

CFA Report to CAFE – November 2, 2024

Dr. Rosalinda Quintanar

CFA has been active with phone banking and texting to get out the vote on November 5, 2024.

CFA has a very active Immigration Task Force. We usually discuss our DACA students and students without documentation. A professor from CSU Long Beach that attended CAFE two years ago – Armando Vazquez Ramos passed away recently. He was outstanding in many ways, and he became well known with his Study Abroad Program. Dr. Vazquez Ramos was able to bring them in on Deferred Parole Status, which allowed them to have legal status. We had a ceremony on his honor attended by his daughter.

Some news we discussed that we discussed in the Taskforce were the following:



Golden Valley Health Center's Paradise Clinic in Stanislaus County is shown. The CEO of the health center, one of the Valley's largest health systems, has voiced support for a new law that will make it easier for doctors from Mexico to practice in California. Credit: [Marijke Rowland / Central Valley Journalism Collaborative](#)

Reading Time: 5 minutes

A bill signed into law Saturday by Governor Gavin Newsom could help address the San Joaquin Valley's severe doctor shortage by making it easier for licensed physicians and dentists from Mexico to practice here.

Authored by Assemblymember Eduardo Garcia, D-Coachella, [Assembly Bill 2860](#) seeks to fill critical gaps in healthcare by allowing Mexican doctors to work in California for three years.

The bill faced no opposition in the Assembly and Senate. The program included in the law builds on an earlier pilot project that brought Mexican physicians to help California's underserved communities.

The [Licensed Physicians and Dentists from Mexico Pilot Program](#), established in 2002 under Assembly Bill 1045 by Assemblymember Marco Antonio Firebaugh, laid the groundwork for this effort.

The original program recruited 30 physicians and 30 dentists from Mexico to practice in underserved areas.

While [addressing the Assembly](#) back in May, Garcia said the program has a high level of medical quality that has improved healthcare access for communities in need. Garcia said those doctors can address the language and cultural competency barriers that exist in many California communities.

“The program has had an emphasis in communities like Los Angeles, Central Valley, Salinas Valley, and many other communities are seeking out this program to come to their communities,” Garcia said.

AB 2860 removes the previously required English as a Second Language (ESL) classes. It replaces them with a straightforward English proficiency test like the TOEFL (Test of English as a Foreign Language).

It also shortens the orientation program, allowing physicians from Mexico to integrate more efficiently into California’s healthcare system.

The program accelerates hiring by emphasizing electronic medical records (EMRs) and streamlining the collaboration between Mexican recruitment teams and local health centers.

David Quackenbush, CEO of [Golden Valley Health Centers \(GVHC\)](#), explained that the private nonprofit, federally qualified health system has capacity at its 45 clinic sites across Merced, Stanislaus, and San Joaquin counties.

“We have space in our health centers right now today where we can hire a provider, put them in an exam room, and have the support staff,” he said.

GVHC serves about 150,000 patients through approximately 600,000 visits each year and has the need for more providers, according to Quackenbush.

“Out of our 150,000 patients, 75% are Latino,” he said. “The Doctors for Mexico program will bring in (and) recruit providers from Mexico ... providing care for the exact populations they served back in Mexico.”

The GVHC recruitment team, Quackenbush said, is looking to recruit doctors from the Mexican states of Zacatecas, Jalisco and Michoacan.

While GVHC also provides dental services, Quackenbush emphasized their greatest need is for primary care doctors.

“We’re focused on primary care because those are the hardest doctors to find and recruit,” he said. “Most students go into specialties because they’re more lucrative and less challenging.”

Physician recruitment remains a challenge

Data shows the Valley faces an acute shortage of primary care doctors. There are only about [47](#) physicians per 100,000 residents in the San Joaquin Valley, far below the federal recommendation of 60 to 80 per [100,000](#).

This shortage is expected to worsen as the population grows and a significant portion of the current workforce approaches [retirement](#).

