



**PODIATRIC MEDICAL BOARD OF CALIFORNIA
BOARD MEETING
June 18, 2026**

SUBJECT: LEGISLATIVE PROGRAM REPORT

Committee Members

Devon Glazier, DPM Chair
Samantha Chang

ACTION: RECEIVE AND FILE STATUS REPORT

1. LEGISLATIVE UPDATE

AB 1591 -California Podiatric Pipeline Program

Assembly Member, Michelle Rodriguez, 1.15.26. Referred to Committee on Health 6.3.26.

Existing law establishes the Department of Health Care Access and Information under the control of the Director of the Department of Health Care Access and Information, to administer various health professions development programs. Existing law requires the department to maintain a Health Professions Career Opportunity Program to, among other things, implement programs at colleges and universities selected by the department and include in those programs pipeline programs that provide comprehensive academic enrichment, career development, mentorship, and advising in order to support students from underrepresented regions and backgrounds to pursue health careers.

Existing law creates within the department the Health Professions Education Fund, for the primary purpose of providing scholarships and loans to students from underrepresented groups who are accepted to or enrolled in schools of medicine, dentistry, nursing, or other health professions. Existing law authorizes the department to receive private donations to be deposited into the fund and continuously appropriates all money in the fund to the department for those purposes.

This bill would enact the California **Podiatric** Pipeline Program Act, to require the department to establish and administer the California **Podiatric** Pipeline Program to promote careers in **podiatric** medicine and support the educational advancement of California residents pursuing the doctor of **podiatric** medicine degree, as specified. The bill would specify that the department may use funds from the Health Professions Education Fund for the purposes of this bill, subject to the requirements of the fund. This bill would authorize the department to award planning or coordination grants to participating universities or colleges to support implementation of the program as funding is made available. The bill would also require the department, subject to an appropriation by the Legislature, to annually report to the Legislature regarding the number of students participating, the number matriculating into doctor of podiatric medicine programs and recommendations for expanding residency for podiatric

graduates. The Board may take a vote in support of this proposed bill. See Attachments A-D for proposed text and analysis.

2. Regulatory Update

PMBC has begun a current review of Disciplinary Guidelines and is beginning the internal process of updating the text and preparing the required documents to present the matter to the PMBC Board for review and approval. There is a new working group that that consists of 13 boards that are working together regarding Disciplinary Guidelines.

PMBC is also preparing to submit a Section 100 regulatory change that will update language regarding the required CE for renewing doctors of podiatric medicine.

ATTACHMENTS

ATT A – AB 1591 Assembly Health

ATT B – AB 1591 Assembly Higher Education

ATT C – AB 1591 Assembly Appropriations

ATT D – Assembly

ATT E – AB 1591 – Text

Prepared by: Kathleen Cooper

Kathleen Cooper, Legislative Analyst

Brian Naslund, Executive Officer

ATTACHMENT A

Date of Hearing: March 24, 2026

ASSEMBLY COMMITTEE ON HEALTH

Mia Bonta, Chair

AB 1591 (Michelle Rodriguez) – As Introduced January 15, 2026

SUBJECT: California Podiatric Pipeline Program.

SUMMARY: Requires the Department of Health Care Access and Information (HCAI) to establish and administer the California Podiatric Pipeline Program to promote careers in podiatric medicine and support the educational advancement of California residents pursuing the doctor of podiatric medicine degree. Specifically, **this bill:**

- 1) Requires HCAI, in consultation with the California State University, the University of California, the Podiatric Medical Board of California, the California Podiatric Medical Association, and accredited schools of podiatric medicine in California, to take actions that include, but are not limited to, all of the following:
 - a) Developing partnerships and agreements that link undergraduate institutions with California podiatric medical schools;
 - b) Providing mentorship, outreach, and clinical-shadowing opportunities for undergraduate students interested in podiatric medicine;
 - c) Creating a structured pathway for eligible students to receive early admission consideration to participating podiatric medical schools, contingent on meeting academic and professional benchmarks; and,
 - d) Prioritizing recruitment of students from underrepresented, rural, or medically underserved areas of the state.
- 2) Authorizes HCAI to award planning or coordination grants to participating universities or colleges to support implementation of this program as funding is made available.
- 3) Authorizes HCAI to use funds from the Health Professions Education Fund (HPEF) for the purposes of this bill.
- 4) Requires HCAI, subject to an appropriation by the Legislature, to annually report to the Legislature on the number of students participating, the number matriculating into doctor of podiatric medicine programs, and recommendations for expanding residency opportunities for podiatric graduates.

EXISTING LAW:

- 1) Establishes HCAI to, among other functions, collect, analyze, and publish data about healthcare workforce and health professional training, identify areas of health workforce shortages, and provide scholarships, loan repayments, and grants to students, graduates, and institutions providing direct patient care in areas of unmet need. [Health and Safety Code (HSC) § 127000, § 127825, *et seq.*]

- 2) Establishes the Health Professions Education Fund within HCAI to provide loans to students. Authorizes HCAI to receive private donations and specifies that all money in the fund is continuously appropriated to HCAI. [HSC § 128355]

FISCAL EFFECT: Unknown. This bill has not been analyzed by a fiscal committee.

