

**SB 1375 – Nurse Practitioners: Access to Reproductive Care**

**IN BRIEF**

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SB 1375 would increase access and affordability in healthcare and abortion services for all Californians. Specifically, the bill would make necessary clarifications to existing law that allows nurse practitioners (NPs) that meet specified criteria to practice independently without physician supervision. SB 1375 will also address the shortage of health care professionals able to provide early abortion care by allowing NPs authorized to practice independently to provide first trimester abortion care without physician supervision.

**BACKGROUND**

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AB 890 (Wood, Ch. 2020) authorizes NPs who meets certain requirements to practice without physician supervision. The law allows NPs to utilize the full extent of their education and training and expands access to high-quality care, particularly for underserved areas and populations. AB 890 (Wood, Ch. 2020) defines eligibility requirements for NPs to practice independently, including certification from a nationally accredited certifying entity and completion of postgraduate transition to practice (TTP) requirements in California. Under AB 890 (Wood, Ch. 2020) , the TTP is a period of time intended to allow newly licensed NPs to receive hands on experience and mentoring, working under physician supervision, for a period of three full-time equivalent years of practice or 4600 hours.

AB 154 (Atkins, Ch. 2013) increased the types of trained health professionals who can provide early abortions by allowing NPs, certified nurse midwives, and physician assistants to perform early abortions safely within the terms of their licenses.

**THE ISSUE**

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The California Future of Health Workforce Commission – composed of a statewide group of senior leaders across multiple sectors, including health, education, employment, labor, and government – found that in just 10 years, California will face a shortfall of over 4,100 primary care clinicians. The Commission also noted this shortage will have a disproportionate impact on the 7 million Californians that live in Health Professional Shortage Areas (HPSA), a federal designation for counties experiencing shortfalls of primary care, dental care, or mental health care providers. With the

vast majority HPSA populations being Latino, Black, and Native American, this raises serious concerns about the impact of California’s workforce shortage on health equity and access.

The Commission provided recommendations in a February 2019 report aimed at improving the ability of California’s health workforce to meet the changing needs of the state’s diverse population. One of the Commission’s primary recommendations is to maximize the role of NPs and expand their practice authority, which AB 890 (Wood, Ch. 2020) seeks to implement.

To realize the full intent and benefit of AB 890 (Wood, Ch. 2020), additional clarification is needed to ensure NPs are recognized as independent providers. A significant issue with the TTP requirement as currently drafted is the lack of recognition for how NPs with many years of supervised practice experience would be able to apply that experience moving forward independently. Until there is clarity around which NPs the TTP will apply to, many of California’s most experienced NPs are not able to work without physician supervision.

While AB 154 (Atkins, Ch. 2013) expanded California’s abortion-providing workforce, significant obstacles remain. Over 40 percent of California, counties do not have clinics that provide abortions. Additionally, last year the U.S. Supreme Court began reviewing a direct challenge to the long-standing legal protections of abortion services under *Roe v. Wade*.

The California Future of Abortion Council, established in 2021, - comprised of reproductive freedom and sexual and reproductive health care allies, partners, and leaders – outlined several policy recommendations to protect, strengthen, and expand access to abortion care. The Council’s recommendations include addressing workforce barriers allied health professionals, like NPs, face when providing reproductive and abortion care.

**THE SOLUTION**

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SB 1375 will clarify that NPs who have been practicing for three or more years satisfy the TTP requirement established in AB 890 (Wood, Ch. 2020). The bill would also allow NPs to utilize prior practice experience to satisfy the TTP. Lastly, SB 1375 will

update statutes relating to early abortion services to allow NPs qualified to practice independently to provide first trimester abortion care. These changes will allow thousands of experienced California NPs, many of whom have been practicing in good standing for decades, to begin expanding access to critically-needed health care services.

## **SUPPORT**

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- California Association for Nurse Practitioners (Sponsor)
- Abortion Care Training Incubator for Outstanding Nurse Scholars (ACTIONS)
- Advancing New Standards in Reproductive Health (ANSIRH)
- American Nurses Association\California
- California Hospital Association
- California Nurse-Midwives Association
- Govern for California
- NARAL Pro-Choice California
- Nevada County Citizens for Choice
- Planned Parenthood Affiliates of California
- Service Employees International Union, California State Council
- NARAL Pro-Choice California
- Training in Early Abortion for Comprehensive Healthcare (TEACH)
- Women's Health Specialists

## **FOR MORE INFORMATION**

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