for a STI screening from an enrollee or insured.</p> <p><u>Governor's Veto Message:</u></p> <p>This bill would prohibit health plans from imposing cost sharing for specified preventive or screening services and associated office visits and would require plans to directly reimburse nonparticipating essential community providers for STI screenings and services. I appreciate the author's efforts to increase access to preventive health care, including HIV and STI testing, colorectal screening, and other services. However, components of this proposal depart from structures in federal and state law, such as the existing policies for reimbursement to non-contracted providers. Further, because this bill exceeds the cost-sharing provisions under the Affordable Care Act, it would result in increased costs to health plans passed on to consumers through premiums. The State must weigh the potential benefits of all new mandates with the comprehensive costs to the entire delivery system.</p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB1645</p>	Support	07-OCT-23 Vetoed by Governor.

BILL	TITLE	DESCRIPTION / COMMENTS	Recommended Position	STATUS
SB 541 (Menjivar)	Sexual Health: contraceptives: Immunization	<p>This measure seeks to address the sexually transmitted infection epidemic among California youth and improve equitable public health outcomes statewide by expanding teen access to condoms and the HPV vaccine.</p> <p><u>Governor's Veto Message:</u></p> <p>This bill requires all public high schools to make free condoms available to students and would prohibit retailers from refusing to sell condoms to youth. While evidence-based strategies, like increasing access to condoms, are important to supporting improved adolescent sexual health, this bill would create an unfunded mandate to public schools that should be considered in the annual budget process. In partnership with the Legislature, we enacted a budget that closed a shortfall of more than \$30 billion through balanced solutions that avoided deep program cuts and protected education, health care, climate, public safety, and social service programs that are relied on by millions of Californians. This year, however, the Legislature sent me bills outside of this budget process that, if all enacted, would add nearly \$19 billion of unaccounted costs in the budget, of which \$11 billion would be ongoing. With our state facing continuing economic risk and revenue uncertainty, it is important to remain disciplined when considering bills with significant fiscal implications, such as this measure.</p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB541</p>	Support	08-OCT-23 Vetoed by Governor.
ACA 5 (Low)	Marriage Equality	<p>This measure would express the intent of the Legislature to amend the Constitution of the State relating to marriage equality.</p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240ACA5</p>	Support	20-JUL-23 Chaptered by Secretary of State.
AB 5 (Zbur)	The Safe and Supportive Schools Program	<p>Requires the California Department of Education to complete the development of an online training curriculum and online delivery platform by 7/1/2025 and requires local educational agencies to provide and require at least one hour of training annually to all certificated staff, beginning with the 2025-26 school year through the 2029-30 school year, on cultural competency in supporting lesbian, gay, bisexual, transgender, queer, and questioning students.</p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB5</p>	Support	23-SEP-23 Approved by Governor.
AB 223 (Ward)	Change of gender and sex identifier	<p>This bill enhances protections for minors seeking changes of name or gender by making the proceedings presumptively confidential.</p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB223</p>	Support	23-SEP-23 Approved by Governor.