COMMENTS:

PURPOSE OF THIS BILL. According to the author, California is facing a growing shortage of Doctors of Podiatric Medicine (DOPMs'), particularly in rural and underserved communities. More than half of our counties lack adequate podiatric coverage, and nearly one quarter of the current workforce is expected to retire within five years. At the same time, enrollment in podiatric medical schools is declining, threatening our ability to meet future demands. The author states that this shortage has serious consequences. Diabetes disproportionately impacts low-income communities and communities of color, and limited access to specialized foot care contributes to preventable hospitalizations and amputations. Yet, current law does not provide a structured pathway to recruit and prepare students, especially those from underrepresented backgrounds, for careers in podiatric medicine. The author states that this bill creates a coordinated undergraduate to medical school pathway to expand the workforce, increase diversity in the profession, and improve access to preventive care in underserved areas. The author concludes that this bill is a proactive step toward protecting mobility, preventing amputations, and ensuring equitable access to essential podiatric services statewide.

1) BACKGROUND.

- a) **DOPMs.** DOPMs are podiatric physicians and surgeons, qualified by their education, training, and experience to diagnose and treat conditions affecting the foot, ankle, and related structures of the leg. Podiatric medicine is a medical sub-specialty, focused on a specific part of the anatomy similar to other sub-specialties, such as ophthalmology and cardiology. Within the field of podiatric medicine and surgery, podiatrists can focus on specialty areas such as surgery, sports medicine, biomechanics, geriatrics, pediatrics, orthopedics, or primary care. DOPMs receive basic and clinical science education and training comparable to that of medical doctors including: four years of undergraduate education focusing on life sciences; four years of graduate study in one of the nine podiatric medical colleges; and, at least three years of postgraduate, hospital-based residency training.

According to the 2026 National Diabetes Statistics Report from the Centers of Disease Control and Prevention (CDC) over 40 million Americans, or 12% of the population, are living with diabetes. Over 2 million Americans are living with type 1 diabetes, including about 314,000 children and adolescents. Of the 40.1 million people living with diabetes, 29.1 million have been diagnosed, and 11 million are undiagnosed. Just over 28% are 65 and older. An estimated 1.5 million Americans are diagnosed every year. Over 115 million Americans age 18 and older are living with prediabetes. About 364,000 Americans under age 20 are estimated to have diagnosed diabetes, approximately 0.45% of that population. The rates of diagnosed diabetes in adults for 2021-2023:

- (1) 15.7% American Indian or Alaskan Native;
- (2) 12.2% Black, non-Hispanic;

- (3) 11.8% Hispanic, overall;
- (4) 9.7% Asian, non-Hispanic; and,
- (5) 7.1% white, non-Hispanic.

Approximately 3.5 million adults in California, or 10.5% of the adult population, have diagnosed diabetes, with significant economic impacts and health complications associated with the disease. According to the American Diabetes Association in California, diagnosed diabetes costs an estimated \$47.5 billion each year. In 2022, total direct medical expenses for diagnosed diabetes in California were estimated to be \$34.1 billion. In addition, there were \$13.4 billion in estimated indirect costs from lost productivity due to diabetes. According to a 2017 University of California Los Angeles Center for Health Policy Research brief, “Podiatric foot health screening could save millions by preventing diabetic amputations,” allowing podiatrists to give diabetic patients regular foot health screenings, which are usually done by primary care doctors, could save limbs, lives and money. As many as 1 in 4 diabetic Californians develop damaging toe, foot and leg ulcers which could lead to amputation and elevated risk of death, according to the brief.

- b) **Declining DOPM school enrollment.** California is home to two schools of podiatric medicine, Western U College of Podiatric Medicine in Pomona, and the California School of Podiatric Medicine at Samuel Merritt University in Oakland. In 2024-2025, Western U was at 62% capacity (38% of seats open) for the matriculating first year cohort. Samuel Merritt was at 52% capacity the same year.
- c) **HCAI.** HCAI administers numerous workforce programs, as well as providing loans and scholarships to health care professionals.
 - i) **The Health Professions Pathways Program (HPPP)** is designed to recruit and support students from underrepresented regions and backgrounds to pursue health careers. HPPP includes pipeline programs, summer internships, and post undergraduate fellowships. HPPP is a competitive grant opportunity to award organizations that will develop and implement health professions pathways programs that can include pipeline programs, summer internships, and post undergraduate fellowships.

Including podiatrists, the following disciplines are eligible HPPP, Primary Care, Behavioral Health, Nursing, Oral Health, and Allied Health. Awarded programs were eligible to receive up to \$575,000 annually for up to 5 years to support at least 240 students per academic year. Based on previous award levels, each pipeline program awarded for 5 years would require approximately \$2.9 million per pipeline program.
 - ii) **The Allied Healthcare Scholarship Program (AHSP)** has historically supported podiatrists, among other health care professions. This program is no longer active, as it was funded exclusively through donations, and all available funds have been exhausted. Over the past five years, program records indicate that no podiatrists have applied for or received awards from the AHSP.