The [situation](#) has led to longer patient wait times and limited access to preventative care, particularly in rural areas, where residents increasingly rely on rural health clinics for care.

This issue is critical in regions like [Merced County](#), where about 51% of the population relies on Medi-Cal, the state's Medicaid program.

The severity of the doctor [shortage](#) in the San Joaquin Valley is further exacerbated by the challenges of recruiting qualified healthcare providers to work in rural and underserved areas.

Despite the growing demand, the region has struggled to attract enough doctors to meet its needs, according to Quackenbush.

"Our biggest challenge, historically, is recruiting enough healthcare providers to take care of our ever-growing patient population," he said.

The expansion of Medi-Cal, which now provides medical benefits to almost [everyone](#) based on income, has significantly expanded healthcare coverage.

"We are 100% in support of Medi-Cal's expansion," Quackenbush said, noting that the healthcare workforce hasn't kept pace with the demand. "People aren't choosing healthcare as much as before... It's very expensive to go to any kind of medical school, and the providers just haven't kept up."

The growing patient population in the San Joaquin Valley and the lack of available providers have forced GVHC to be creative in its recruitment efforts.

"We recruit in every way possible," Quackenbush said, listing recruitment agencies, community collaborations, and partnerships with universities among the strategies. "It's always going to be a challenge... but that's just part of the system in which we provide services."

Timeline for start

Although the program offers a promising solution, bringing physicians from Mexico presents a challenging situation due to international recruitment and logistical hurdles.

"The program is a little more detailed and a little more complex because we're working with recruiters in another country and doing interviews via Zoom," Quackenbush explained.

While the new law takes effect in January 2025, the recruitment process will take longer.

"My understanding is that providers will be ready to work around the beginning of 2026," said Quackenbush.

GVHC has already begun preparations for the program's rollout.

"We've brought together a team across our organization to plan and prepare for this," Quackenbush said.

He emphasized the need for careful coordination between California and Mexico to ensure the recruitment process runs smoothly.

"The recruitment team from Mexico is coming to our health center on Sept. 23 for a site visit to check out our sites and the conditions where the providers will be working," he said. "We're also preparing marketing materials to explain who we are and tell them about the value of working with us."

Once the recruitment pool is established early next year, GVHC will set up interviews, finalize contracts, and onboard providers.

Quackenbush hopes to recruit 10 new physicians through the program every three years. Each doctor is expected to handle approximately 3,000 patient visits annually, which is expected to enhance Golden Valley Health Centers' healthcare capacity greatly.

"The ability to add 10 new doctors at a time will be a game-changer for our region," he said.

What happens after three years?

Physicians participating in the program will be required to return to their communities in Mexico once their three-year license expires.

Quackenbush explained this aspect of the program was a fundamental part of its original design.

"The whole point was not to decrease the capacity of providers in Mexico," he said. "This was to help out Mexican immigrants in California while training physicians on innovative practices that we may have here in the U.S."

Once their three-year term is complete, those selected will return to Mexico to continue serving their original communities, now equipped with new skills and knowledge.

"The program's three years long, and we should get a new group of providers every three years," Quackenbush said, underscoring the cyclical nature of the initiative that benefits both California's underserved populations and Mexico's healthcare systems.

Addressing concerns from opponents

Some critics have raised concerns about the differences in licensing standards between the U.S. and Mexico.

Quackenbush's response was clear: "The Medical Board of California would never approve the license if it was a different level of care."

He explained that all physicians in the program undergo a stringent recruitment and onboarding process, ensuring they meet the same standards as U.S.-trained doctors.

"The quality will absolutely be the same," Quackenbush reiterated, emphasizing that the recruitment process applies regardless of where a physician is from. "We have a recruitment and onboarding process that includes background checks, licensure, and credential reviews, all of which are verified by the Medical Board of California and the health insurance plans."

Having been involved in the early stages of the original program in 2002, Quackenbush expressed confidence in the high standards maintained by the Mexican doctors.

