



Susan Wengraf Councilmember District 6
 Kriss Worthington Councilmember District 7
 Sophie Hahn Councilmember District 5
 Kate Harrison Councilmember District 4

CONSENT CALENDAR
 April 25, 2017

To: Honorable Mayor and Members of the City Council

From: Councilmembers Susan Wengraf, Kriss Worthington, Sophie Hahn, and Kate Harrison

Subject: Support for SB-320 (Leyva) College Student Right to Access Act

RECOMMENDATION

Send a letter in favor of SB-320 (Leyva) urging our representatives to support this bill. Letter should be sent to State Senator Connie Leyva, State Senator Nancy Skinner, Assemblymember Tony Thurmond and Governor Brown.

FINANCIAL IMPLICATIONS

Minimal

BACKGROUND

Jointly sponsored by the Women's Foundation of California, ACCESS Women's Health Justice and ACT for Women and Girls, SB 320 (Leyva) will require UC, CSU and community college campuses with student health centers to provide medical abortion services for students. Unfortunately many students seeking early pregnancy termination are not able to receive that health care service on campus. Some students may have to travel several hours on public transportation to a clinic that provides medical abortion services, pay out of pocket and miss class or work obligations in order to access these constitutionally protected services.

SB 320 (Leyva) will help to improve the academic success of students and, if a pregnant student wishes, she will be able to receive this health care service with limited financial or logistical barriers. College aged women should not have to wait additional time or travel long-distances when they may have already decided to end their pregnancy.

This bill would require student health insurance plans offered by campuses of the University of California, California State University and California Community Colleges to include coverage of abortion as part of the student health insurance plan. The bill would require that campuses that operate on-campus health centers to offer abortion by medication techniques and scientifically accurate abortion counseling services to their students. If she so chooses, the safest time for a woman to end her pregnancy is within

the first ten weeks. Medication for early pregnancy termination is safe and effective. Most patients can return to normal activities within 1-2 days.

SB-320's origin comes both from an ASUC resolution that proposed implementing medical abortions at UC Berkeley's Tang Center, which the Women's Foundation brought to Senator Leyva's attention, and from the Senator herself, who has said that the bill has been in the works for some time. According to the Senator Leyva, this bill has been referred to the education and health committees, but should be out in the near future. It will then be sent to appropriations for cost analysis and to the senate floor. It is crucial to urge support for this bill before it gets a vote.

ENVIRONMENTAL SUSTAINABILITY
NA

CONTACT PERSON

Councilmember Susan Wengraf Council District 6 510-981-7160

Attachments:

1: Letter

2: http://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201720180SB320

AMENDED IN SENATE MARCH 16, 2017 SENATE BILL No. 320 Introduced by Senator Leyva February 13, 2017 An act to amend Section 137 of the Health and Safety Code, adding Chapter 5.5 (commencing with Section 99250) to Part 65 of Division 14 of Title 3 of the Education Code, relating to public health. legislative counsel's digest SB 320, as amended, Leyva. Women's health. Public health: public postsecondary education: student health insurance plans: on-campus student health centers: abortion by medication techniques. Existing law establishes the University of California, under the administration of the Regents of University of California, the California State University, under the administration of the Trustees of the California State University, and the California Community Colleges, under the administration of the Board of Governors of the California Community Colleges, as the 3 segments of public postsecondary education in this state. This bill would express findings and declarations of the Legislature relating to the availability of abortion by techniques at on-campus student health centers at public postsecondary educational institutions in the state. The bill would require student health insurance plans offered by campuses of the California State University and the California Community Colleges to include coverage of abortion as part of the student health insurance plan. The bill would also require, as a condition for the use of state funds for purposes of providing health 98 insurance coverage for its students, the University of California to offer coverage of abortion as part of the student health insurance plan. The bill would require campuses of the California State University and the California Community Colleges that operate on-campus health centers to offer