- iii) The Allied Healthcare Loan Repayment Program (AHLRP)** also supports podiatrists. Over the past five years this program made several awards to podiatrists, including one award of \$16,000 in 2021, two awards of \$16,000 each in 2022 (totaling \$32,000), and one award of \$16,000 in 2025. In total, the AHLRP has awarded \$64,000 to podiatrists during this period.
- iv) The Health Professions Education Fund (HPEF)** is funded solely through donations. All donated funds have been fully allocated, and HPEF has not received any new contributions to support new programs. HPEF previously supported the following programs:
- (1) Licensed Mental Health Services Provider Education Program Loan Repayment;
 - (2) Bachelor of Science Nursing Loan Repayment Program;
 - (3) Licensed Vocational Nurse Loan Repayment Program;
 - (4) Steven M. Thompson Physician Corps Loan Repayment Program;
 - (5) Associate Degree Nursing Scholarship Program;
 - (6) Bachelor of Science Nursing Scholarship Program;
 - (7) Licensed Vocational Nurse to Associate Degree Nursing Scholarship Program;
 - (8) Vocational Nurse Scholarship Program;
 - (9) Advanced Practice Healthcare Scholarship Program; and,
 - (10) Allied Healthcare Scholarship Program.

HPEF does not receive General Fund support, it has been supported solely through donations. HPEF currently has an estimated \$8.2 million in funds. Of the total funds, \$5 million belongs to Covered California's Population Health Investments program, and \$3.2 million is designated for scholarships and loan repayment purposes. HCAI does not consider these funds to be usable or available for discretionary spending, as they are restricted to their dedicated purposes.

Prior to 2023, HCAI received \$15.2 million annually in General Fund support for the Health Professions Careers Opportunity Program (HPCOP). HPCOP funds support the Health Professions Pathway Program (HPPP), the Health Careers Exploration Program (HCEP), and the Justice-System Involvement Youth: Behavioral Health Pipeline (JSIY BH Pipeline). In the 2023 Budget Act, \$12.3 million of the annual \$15.2 million allocation was cut, and ongoing HPCOP funding was discontinued. As a result, HCAI does not currently have sufficient funding to open a new HPPP application cycle. Based on prior award levels and program costs, HCAI estimates it would need approximately \$5 million to consider launching a cycle and even at that level, the program would likely be limited to a small number of awards.

However, HCAI has received \$5 million from Covered California to administer a customized variation of HPPP called HPPP-Population Health Investments (PopHI).

Covered California directed several of its Qualified Health Plans to transmit funds to HCAI totaling \$5 million. HCAI intends to open its first HPPP-PopHI cycle on August 16, 2026. This initiative is aimed at improving health outcomes and reducing disparities for enrollees. It establishes direct financial incentives (up to 4% of premiums) for contracted health insurance companies to meet specified quality benchmarks. The health outcome measures assessed include blood pressure and diabetes control, colorectal cancer screenings and childhood immunizations.

2) SUPPORT. The California Podiatric Medical Association (CPMA) is the sponsor of this bill and states that California is facing a significant and growing shortage of DOPMs, particularly in rural and medically underserved communities. More than half of California counties have fewer than one licensed podiatrist per 25,000 residents, and nearly one-quarter of practicing DOPMs plan to retire within the next five years – the highest projected retirement rate among health care provider groups. At the same time, the educational pipeline into the profession is shrinking. CPMA notes that there are currently two podiatric medical schools in California. During the 2024–2025 academic year, one school operated at 62% capacity for incoming students while the other was at 52% capacity. These trends signal that California is not producing enough new doctors of podiatric medicine to replace those leaving the workforce. CPMA contends that to address this gap, California needs a coordinated, state-supported pathway to recruit and prepare undergraduate students for podiatric medical education. CPMA argues that this bill will establish a structured undergraduate-to-podiatric medical school pathway through coordinated educational institutional partnerships, increase awareness and introduce students to the profession, support student’s academic and clinical development, create early or conditional admission incentives for qualified applicants tied to workforce needs, and promote mentorship opportunities, internships, and clinical shadowing experiences with licensed DOPMs. CPMA concludes that by prioritizing recruitment of students from rural and medically underserved communities and providing mentorship and early clinical exposure, the program will help remove barriers to entry into podiatric medical education and encourage students to return and practice in the communities that need them most.

3) PREVIOUS LEGISLATION.