"I know the quality is high and appropriate for our patient population," he said. "If it wasn't, I wouldn't be part of the program. If this program or any other program brought providers that didn't meet that standard, we wouldn't do the program."

Sponsored/Co-Sponsored Legislation

SB 11 2023-2024 Regular Session (Menjivar) - California State University: mental health counseling. Summary: This bill would require the trustees to comply with various requirements on mental health counseling at CSU, including having one full-time equivalent California-licensed mental health counselor per 1,500 students enrolled at each CSU campus. The bill, contingent upon appropriation by the Legislature, would establish the CSU Mental Health Professionals Act to provide one-time grants to certain CSU students to become mental health counselors in the state. The bill, contingent upon appropriation by the Legislature, would establish the Mental Health Professionals Fund as the depository of moneys appropriated or otherwise received for the program, and upon appropriation by the Legislature, would require the Department of Health Care Access and Information to disburse moneys in the fund under the act. The bill would define "mental health counselor" for purposes of these provisions.

Sponsor/Co-sponsor

SB 1263 2023-2024 Regular Session (Newman) - Teacher credentialing: teaching performance assessment: workgroup. Summary: This bill would, subject to the availability of funds in the annual Budget Act, require the commission to report the number of programs of professional preparation with low pass rates and assist those programs to use evidence-based strategies to support candidates to pass the assessment. The bill would prohibit the charging of fees to candidates for these instructional supports. The bill would additionally require the commission to maintain a secondary passing standard for the performance assessment that may be used, with consideration of other evidence of the candidate's performance related to the California Standards for the Teaching Profession, for a program sponsor's recommendation of a candidate to the commission for a teaching credential. Connection: Position: Education/Stu

AB 2224 2023-2024 Regular Session (Santiago) - Special immigrant juvenile status: court orders and guardianship. Summary: This bill would authorize a court to appoint a parent as the guardian of the person of their unmarried child who is 18 years of age or older, but who has not yet attained 21 years of age, under those provisions. The bill would also make technical and conforming changes to related provisions.

AB 2349 2023-2024 Regular Session (Wilson) - Public postsecondary education: Cal-Bridge Program. Summary: This bill would establish the Cal-Bridge Program as an intersegmental partnership program between the California Community Colleges, the California State University, and the University of California with a mission of creating a pathway that promotes the advancement of California's diverse undergraduate public postsecondary student population majoring in science, technology, engineering, and mathematics (STEM) disciplines to pursue STEM doctors of philosophy (PhDs) and become members of California's professorate or leaders in California's technology industry. The bill would specify the goals

of the program, including, among other goals, the goal of preparing students to apply to PhD programs in STEM disciplines, particularly University of California STEM PhD programs. The bill would include 3 Cal-Bridge subprograms to provide resources, research opportunities, and financial support to qualifying public postsecondary undergraduate, PhD, and postdoctoral STEM scholars in their pursuit of becoming members of the California's professorate or leaders in California's technology industry. The bill would authorize funding appropriated for purposes of the program to be used for specified activities. The bill would apply to the University of California only to the extent that the Regents of the University of California by appropriate resolution make it applicable. The program would be implemented only upon an appropriation by the Legislature for its purposes. Connection: Position: Education/Student

Summary: This bill would codify the CMC program and would require the department to annually select one county office of education to voluntarily administer the CMC program for the next fiscal year and would require the chosen county office of education to operate not less than 20 program sites at institutions of higher education and, on or before June 1 of each year, provide the identity of tutors from the 6 prior fiscal year's cohorts to the Commission on Teacher Credentialing, as provided. The bill would require the commission to, on or before July 31 of each year, report to the department which tutors from the 6 prior fiscal year's cohorts earned a preliminary teaching credential, as provided. The bill would require the department to, on or before December 1 of each year, provide an annual report to the Legislature and the Department of Finance that includes the number of currently migratory children served by the program statewide and includes the data reported by the commission, as provided. The bill would require the department to annually report on its internet website the total number of migrant children statewide, as provided. Connection: Position: Education/Stude