BILL	TITLE	DESCRIPTION / COMMENTS	Recommended Position	STATUS
AB 254 (Bauer-Kahan)	Confidentiality of Medical Info. Act: reproductive or sexual health application info.	This bill includes “reproductive or sexual health application information” in the definition of “medical information” and the businesses that offer reproductive or sexual health digital services to consumers in the definition of a provider of health care for purposes of the Confidentiality of Medical Information Act. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB254	Support	27-SEP-23 Approved by Governor.
AB 352 (Bauer-Kahan)	Health Information	This bill limits the sharing of information related to sensitive services in electronic health records without specific authorization from the patient. This bill also requires a specified stakeholder advisory group to include providers of sensitive services and to identify policies and procedures to prevent electronic health information related to sensitive services from automatically being shared with individuals and entities in another state. Follow-up questions regarding phrasing: “Sensitive services” are gender affirming care, abortion and abortion-related services, and contraception. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB352	Support with follow-up questions	27-SEP-23 Approved by Governor.
AB 470 (Valencia)	Continuing medical education: physicians and surgeons	This bills specifies how an association that accredits continuing medical education courses taken by Medical Board of California licensed physicians and surgeons should update standards for those courses, if they choose to update any standards. https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202320240AB470	Support	07-OCT-23 Approved by Governor.
AB 760 (Wilson)	California State University and University of California: records: affirmed name and gender identification	This bill would require California State University (CSU) and requests the Regents of the University of California (UC), to implement a process by which students, staff, and faculty can declare an affirmed name, gender, or both name and gender identification to be used in records where legal names are not required by law. Support w/Amendments: Due to the constitutional autonomy of the UC system, the Donahue Higher Education Act, which governs postsecondary education in the State of California, does not apply to the UC system. As a result, a bill must request the UC Regents to make education code provisions applicable to the UC system. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB760	Support with Amendments	23-SEP-23 Approved by Governor.
AB 1078 (Jackson)	Instructional materials: removing instructional materials and curriculum: diversity	Makes various changes to the adoption of instructional materials for use in schools, including a provision that would prohibit a governing board from disallowing the use of an existing textbook, other instructional material, or curriculum that contains inclusive and diverse perspectives, as specified. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB1078	Support	25-SEP-23 Approved by Governor.

BILL	TITLE	DESCRIPTION / COMMENTS	Recommended Position	STATUS
AB 1163 (Luz Rivas)	Lesbian, Gay, Bisexual, and Transgender Disparities Reduction Act	This bill expands the data collection requirements in the Lesbian, Gay, Bisexual, and Transgender Disparities Reduction Act, to additionally apply to the State Department of State Hospitals, the Department of Rehabilitation, the State Department of Developmental Services, and the Department of Community Services and Development. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB1163	Support	13-OCT-23 Approved by Governor.
SB 339 (Wiener)	HIV preexposure prophylaxis and postexposure prophylaxis	This bill authorizes a pharmacists to furnish up to a 90-day course of preexposure prophylaxis (PrEP), or beyond 90-days if specified conditions are met and requires the Board of Pharmacy to adopt emergency regulations to implement these provisions by 7/1/2024. This bill requires a health care service plan and health insurer to cover PrEP and postexposure prophylaxis (PEP) furnished by a pharmacist, including costs for the pharmacist's services and related testing ordered by the pharmacist. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB339	Support	06-FEB-24 <i>Approved by Governor.</i>
SB 372 (Menjivar)	Department of Consumer Affairs: licensee and registrant records: name and gender changes	This bill requires a board within the Department of Consumer Affairs to update licensee or registrant records with that individual's updated legal name or gender upon receiving government-issued documentation, as specified. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB372	Support	23-SEP-23 Approved by Governor.
SB 525 (Durazo)	Minimum wages: health care workers	This bill (1) enacts a phased in multi-tiered statewide minimum wage schedule for health care workers employed by covered healthcare facilities, as defined; (2) requires, following the phased-in wage increases, the minimum wage for health care workers employed by covered healthcare facilities to be adjusted, as SB 525; (3) provides a temporary waiver of wage increases under specified circumstances; (4) and establishes a 10-year moratorium on wage ordinances, regulations, or administrative actions for covered health care facility employees, as specified. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB525	Support with Amendments	13-OCT-23 Approved by Governor.