abortion by medication techniques and scientifically accurate abortion counseling services to their students. The bill would also require, as a condition for the use of state funds for purposes of operating on-campus health centers, each campus of the University of California that has an on-campus health center to offer abortion by medication techniques and scientifically accurate abortion counseling services to its students. Because this bill would impose new duties on community college districts, it would constitute a state-mandated local program. (2) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement. This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to the statutory provisions noted above. Existing law imposes various functions and duties on the State Department of Public Health with respect to the administration and oversight of various health programs and facilities relating to the prevention of disease and the promotion of health. Existing law requires the department to develop a coordinated state strategy for addressing the health-related needs of women, as prescribed. This bill would make technical, nonsubstantive changes to that provision. Vote: majority. Appropriation: no. Fiscal committee: no yes. State-mandated local program: no yes. The people of the State of California do enact as follows: line 1 SECTION 1. The Legislature finds and declares all of the line 2 following: line 3 (a) Abortion care is a constitutional right and an integral part line 4 of comprehensive sexual and reproductive health care. line 5 (b) Many California public higher education institutions with line 6 on-campus health centers do not currently provide abortion by 98 SB 320 — 2 — line 1 medication techniques. Abortion by medication techniques is line 2 extremely safe, highly effective, and cost effective. Abortion by line 3 medication techniques is an essential part of comprehensive line 4 women's health care, and should be accessible at on-campus health line 5 care centers. line 6 (c) Staff at on-campus health care centers include health line 7 professionals who are trained and licensed to provide abortion line 8 by medication techniques. Under current California law, all line 9 residency programs in obstetrics and gynecology include training line 10 in abortion. Clinicians who are legally authorized to provide line 11 abortion, but are not currently trained to provide abortion by line 12 medication techniques, can be trained inexpensively to do so, and line 13 such training falls within the requirements of continuing education line 14 for medical providers. line 15 (d) Students seeking early pregnancy termination, especially line 16 those enrolled at institutions outside of major urban centers, face line 17 prohibitively expensive travel, often without reliable means of line 18 transportation, to a clinic that may be hours from their campus, line 19 out of their city, county, or even geographic region. These financial line 20 and time burdens negatively impact academic performance and line 21 mental health. line 22 (e) The health insurance plans of some University of California line 23 institutions include abortion care; however, students must go off line 24 campus to access this service. Alternatively, students who are not line 25 covered by the University of California health insurance plans line 26 that include abortion, and do not have their own private insurance line 27 that covers abortion, must either pay for abortion care line 28 out-of-pocket, or apply for Medi-Cal. line 29 SEC. 2. Chapter 5.5 (commencing with Section 99250) is added line 30 to Part 65 of Division 14 of Title 3 of the Education

Code, to read: line 31 line 32 Chapter 5.5. Student Health Care Services line 33 line 34 99250. (a) (1) A student health insurance plan offered by a line 35 campus of the California State University or the California line 36 Community Colleges shall include coverage of abortion in that line 37 plan. line 38 (2) As a condition for the use of state funds for purposes of line 39 providing health insurance coverage for its students, the University

1 of California shall include coverage of abortion as part of the line 2 student health insurance plan. line 3 (b) (1) A campus of the California State University or the line 4 California Community Colleges that operates an on-campus health line 5 care center shall offer abortion by medication techniques and line 6 scientifically accurate abortion counseling services to its students. line 7 (2) As a condition for the use of state funds for purposes of line 8 operating on-campus health care centers, each campus of the line 9 University of California that has an on-campus health care center line 10 shall offer abortion by medication techniques and scientifically line 11 accurate abortion counseling services to its students. line 12 SEC. 3. If the Commission on State Mandates determines that line 13 this act contains costs mandated by the state, reimbursement to line 14 local agencies and school districts for those costs shall be made line 15 pursuant to Part 7 (commencing with Section 17500) of Division line 16 4 of Title 2 of the Government Code. line 17 SECTION 1. Section 137 of the Health and Safety Code is line 18 amended to read: line 19 137. (a) The State Department of Public Health shall develop line 20 a coordinated state strategy for addressing the health-related needs line 21 of women, including, but not limited to, the implementation of line 22 goals and objectives for women's health. line 23 (b) The approved programmatic costs associated with this line 24 strategy shall be the responsibility of the State Department of line 25 Public Health, unless otherwise provided by law.

SUPPORT FOR SB-320 (Leyva) COLLEGE STUDENT RIGHT to ACCESS ACT

Dear State Representatives and Governor Brown,

The Berkeley City Council writes in strong support of SB-320 (Leyva) which will require student health insurance plans offered by campuses of the University of California, State University and The California Community Colleges to include coverage of abortion as part of the student health insurance plan.

SB-320 would require campuses of the University of California, State University and the California Community Colleges that operate on-campus health centers to offer abortion by medication techniques and scientifically accurate abortion counseling services to their students.

Jointly sponsored by the Women's Foundation of California, ACCESS Women's Health Justice and ACT for Women and Girls, SB 320 (Leyva) will require UC, CSU and community college campuses with student health centers to provide medical abortion services for students. Unfortunately many students seeking early pregnancy termination are not able to receive that health care service on campus. Some students may have to travel several hours on public transportation to a clinic that provides medical abortion services, pay out of pocket and miss class or work obligations in order to access these constitutionally protected services.

SB 320 (Leyva) will help to improve the academic success of students and, if a pregnant student wishes, she will be able to receive this health care service with limited financial or logistical barriers. College aged women should not have to wait additional time or travel long-distances when they may have already decided to end their pregnancy.

Sincerely,

Berkeley City Council