- a)** SB 909 (Umberg), Chapter 594, Statutes of 2024 makes changes to the parameters of the Steven M. Thompson Physician Corps Loan Repayment Program (STLRP) including: Removing the requirement for HCAI to establish an advisory committee for the STLRP and updating the definition of the practice setting in which a physician can practice. Decreases the service obligation to two years in a medically underserved area (MUA). Authorizes HCAI to award up to 20% of the funds established with the Medically Underserved Account for Physician (Account) for applicants from specialties outside of the primary specialties, and authorizes HCAI to create additional positions, not using funds from the account. Removes the maximum limit for loan repayments per individual physician who has completed three consecutive years of services in an MUA.
- b)** AB 1306 (Arambula) of 2021 would have authorized HCAI to address identified barriers to entry in the health professions for students from underrepresented and low-income backgrounds by funding internships and fellowships and by establishing pilot programs at University of California, California State University, California Community College, and

private university campuses to serve 4,800 students. AB 1306 was held on the Senate Appropriations Committee suspense file.

- 4) **DOUBLE REFERRAL.** This bill is double-referred, upon passage of this committee, it will be referred to the Assembly Committee on Higher Education.
- 5) **POLICY COMMENT.** This bill authorizes HCAI to use funds from the HPEF for the purpose of this bill, however HCAI does not believe those funds are available for this purpose and has identified the HPPP as a more appropriate pathway. Moving forward, the author should work with HCAI to clarify the potential funding source for the program proposed by this bill.

REGISTERED SUPPORT / OPPOSITION:

Support

California Podiatric Medical Association (sponsor)

Opposition

None on file

Analysis Prepared by: Lara Flynn / HEALTH / (916) 319-2097

Date of Hearing: April 7, 2026

ASSEMBLY COMMITTEE ON HIGHER EDUCATION
Mike Fong, Chair
AB 1591 (Michelle Rodriguez) – As Introduced January 15, 2026

SUBJECT: California Podiatric Pipeline Program

SUMMARY: Requires the Department of Health Care Access and Information (HCAI) to establish and administer the California Podiatric Pipeline Program to promote careers in podiatric medicine and support the educational advancement of California residents pursuing the doctor of podiatric medicine degree. Specifically, **this bill:**

- 1) Requires HCAI, in consultation with the California State University (CSU), the University of California (UC), the Podiatric Medical Board of California, the California Podiatric Medical Association, and accredited schools of podiatric medicine in California, to take actions that include, but are not limited to, all of the following:
 - a) Developing partnerships and agreements that link undergraduate institutions with California podiatric medical schools;
 - b) Providing mentorship, outreach, and clinical-shadowing opportunities for undergraduate students interested in podiatric medicine;
 - c) Creating a structured pathway for eligible students to receive early admission consideration to participating podiatric medical schools, contingent on meeting academic and professional benchmarks; and,
 - d) Prioritizing recruitment of students from underrepresented, rural, or medically underserved areas of the state.
- 2) Authorizes HCAI to award planning or coordination grants to participating universities or colleges to support implementation of this program as funding is made available.
- 3) Authorizes HCAI to use funds from the Health Professions Education Fund (HPEF) for the purposes of this bill.
- 4) Requires HCAI, subject to an appropriation by the Legislature, to annually report to the Legislature on the number of students participating, the number matriculating into doctor of podiatric medicine programs, and recommendations for expanding residency opportunities for podiatric graduates.

EXISTING LAW:

- 1) Differentiates the missions and functions of public and independent institutions of higher education. Under these provisions:
 - a) The primary mission of the CSU is to offer undergraduate and graduate instruction through the master's degree in the liberal arts and sciences and professional education

including teacher education. The CSU is authorized to establish two-year programs only when mutually agreed upon by the Trustees and the CCC Board of Governors (BOG). The CSU is also authorized to jointly award the doctoral degree with the UC and with one or more independent institutions of higher education;

- b) The UC is authorized to provide undergraduate and graduate instruction and has exclusive jurisdiction in public higher education over graduate instruction in the professions of law, medicine, dentistry and veterinary medicine. The UC is also the primary state-supported academic agency for research;
 - c) The independent institutions of higher education are required to provide undergraduate and graduate instruction and research in accordance with their respective missions; and
 - d) The mission and function of the California Community Colleges (CCC) is the offering of academic and vocational instruction at the lower division level, and the CCC are authorized to grant the Associate in Arts and the Associate in Science degrees. The community colleges are also required to offer learning supports to close learning gaps, English as a Second Language instruction, and adult noncredit instruction, and support services which help students succeed at the postsecondary level. (Education Code (EDC) Section 66010.4)
- 2) Establishes HCAI to, among other functions, collect, analyze, and publish data about healthcare workforce and health professional training, identify areas of health workforce shortages, and provide scholarships, loan repayments, and grants to students, graduates, and institutions providing direct patient care in areas of unmet need. (Health and Safety Code (HSC) Section 127000, Section 127825, et seq.)
- 3) Establishes the Health Professions Education Fund within HCAI to provide loans to students. Authorizes HCAI to receive private donations and specifies that all money in the fund is continuously appropriated to HCAI. (HSC Section 128355)

FISCAL EFFECT: Unknown.