FEDERAL BILLS

Bill	Title	Description / comments	Recommended position	Status
H.R. 62 (Jackson Lee)	SHIELD Act	<p>SHIELD = Safeguarding Healthcare Industry Employees from Litigation and Distress This bill establishes a framework to limit interference with persons seeking to provide or access reproductive health services at the state level. The bill reduces the allocation of funds under certain law enforcement grant programs for a state that has in effect a law authorizing state or local officers or employees to interfere with persons seeking to provide or access reproductive health services. The bill authorizes civil remedies for a violation, including damages and injunctive relief. Additionally, it authorizes criminal penalties for a violation involving the use of deadly or dangerous weapon or the infliction of bodily injury.</p> <p>https://www.congress.gov/bill/118th-congress/house-bill/62/actions?s=8&r=5&q=%7B%22search%22%3A%5B%22%5C%22reproductive+health%5C%22%22%5D%7D</p>	SUPPORT	<p>09-Jan-23</p> <p>Introduced in House. Referred to the Committee on Energy Commerce, and in addition to the Committee on the Judiciary.</p>
H.R. 73 (Biggs)	No Pro-Abortion Task Force Act	<p>This bill prohibits federal funding of the Reproductive Healthcare Access Task Force. The Department of Health and Human Services launched the task force on January 21, 2022, to identify and coordinate departmental activities related to accessing sexual and reproductive health care.</p> <p>https://www.congress.gov/bill/118th-congress/house-bill/73?q=%7B%22search%22%3A%5B%22%5C%22reproductive+health%5C%22%22%5D%7D&s=8&r=7</p>	OPPOSE	<p>09-JAN-23</p> <p>Introduced in House. Referred to Committee on Energy and Commerce.</p>
H. Res. 185 (Hayes)	Declaring racism a public health crisis	<p>This resolution declares racism a public health crisis and support efforts to address health disparities and inequities across all sectors.</p> <p>https://www.congress.gov/bill/118th-congress/house-resolution/185/text?s=1&r=15&q=%7B%22search%22%3A%5B%22%5C%22HIV%5C%22%22%5D%7D</p>	SUPPORT	<p>10-MAR-23</p> <p>Referred to the Subcommittee on Health.</p>
H.R. 407 (Clyde)	Protect the UNBORN Act	<p>UNOBORN: Undo the Negligent Biden Orders Right Now This bill prohibits federal implementation of and funding for specified executive orders that address access to reproductive care services, including services related to pregnancy or the termination of a pregnancy.</p> <p>https://www.congress.gov/bill/118th-congress/house-bill/407?q=%7B%22search%22%3A%5B%22%5C%22reproductive+health%5C%22%22%5D%7D&s=8&r=6</p>	OPPOSE	<p>27-JAN-23</p> <p>Introduced in House. Referred to the Subcommittee on Health.</p>

H.R. 445 (Williams)	HHS Reproductive and Sexual health Ombuds Act of 2023	<p>This bill creates a position within the Department of Health and Human Services to support access to reproductive and sexual health services (including services relating to pregnancy and the termination of a pregnancy) that are evidence-based and medically accurate. Functions of the position include (1) educating the public about medication abortions and other sexual and reproductive health services, (2) collecting and analyzing data about consumer access to and health insurance coverage for those services, and (3) coordinating with the Federal Trade Commission on issues related to consumer protection and data privacy for those services.</p> <p>https://www.congress.gov/bill/118th-congress/house-bill/445?q=%7B%22search%22%3A%22%5C%22sexual+health%5C%22%22%7D</p>	SUPPORT	27-JAN-23 Introduced in House. Referred to the Subcommittee on Health.
H.R. 459 (Eshoo)/ S. 323 (Hirono)	SAFER health Act of 2023	<p>SAFER: Secure Access For Essential Reproductive Health</p> <p>This bill would ensure the privacy of pregnancy termination or loss under the HIPAA privacy regulations and the HITECH Act.</p> <p>https://www.congress.gov/bill/118th-congress/house-bill/459/text?s=8&r=8&q=%7B%22search%22%3A%5B%22%5C%22reproductive+health%5C%22%22%5D%7D</p> <p>https://www.congress.gov/bill/118th-congress/senate-bill/323/text?s=8&r=9&q=%7B%22search%22%3A%5B%22%5C%22reproductive+health%5C%22%22%5D%7D</p>	SUPPORT	09-FEB-23
H.R. 517 (Mace)	Standing with Moms Act	<p>This bill requires the Department of Health and Human Services (HHS) to disseminate information about pregnancy-related resources. Specifically, HHS must maintain a public website (life.gov) that lists such resources that are available through federal, state, and local governments and private entities.</p> <p>The bill excludes from life.gov, the portal and the hotline resources provided by entities (1) perform, induce, refer for, or counsel in favor of abortions; or (2) financially support such entities. The bill also requires HHS to report on traffic to life.gov and the portal, gaps in services available to pregnant and postpartum individuals, and related matters.</p> <p>https://www.congress.gov/bill/118th-congress/house-bill/517?q=%7B%22search%22%3A%5B%22%5C%22reproductive+health%5C%22%22%5D%7D&s=8&r=19</p>	OPPOSE	03-FEB-23 Referred to the Subcommittee on Health.
H.R. 561 (Lee)	EACH Act of 2023	<p>This bill requires federal health care programs to provide coverage for abortion services and requires federal facilities to provide access to those services. The bill also permits qualified health plans to use funds attributable to premium tax credits and reduced cost sharing assistance to pay for abortion services.</p> <p>https://www.congress.gov/bill/118th-congress/house-bill/561?q=%7B%22search%22%3A%5B%22%5C%22transgender%5C%22%22%5D%7D&s=8&r=8</p>	SUPPORT	21-FEB-23 Introduced in House. Referred to the Subcommittee

