

# AB 2320 – CRISTINA GARCIA

## Reproductive Health Clinic Initiative for Innovative Care (RH CLINIC)

### SUMMARY

AB 2320 would establish a pilot program for five counties in California to support capacity building for primary care clinics providing reproductive healthcare services. This bill would put the experts, *clinicians and client-facing staff*, in the driver's seat of change to develop practices that are responsive to the specific needs of their client populations.

AB 2320 would establish a grant program to provide flexible, financial assistance for primary care clinics to invest in four key areas that promote comprehensive care:

- Staff trainings rooted in reproductive justice principles and trauma-informed care, with a focus on serving historically marginalized patients (e.g., people of color, people who are LGBTQ+, people who have limited English proficiency (LEP), and survivors of domestic and sexual violence)
- Spoken language translation services for LEP patients, particularly for languages not identified as threshold languages
- Sustainable partnerships with community-based organizations (e.g., domestic violence centers, homeless shelters, etc.) to strengthen wraparound care
- Data evaluation to measure pilot efficacy and identify unmet health needs

AB 2320 will invest in primary care clinic capacity in order to address the persistent barriers marginalized populations face when accessing reproductive healthcare.

### PROBLEM

Primary care clinics are an important source of [primary care](#) for Medicaid recipients, uninsured people, people of [racial and ethnic minorities](#), [low-income](#) people, people from [rural](#) communities, and people who are otherwise unable to access a physician's office. Research shows that primary care clinics are effective in providing quality, [community-centered healthcare](#). However, CHCs continue to face significant [funding and resource challenges](#), which has only been worsened by COVID-19.

With Texas's recent ban on abortions and an impending Supreme Court decision that would effectively repeal *Roe v. Wade*, the future of reproductive rights remains in jeopardy. [Projections](#) indicate that an estimated 1.3 million people will travel from other states to seek reproductive healthcare in California.

Without intervention, the impacts of the pandemic and reproductive healthcare restrictions can leave vulnerable communities without proper access to quality, dignified, and affordable healthcare.

### BACKGROUND

California is the most populous and most diverse state in the U.S., with primary care clinics uniquely positioned as access points that provide essential clinical services for community members. Unfortunately, many CHCs do not have adequate resources to address the intersecting identities and [complex needs](#) of their patients, and this can impact community health.

A [case study](#) assessing reproductive health services for low-income women in Tulare County, California, found that some health care providers bypassed screening for domestic violence among clients because they felt ill-equipped to address a client's needs if abuse was disclosed. The study identified case management, wraparound services, and training for healthcare staff as meaningful ways to improve health outcomes for historically marginalized populations. Similar interventions were recommended by the recent [California Future of Abortion Council report](#).

Californians would benefit from an innovative that empowers primary care clinic clinicians and staff to tailor their reproductive healthcare services to the communities they serve. Investing in primary care clinics capacity to improve reproductive healthcare for marginalized patients can [save thousands of lives each year](#) and could save the state [billions of dollars](#) in future healthcare spending.

### STATUS

## **FOR MORE INFORMATION**

---

Contact: Sulema Landa  
Phone: (916) 319- 2058  
Email: [Sulema.Landa@asm.ca.gov](mailto:Sulema.Landa@asm.ca.gov)