COMMENTS: *Double-referral.* AB 1591 (M. Rodriguez) was heard by the Assembly Committee on Health, where it passed with a 16-0 vote.

Purpose. According to the author, “California is facing a growing shortage of Doctors of Podiatric Medicine, particularly in rural and underserved communities. More than half of our counties lack adequate podiatric coverage, and nearly one quarter of the current workforce is expected to retire within five years. At the same time, enrollment in podiatric medical schools is declining, threatening our ability to meet future demand. This shortage has serious consequences. Diabetes disproportionately impacts low-income communities and communities of color, and limited access to specialized foot care contributes to preventable hospitalizations and amputations. Yet, current law does not provide a structured pathway to recruit and prepare students, especially those from underrepresented backgrounds, for careers in podiatric medicine.”

The author contends that AB 1591 (M. Rodriguez), "...creates a coordinated undergraduate to medical school pathway to expand the workforce, increase diversity in the profession, and improve access to preventive care in underserved areas. This bill is a proactive step toward protecting mobility, preventing amputations, and ensuring equitable access to essential podiatric services statewide."

Doctors of Podiatric Medicine (DOPMs). DOPMs are podiatric physicians and surgeons, qualified by their education, training, and experience to diagnose and treat conditions affecting the foot, ankle, and related structures of the leg. Podiatric medicine is a medical sub-specialty, focused on a specific part of the anatomy similar to other sub-specialties, such as ophthalmology and cardiology. Within the field of podiatric medicine and surgery, podiatrists can focus on specialty areas such as surgery, sports medicine, biomechanics, geriatrics, pediatrics, orthopedics, or primary care. DOPMs receive basic and clinical science education and training comparable to that of medical doctors including: four years of undergraduate education focusing on life sciences; four years of graduate study in one of the nine podiatric medical colleges; and, at least three years of postgraduate, hospital-based residency training.

Declining DOPM school enrollment. California is home to two schools of podiatric medicine, Western U College of Podiatric Medicine in Pomona, and the California School of Podiatric Medicine at Samuel Merritt University in Oakland. In 2024-2025, Western U was at 62% capacity (38% of seats open) for the matriculating first year cohort. Samuel Merritt was at 52% capacity the same year.

Department of Health Care Access and Information (HCAI). As noted in *Existing Law* above, HCAI was established to, among other functions, collect, analyze, and publish data about healthcare workforce and health professional training, identify areas of health workforce shortages, and provide scholarships, loan repayments, and grants to students, graduates, and institutions providing direct patient care in areas of unmet need.

HCAI administers numerous workforce programs, as well as providing loans and scholarships to health care professionals.

Health Professions Education Fund (HPEF). HPEF is funded solely through donations. All donated funds have been fully allocated, and HPEF has not received any new contributions to support new programs. HPEF previously supported the following programs:

- 1) Licensed Mental Health Services Provider Education Program Loan Repayment.
- 2) Bachelor of Science Nursing Loan Repayment Program.
- 3) Licensed Vocational Nurse Loan Repayment Program.
- 4) Steven M. Thompson Physician Corps Loan Repayment Program.
- 5) Associate Degree Nursing Scholarship Program.
- 6) Bachelor of Science Nursing Scholarship Program.
- 7) Licensed Vocational Nurse to Associate Degree Nursing Scholarship Program.

- 8) Vocational Nurse Scholarship Program;
- 9) Advanced Practice Healthcare Scholarship Program; and,
- 10) Allied Healthcare Scholarship Program.

HPEF currently has an estimated \$8.2 million in funds. Of the total funds, \$5 million belongs to Covered California's Population Health Investments program, and \$3.2 million is designated for scholarships and loan repayment purposes. HCAI does not consider these funds to be usable or available for discretionary spending, as they are restricted to their dedicated purposes.

Health Professions Pathways Program (HPPP). HPPP is designed to recruit and support students from underrepresented regions and backgrounds to pursue health careers. HPPP includes pipeline programs, summer internships, and post undergraduate fellowships. HPPP is a competitive grant opportunity to award organizations that will develop and implement health professions pathways programs that can include pipeline programs, summer internships, and post undergraduate fellowships. Including podiatrists, the following disciplines are HPPP-eligible: Primary Care, Behavioral Health, Nursing, Oral Health, and Allied Health.

Awarded programs were eligible to receive up to \$575,000 annually for up to 5 years to support at least 240 students per academic year. Based on previous award levels, each pipeline program awarded for 5 years would require approximately \$2.9 million per pipeline program.

Committee comments. As noted in the Assembly Committee on Health analysis, this bill authorizes HCAI to use funds from the HPEF for the purpose of this bill, however HCAI does not believe those funds are available for this purpose and has identified the HPPP as a more appropriate pathway. Moving forward, the author should work with HCAI to clarify the potential funding source for the program proposed by this bill.