BILL	TITLE	DESCRIPTION / COMMENTS	Recommended Position	STATUS
				on Indian and Insular Affairs
H.R. 1224 (Trahan)	INFO for Reproductive Care ACT OF 2023	INFO= Informing New Factors and Options This bill requires the Department of Health and Human Services to carry out a campaign to educate health care professionals (and health care professions students) about assisting patients to navigate legal issues related to abortions and other reproductive health care services. https://www.congress.gov/bill/118th-congress/house-bill/1224?q=%7B%22search%22%3A%5B%22%5C%22reproductive+health%5C%22%22%5D%7D&s=8&r=4	SUPPORT	27-FEB-23 Introduced in House. Referred to the House Committee on Energy and Commerce.
<i>S. 644 (Markey)</i>	<i>Modernizing Opioid Treatment Access Act</i>	<i>This bill expands access to methadone for an individual's unsupervised use to treat opioid use disorder (OUD). The bill (1) waives provisions of the Controlled Substances Act that require qualified practitioners to obtain a separate registration from the Drug Enforcement Administration (DEA) to prescribe and dispense methadone to treat OUD, and (2) requires the Substance Abuse and Mental Health Services Administration and the DEA to jointly report on the waiver. Additionally, the bill directs the DEA to register certain practitioners to prescribe methadone that is dispensed through a pharmacy for an individual's unsupervised use. Qualified practitioners must be licensed or authorized to prescribe controlled substances, and they must either work for an opioid treatment program or be a physician or psychiatrist with a specialty certification in addiction medicine. Individuals who receive methadone for unsupervised use must continue to have access to other care through an opioid treatment program.</i> https://www.congress.gov/bill/118th-congress/senate-bill/644		01-FEB-2024 Placed on Senate Legislative Calendar under General Orders.
S. 701 (Baldwin)	Women's Health Protection Act of 2023	To protect a person's ability to determine whether to continue or end a pregnancy, and to protect a health care provider's ability to provide abortion services. https://www.congress.gov/bill/118th-congress/senate-bill/701	SUPPORT	09-MAR-23 Placed on Senate Legislative Calendar under General Orders.

Footnotes:

(1) Under Joint Rule 56, bills introduced in the first year of the regular session that do not become carry-over bills shall be returned to the Chief Clerk of the Assembly or the Secretary of the Senate.

Notes:

Items italicized in blue indicate a new status or a bill for consideration for inclusion in the docket.



LOS ANGELES COUNTY
COMMISSION ON HIV



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2024 POLICY PRIORITIES

For review by the Public Policy Committee on 4/1/24.

For over 40 years, HIV has raged in communities across the world disproportionately impacting marginalized populations, including youth, with higher rates of disease and death. The Public Policy Committee (PPC) and Commission on HIV are committed in supporting and encouraging innovative efforts to reduce bureaucracy and barriers to accessing services, increase funding, and enhance HIV and Sexually Transmitted Infection (STI) care and prevention service delivery.