AB 2222 2023-2024 Regular Session (Blanca Rubio) - Science of Reading: accreditation: professional development: instructional materials. Summary: This bill would, among other things, require the commission, on or before January 1, 2027, to update its literacy standards of program quality and effectiveness, literacy teaching performance expectations, and literacy instruction preconditions for program sponsors offering Reading and Literacy Leadership Specialist Credentials and Reading and Literacy Added Authorizations, or any other reading- or literacy-specific credential, certification, or authorization developed by the commission, in order to ensure compliance with effective means of teaching literacy, as defined, and adherence to the science reading, as provided. Connection: Position: Education

SB 11 2023-2024 Regular Session (Menjivar) - California State University: mental health counseling. Summary: This bill would require the trustees to comply with various requirements on mental health counseling at CSU, including having one full-time equivalent California-licensed mental health counselor per 1,500 students enrolled at each CSU campus. The bill, contingent upon appropriation by the Legislature, would establish the CSU Mental Health Professionals Act to provide one-time grants to certain CSU students to become mental health counselors in the state. The bill, contingent upon appropriation by the Legislature, would establish the Mental Health Professionals Fund as the depository

of moneys appropriated or otherwise received for the program, and upon appropriation by the Legislature, would require the Department of Health Care Access and Information to dis

B 252 2023-2024 Regular Session (Gonzalez) - Public retirement systems: fossil fuels: divestment. Summary: This bill would prohibit the boards of the Public Employees' Retirement System and the State Teachers' Retirement System from making new investments or renewing existing investments of public employee retirement funds in a fossil fuel company, as defined. The bill would require the boards to liquidate investments in a fossil fuel company on or before July 1, 2031. The bill would temporarily suspend the above-described liquidation provision upon a good faith determination by the board that certain conditions materially impact normal market mechanisms for pricing assets, as specified, and would make this suspension provision inoperative on January 1, 2035. The bill would provide that it does not require a board to take any action unless the board determines in good faith that the action is consistent with the board's fiduciary responsibilities established in the California Constitution. .

AB 2090 2023-2024 Regular Session (Irwin) - Office of Farm to Fork: food deserts: transportation. Summary: This bill would require the office to also work with transportation agencies to increase the amount of agricultural products available to underserved communities and schools in the state, and to prioritize the department's efforts in food deserts, as defined, throughout the state, especially cities and counties that are most impacted by food insecurity, as defined. 10 / 18 Exported Mon, Sep 30, 2024 The bill would require the office to work to overcome those identified distribution barriers by also facilitating partnerships between statewide, regional, and local transportation agencies to address inadequate public transportation lines in urban and rural communities, with the aim of connecting all communities to adequate and nutritional food access, as provided. The bill would require the office to coordinate with school districts and representatives to assess access to school breakfast

AB 2200 2023-2024 Regular Session (Kalra) - Guaranteed Health Care for All. Summary: This bill, the California Guaranteed Health Care for All Act, would create the California Guaranteed Health Care for All program, or CalCare, to provide comprehensive universal single-payer health care coverage and a health care cost control system for the benefit of all residents of the state. Under the bill, CalCare would be a health care service plan subject to Knox-Keene. The bill, among other things, would provide that CalCare cover a wide range of medical benefits and other services and would incorporate the health care benefits and standards of other existing federal and state provisions, including the federal Children's Health Insurance Program, Medi-Cal, ancillary health care or social services covered by regional centers for persons with developmental disabilities, Knox-Keene, and the federal Medicare Program. The bill would make specified persons eligible to enroll as CalCare members during the implementation period, and would provide for automatic enrollment. The bill would require the board to seek all necessary waivers, approvals, and agreements to allow various existing federal health care payments to be paid to CalCare, which would then assume responsibility for all benefits and services previously paid for with those funds. and lunch programs during scheduled academic calendar breaks and school closures.