Arguments in support. According to the California Podiatric Medical Association (CPMA), DOPMs "...play a critical role in the health care system. Once licensed, they independently diagnose and treat human ailments within their specialty, including performing surgery in hospital and ambulatory settings, prescribing medications, ordering diagnostic studies, and interpreting imaging. They diagnose and treat a wide range of conditions affecting the foot, ankle, and lower extremities, including diabetic foot ulcers, infections, fractures, deformities, nerve disorders, sports injuries, chronic wounds, and mobility impairments. Their expertise is particularly essential in the management of diabetes, where early intervention and specialized care can prevent severe complications."

CPMA continues that "California is facing a significant and growing shortage of doctors of podiatric medicine, particularly in rural and medically underserved communities. More than half of California counties have fewer than one licensed podiatrist per 25,000 residents, and nearly one-quarter of practicing DPMs plan to retire within the next five years... AB 1591, the California Podiatric Pipeline Program Act, addresses this gap by directing the Office of Health Care Access and Information to work with stakeholders and establish a structured undergraduate-to-podiatric medical school pathway through coordinated educational institutional partnerships, increase awareness and introduce students to the profession, support student's academic and clinical development, create early or conditional admission incentives for qualified applicants

tied to workforce needs, and promote mentorship opportunities, internships, and clinical shadowing experiences with licensed [DOPMs].”

Prior legislation. SB 909 (Umberg), Chapter 594, Statutes of 2024 made numerous changes to the parameters of the Steven M. Thompson Physician Corps Loan Repayment Program (STLRP).

AB 1306 (Arambula, 2021) would have authorized HCAI to address identified barriers to entry in the health professions for students from underrepresented and low-income backgrounds by funding internships and fellowships and by establishing pilot programs UC, California State University, CSU, and private university campuses to serve 4,800 students. AB 1306 was held on the Senate Appropriations Committee suspense file.

REGISTERED SUPPORT / OPPOSITION:**Support**

California Podiatric Medical Association

Opposition

None on file

Analysis Prepared by: Kevin J. Powers / HIGHER ED. / (916) 319-3960

Date of Hearing: April 22, 2026

ASSEMBLY COMMITTEE ON APPROPRIATIONS
Buffy Wicks, Chair
AB 1591 (Michelle Rodriguez) – As Introduced January 15, 2026

Policy Committee:	Health	Vote:	16 - 0
	Higher Education		10 - 0

Urgency: No State Mandated Local Program: No Reimbursable: No

SUMMARY:

This bill requires the Department of Health Care Access and Information (HCAI) to establish and administer the California Podiatric Pipeline Program (program) to support the educational advancement of California residents pursuing a doctor of podiatric medicine (DPM) degree.

Specifically, this bill:

- 1) Requires HCAI, in consultation with the California State University (CSU), the University of California (UC), the Podiatric Medical Board of California (PMBC), the California Podiatric Medical Association (CPMA), and accredited schools of podiatric medicine in California, to do all of the following:
 - Develop partnerships and agreements that link undergraduate institutions with California podiatric medical schools.
 - Provide mentorship, outreach, and clinical-shadowing opportunities for undergraduate students interested in podiatric medicine.
 - Create a structured pathway for eligible students to receive early admission consideration to participating podiatric medical schools, contingent on meeting academic and professional benchmarks.
 - Prioritize recruitment of students from underrepresented, rural, or medically underserved areas of the state.
- 2) Authorizes HCAI to award planning or coordination grants to participating universities or colleges to support implementation of this program as funding is made available.
- 3) Authorizes HCAI to use funds from the Health Professions Education Fund (HPEF) for the purposes of this bill.
- 4) Subject to an appropriation by the Legislature, requires HCAI to annually report to the Legislature on the program and recommendations for expanding residency opportunities for podiatric graduates.

FISCAL EFFECT:

HCAI estimates General Fund costs of \$899,000 in fiscal year 2026-27 and ongoing for administration, program oversight, and monitoring. To award planning and coordination grants to universities and colleges, staff would need to establish grant standards and procedures, review and approve grant applications, issue funds to awardees, monitor the awarded funds, and annually develop a report for the Legislature. HCAI anticipates it would need five staff.

HCAI states all funds in the HPEF are allocated and not available for discretionary spending.

COMMENTS:

- 1) **Purpose.** This bill is sponsored by the California Podiatric Medical Association (CPMA).

According to the author:

California is facing a growing shortage of [DPMs], particularly in rural and underserved communities. More than half of our counties lack adequate podiatric coverage, and nearly one quarter of the current workforce is expected to retire within five years. At the same time, enrollment in podiatric medical schools is declining, threatening our ability to meet future demand.

This shortage has serious consequences. Diabetes disproportionately impacts low-income communities and communities of color, and limited access to specialized foot care contributes to preventable hospitalizations and amputations. Yet, current law does not provide a structured pathway to recruit and prepare students, especially those from underrepresented backgrounds, for careers in podiatric medicine.

[This bill] creates a coordinated undergraduate to medical school pathway to expand the workforce, increase diversity in the profession, and improve access to preventive care in underserved areas.