The COVID-19 Global pandemic severely impacted the delivery of HIV/STI care and prevention services. The rising rates of STIs the past few years is alarming and necessitates urgent action by local, state, and federal policy makers and service delivery agencies to help mitigate the spread of HIV/STIs. Early diagnosis and treatment of STIs is vital to interrupting transmission of HIV/STIs. Nevertheless, the COVID-19 Global pandemic demonstrated that with political will, funding, and most important of all urgency, the development of rapid and safe vaccines is possible. The time to find a cure to HIV is now. With a renewed sense of optimism and urgency, the PPC remains steadfast in its commitment to universal health care, eradication of racism in all forms, and unfettered access to trauma informed care and supportive services-- including comprehensive harm reduction services-- to ensure that all people living with HIV and communities most impacted by HIV and STIs, live full and productive lives.

The PPC recommends the Commission on HIV endorse the prioritization of the following issues. The PPC will identify and support legislation, local policies, procedures, and regulations that address the following priorities in 2024 (listed in no particular order):

Funding

- a. Preserve federal funding for Medicaid, Medicare, and HIV/AIDS programs such as the Ryan White HIV/AIDS Program (RWHAP) and the Ending the HIV Epidemic (EHE) initiative.
- b. Maintain and preserve the RWHAP at current or increased funding levels and, where appropriate and strategically viable, support stronger compatibility and greater effectiveness between the RWHAP, Medicaid, and other health systems of care.

Systemic and Structural Racism

- a. Establish health equity through the elimination of barriers and addressing of social determinants of health such as: implicit bias; access to care; education; social stigma, (i.e., homophobia, transphobia, and misogyny); housing; mental health; substance abuse; income/wealth gaps; and criminalization.
- b. Reduce and eliminate the disproportionate impact of HIV/AIDS and STIs in the Black/African American community. To include the identification of and rooting out of systemic and systematic racism as it affects Black/African American communities.

- c. Address the impact of humanitarian crises on the HIV continuum of care and service delivery including HIV/STI prevention services.

Racist Criminalization and Mass Incarceration

- a. Eliminate discrimination against or the criminalization of people living with or at risk of HIV/AIDS including those who exchange sex for money (e.g., Commercial Sex Work).
- b. Support the efforts of Measure J, the Alternatives to Incarceration and closure of Men's Central Jail and seek increased funding for services and programming through Measure J as well as through redistribution of funding for policing and incarceration.

Housing

- a. Focus items b, c, and d below especially in service to LGBTQIA+ populations.
- b. Improve systems, strategies and proposals that expand affordable housing, as well as prioritize housing opportunities for people living with, affected by, or at risk of transmission of HIV/AIDS.
- c. Improve systems, strategies, and proposals that prevent homelessness for people living with, affected by, or at risk of contracting HIV/AIDS.
- d. Promote Family housing and emergency financial assistance as a strategy to maintain housing.

Mental Health

- a. Expand and enhance mental health services for people living with, affected by, or at risk of contracting HIV/AIDS.
- b. Support the building of community-based mental health services.
- c. Support the placement in mental health facilities of the estimated 4,000+ individuals currently incarcerated and in need of mental health services and support closing of Men's Central Jail.

Sexual Health

- a. Increase access to care and treatment for People Living with HIV/AIDS (PLWHA).
- b. Increase access to prevention services such as Pre-Exposure Prophylaxis (PrEP), Post-Exposure Prophylaxis (PEP), for the prevention of HIV, and Doxycycline PEP (Doxy PEP) for the prevention of STIs. Prevention services include HIV/STI screening, biomedical interventions, non-biomedical/behavioral interventions, social services, and harm reduction.
- c. Increase comprehensive HIV/STI counseling, testing, education, outreach, research, harm reduction services including syringe exchange, and social marketing programs.
- d. Maximize HIV prevention to reduce and eliminate syphilis and gonorrhea cases; especially among young Men who have Sex with Men (MSM), African American MSM, Latino MSM, transgender persons and women of color.
- e. Advance and enhance routine HIV testing and expanded linkage to care.
- f. Maintain and expand funding for access and availability of HIV, STI, and viral hepatitis services.
- g. Promote women-centered prevention services including domestic violence and family planning services for women living with and at high-risk of acquiring HIV/AIDS.
- h. Preserve full funding and accessibility to Pre-Exposure Prophylaxis Assistance Program (PrEP-AP).