- 2) **Background. DPMs.** DPMs, known as podiatrists, are podiatric physicians and surgeons, qualified by their education, training, and experience to diagnose and treat conditions affecting the foot, ankle, and related structures of the leg. A podiatrist may focus on specialty areas such as surgery, sports medicine, biomechanics, geriatrics, pediatrics, orthopedics, or primary care. DPMs receive basic and clinical science education and training comparable to that of medical doctors, including four years of undergraduate education focusing on life sciences, four years of graduate study in a podiatric medical college, and at least three years of postgraduate, hospital-based residency training.

Declining DOPM School Enrollment. California has two schools of podiatric medicine, Western University College of Podiatric Medicine (WesternU) in Pomona, and the California School of Podiatric Medicine at Samuel Merritt University in Oakland. In 2024-25, WesternU was at 62% of its enrollment capacity of 50 for the first year cohort and Samuel Merritt was at 52% of its enrollment capacity of 48 per class.

HPEF. HCAI administers numerous workforce programs and provides loans and scholarships for health care professionals, including HPEF. HPEF is funded solely through donations. All donated funds have been fully allocated, and HPEF has not received any new

contributions to support new programs. HPEF previously supported loan repayment programs for mental health services providers, nurses, and physicians, as well as scholarship programs for nurses and other professions. HPEF has an estimated \$8.2 million in funds, all of which are designated for other programs. HCAI does not consider these funds to be usable or available for discretionary spending.

Health Professions Pathways Program (HPPP). HPPP was created to recruit and support students from underrepresented regions and backgrounds to pursue health careers. HPPP includes pipeline programs, summer internships, and post undergraduate fellowships. HPPP is a competitive grant opportunity to award organizations that will develop and implement health professions pathways programs that can include pipeline programs, summer internships, and post undergraduate fellowships. Podiatry training is eligible for HPPP. In the past, awarded programs were eligible to receive up to \$575,000 annually for up to five years to support at least 240 students per academic year, for a total of approximately \$2.9 million per pipeline program.

Analysis Prepared by: Allegra Kim / APPR. / (916) 319-2081

ASSEMBLY THIRD READING
AB 1591 (Michelle Rodriguez)
As Amended May 18, 2026
Majority vote

SUMMARY

Requires the Department of Health Care Access and Information (HCAI) to establish and administer the California Podiatric Pipeline Program to promote careers in podiatric medicine and support the educational advancement of California residents pursuing the doctor of podiatric medicine degree. Authorizes HCAI to use funds from the Health Professions Education Fund or Health Professions Pathways Program. Makes implementation of this bill contingent upon appropriation by the Legislature and repeals the provisions of this bill on January 1, 2032.

COMMENTS

DOPMs. Doctors of Podiatric Medicine (DOPMs) are podiatric physicians and surgeons, qualified by their education, training, and experience to diagnose and treat conditions affecting the foot, ankle, and related structures of the leg. Podiatric medicine is a medical sub-specialty, focused on a specific part of the anatomy similar to other sub-specialties, such as ophthalmology and cardiology. Within the field of podiatric medicine and surgery, podiatrists can focus on specialty areas such as surgery, sports medicine, biomechanics, geriatrics, pediatrics, orthopedics, or primary care. DOPMs receive basic and clinical science education and training comparable to that of medical doctors including: four years of undergraduate education focusing on life sciences; four years of graduate study in one of the nine podiatric medical colleges; and, at least three years of postgraduate, hospital-based residency training.

According to the 2026 National Diabetes Statistics Report from the Centers of Disease Control and Prevention (CDC) over 40 million Americans, or 12% of the population, are living with diabetes. Over 2 million Americans are living with type 1 diabetes, including about 314,000 children and adolescents. Of the 40.1 million people living with diabetes, 29.1 million have been diagnosed, and 11 million are undiagnosed. Just over 28% are 65 and older. An estimated 1.5 million Americans are diagnosed every year. Over 115 million Americans age 18 and older are living with prediabetes. About 364,000 Americans under age 20 are estimated to have diagnosed diabetes, approximately 0.45% of that population. The rates of diagnosed diabetes in adults for 2021-2023:

- 1) 15.7% American Indian or Alaskan Native;
- 2) 12.2% Black, non-Hispanic;
- 3) 11.8% Hispanic, overall;
- 4) 9.7% Asian, non-Hispanic; and,
- 5) 7.1% white, non-Hispanic.

Approximately 3.5 million adults in California, or 10.5% of the adult population, have diagnosed diabetes, with significant economic impacts and health complications associated with the disease. According to the American Diabetes Association in California, diagnosed diabetes costs

an estimated \$47.5 billion each year. In 2022, total direct medical expenses for diagnosed diabetes in California were estimated to be \$34.1 billion. In addition, there were \$13.4 billion in estimated indirect costs from lost productivity due to diabetes. According to a 2017 University of California Los Angeles Center for Health Policy Research brief, "Podiatric foot health screening could save millions by preventing diabetic amputations," allowing podiatrists to give diabetic patients regular foot health screenings, which are usually done by primary care doctors, could save limbs, lives and money. As many as 1 in 4 diabetic Californians develop damaging toe, foot and leg ulcers which could lead to amputation and elevated risk of death, according to the brief.