Substance Use and Harm Reduction

- a. Advocate for substance abuse services to PLWHA.
- b. Advocate for services and programs associated with methamphetamine use and HIV transmission.
- c. Expand alternatives to incarceration/diversion programs to provide a “care first” strategy and move those who need services away from incarceration to substance use programs.
- d. Expand harm reduction services (including and not limited to syringe exchange, safe administration sites, over-dose prevention strategies) across all of Los Angeles Count.,
- e. Support trauma informed services for substance users.

Consumers

- a. Advocate and encourage the empowerment and engagement of People Living with HIV/AIDS (PLWH/A) and those at risk of acquiring HIV. Focusing on young MSM (YMSM), African American MSM, Latino MSM, transgender persons (especially of color), women of color, and the aging.

Aging

- a. Create and expand medical and supportive services for PLWHA ages 50 and over.

Women

- a. Create and expand medical and supportive services for women living with HIV/AIDS. This includes services such as family housing, transportation, mental health, childcare, and substance abuse.
- b. Advocate for women’s bodily autonomy in all areas of health care services including and not limited to full access to abortions, contraception, fertility/infertility services and family planning.

Transgender

- a. Create and expand medical and supportive services for transgender PLWHA.
- b. Promote and maintain funding for the Transgender Wellness Fund.

General Health Care

- a. Provide access to and continuity of care for PLWHA focusing on communities at highest risk for the acquisition and transmission of HIV disease.
- b. Fund and expand eligibility for Medicaid, Medicare, and HIV/AIDS programs and health insurance coverage for individuals with pre-existing conditions.
- c. Increase and enhance compatibility and effectiveness between RWP, Medicaid, Medicare, and other health systems. This includes restructuring funding criteria to not disincentives contractors from referring clients to other contractors.
- d. Expand access to and reduction of barriers (including costs) for HIV/AIDS, STD, and viral hepatitis prevention and treatment medications.
- e. Preserve full funding and accessibility to the AIDS Drug Assistance Program (ADAP), Office of AIDS Health Insurance Premium Payment (OA-HIPP) Assistance, Employer Based Health Insurance Premium Payment (EB-HIPP), and Medigap.
- f. Provide trauma informed care and harm reduction strategies in all HIV health care settings.

Service Delivery

- a. Enhance the accountability of healthcare service deliverables.
- b. Incorporate COVID strategies to reduce administrative barriers, increase access to health services and encourage the development of an HIV vaccine.

Data

- a. Use data, without risking personal privacy and health, with the intention of improving health outcomes and eliminating health disparities among PLWHA.
- b. Promote distribution of resources in accordance with the HIV burden within Los Angeles County.

Workforce

- a. Support legislation and policies that protect and increase workforce capacity.
- b. Support legislation and policies that incentivize people to join/stay in the HIV workforce.

The Public Policy Committee (PPC) acts in accordance with the role of the Commission on HIV, as dictated by [Los Angeles County Code 3.29.090](#). Consistent with [Commission Bylaws Article VI, Section 2](#), no Ryan White resources are used to support PPC activities.

CALIFORNIA OFFERING FREE FENTANYL TEST STRIPS THROUGH THE NALOXONE DISTRIBUTION PROJECT

WHAT YOU NEED TO KNOW: As part of his [Master Plan for Tackling the Fentanyl and Opioid Crisis](https://www.gov.ca.gov/wp-content/uploads/2023/03/Fentanyl-Opioids-Glossy-Plan_3.20.23.pdf) (https://www.gov.ca.gov/wp-content/uploads/2023/03/Fentanyl-Opioids-Glossy-Plan_3.20.23.pdf), Governor Gavin Newsom provided \$6 million to distribute free fentanyl test strips to curb the rising deaths resulting from fentanyl contamination.

SACRAMENTO — The Department of Health Care Services (DHCS) is expanding the [Naloxone Distribution Project](https://californiaopioidresponse.org/matproject/naloxone-distribution-project/) (NDP) to include fentanyl test strips (FTS), which can be obtained by eligible organizations throughout the state of California. FTS are used to detect the presence of fentanyl in drug samples prior to ingestion. NDP applicants will have the option to request naloxone, FTS, or both at no cost through the [online application](https://aurrerahealthgroup.qualtrics.com/jfe/form/SV_3aqWz9n74FH7tVs) (https://aurrerahealthgroup.qualtrics.com/jfe/form/SV_3aqWz9n74FH7tVs).

"California is committed to combatting the opioid and fentanyl crisis," said **DHCS Director Michelle Baass**. "Fentanyl test strips are a powerful tool for effective opioid-related overdose prevention. We urge our community partners to apply for this additional tool to help us tackle this crisis."

WHY THIS IS IMPORTANT: Since DHCS created the NDP and began providing free naloxone to California communities in October 2018, the program has distributed more than 3,947,000 kits of naloxone, which have been used to reverse more than 249,000 overdoses. The NDP is part of DHCS' broader efforts to increase access to medications for opioid use disorder, reduce unmet treatment need, and reduce opioid-related overdose deaths through the provision of prevention, harm reduction, treatment, and recovery activities. With the addition of FTS, the NDP hopes to further reduce opioid-related overdose deaths through the early

detection of fentanyl.

"The free Narcan provided by DHCS' Naloxone Distribution Project has saved many lives in California and in Santa Clara County," said **Santa Clara County Opioid Overdose Prevention Project Coalition Lead Mira Parwiz**. "We will be applying for fentanyl test strips made available by the project to add another level of protection against overdoses in our communities."

FENTANYL IN CALIFORNIA: DHCS partners with the California Department of Public Health (CDPH) to reduce stigma and protect Californians by increasing awareness of fentanyl and opioid overdose prevention. In 2022, there were 7,385 (<https://skylab.cdph.ca.gov/ODdash/?tab=Home>), opioid-related overdose deaths in California, up 227 percent from 2019 and largely linked to fentanyl, which is an extremely potent, synthetic opioid that is up to 50 times stronger than heroin and 100 times stronger than morphine. Illicit fentanyl can be added to other drugs to make them cheaper, more powerful, and more addictive, but the likelihood of a fatal overdose increases when fentanyl is mixed with any drug. Fentanyl has been found in many drugs, including heroin, methamphetamine, counterfeit pills, and cocaine. FTS are a form of drug testing technology that has been shown to be effective at detecting the presence of fentanyl in different drugs and drug forms (pills, powder, and injectables).

"Fentanyl test strips can be a useful addition to time-tested harm reduction strategies, such as never using alone and always carrying naloxone," said **Pike Long, Harm Reduction Specialist for CDPH**.

BIGGER PICTURE: Governor Gavin Newsom released the Master Plan for Tackling the Fentanyl and Opioid Crisis to support overdose prevention efforts. It includes ongoing investments to the NDP, distribution of FTS, grants for education, testing, recovery, and support services, and funding for opioid overdose medications for all middle and high schools in California.

Additionally, in December 2023, the Governor launched [Opioids.CA.GOV](https://www.cdph.ca.gov/Programs/CCDPPHP/opioids/Pages/landingpage.aspx) (<https://www.cdph.ca.gov/Programs/CCDPPHP/opioids/Pages/landingpage.aspx>), a one-stop-shop for Californians seeking resources around prevention and treatment, as well as information on how California is working to hold Big Pharma and drug traffickers accountable in this crisis.

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2024 TRAINING SCHEDULE

SUBJECT TO CHANGE

- “*” Asterisk denotes mandatory training for all commissioners.
- All trainings are open to the public.
- Click on the training topic to register.
- Certifications of Completion will be provided.
- All trainings are virtual.

<u>Co-Chair Roles and Responsibilities</u>	February 13, 2024 4:00-5:00PM
<u>General Orientation and Commission on HIV Overview</u> *	March 26, 2024 3:00-4:30PM
<u>Priority Setting and Resource Allocation Process & Service Standards Development</u> *	April 23, 2024 3:00-4:30PM
<u>Ryan White Care Act Legislative Overview Membership Structure and Responsibilities</u> *	July 17, 2024 3:00-4:30PM
<u>Policy Priorities and Legislative Docket Development Process</u>	October 2, 2024 3:00-4:30PM