Declining DOPM school enrollment. California is home to two schools of podiatric medicine, Western U College of Podiatric Medicine in Pomona, and the California School of Podiatric Medicine at Samuel Merritt University in Oakland. In 2024-2025, Western U was at 62% capacity (38% of seats open) for the matriculating first year cohort. Samuel Merritt was at 52% capacity the same year.

HCAI. HCAI administers numerous workforce programs, as well as providing loans and scholarships to health care professionals.

- 1) *The Health Professions Pathways Program (HPPP)* is designed to recruit and support students from underrepresented regions and backgrounds to pursue health careers. HPPP includes pipeline programs, summer internships, and post undergraduate fellowships. HPPP is a competitive grant opportunity to award organizations that will develop and implement health professions pathways programs that can include pipeline programs, summer internships, and post undergraduate fellowships.

Including podiatrists, the following disciplines are eligible HPPP, Primary Care, Behavioral Health, Nursing, Oral Health, and Allied Health. Awarded programs were eligible to receive up to \$575,000 annually for up to 5 years to support at least 240 students per academic year. Based on previous award levels, each pipeline program awarded for 5 years would require approximately \$2.9 million per pipeline program.

- 2) *The Allied Healthcare Scholarship Program (AHSP)* has historically supported podiatrists, among other health care professions. This program is no longer active, as it was funded exclusively through donations, and all available funds have been exhausted. Over the past five years, program records indicate that no podiatrists have applied for or received awards from the AHSP.
- 3) *The Allied Healthcare Loan Repayment Program (AHLRP)* also supports podiatrists. Over the past five years this program made several awards to podiatrists, including one award of \$16,000 in 2021, two awards of \$16,000 each in 2022 (totaling \$32,000), and one award of \$16,000 in 2025. In total, the AHLRP has awarded \$64,000 to podiatrists during this period.
- 4) *The Health Professions Education Fund (HPEF)* is funded solely through donations. All donated funds have been fully allocated, and HPEF has not received any new contributions to support new programs. HPEF previously supported the following programs:
 - a) Licensed Mental Health Services Provider Education Program Loan Repayment;
 - b) Bachelor of Science Nursing Loan Repayment Program;

- c) Licensed Vocational Nurse Loan Repayment Program;
- d) Steven M. Thompson Physician Corps Loan Repayment Program;
- e) Associate Degree Nursing Scholarship Program;
- f) Bachelor of Science Nursing Scholarship Program;
- g) Licensed Vocational Nurse to Associate Degree Nursing Scholarship Program;
- h) Vocational Nurse Scholarship Program;
- i) Advanced Practice Healthcare Scholarship Program; and,
- j) Allied Healthcare Scholarship Program.

HPEF does not receive General Fund support, it has been supported solely through donations. HPEF currently has an estimated \$8.2 million in funds. Of the total funds, \$5 million belongs to Covered California's Population Health Investments program, and \$3.2 million is designated for scholarships and loan repayment purposes. HCAI does not consider these funds to be usable or available for discretionary spending, as they are restricted to their dedicated purposes.

Prior to 2023, HCAI received \$15.2 million annually in General Fund support for the Health Professions Careers Opportunity Program (HPCOP). HPCOP funds support the HPPP, the Health Careers Exploration Program (HCEP), and the Justice-System Involvement Youth: Behavioral Health Pipeline (JSIY BH Pipeline). In the 2023 Budget Act, \$12.3 million of the annual \$15.2 million allocation was cut, and ongoing HPCOP funding was discontinued. As a result, HCAI does not currently have sufficient funding to open a new HPPP application cycle. Based on prior award levels and program costs, HCAI estimates it would need approximately \$5 million to consider launching a cycle and even at that level, the program would likely be limited to a small number of awards.

However, HCAI has received \$5 million from Covered California to administer a customized variation of HPPP called HPPP-Population Health Investments (PopHI). Covered California directed several of its Qualified Health Plans to transmit funds to HCAI totaling \$5 million. HCAI intends to open its first HPPP-PopHI cycle on August 16, 2026. This initiative is aimed at improving health outcomes and reducing disparities for enrollees. It establishes direct financial incentives (up to 4% of premiums) for contracted health insurance companies to meet specified quality benchmarks. The health outcome measures assessed include blood pressure and diabetes control, colorectal cancer screenings and childhood immunizations.

According to the Author

California is facing a growing shortage of Doctors of Podiatric Medicine (DOPMs'), particularly in rural and underserved communities. More than half of our counties lack adequate podiatric coverage, and nearly one quarter of the current workforce is expected to retire within five years. At the same time, enrollment in podiatric medical schools is declining, threatening our ability to meet future demands. The author states that this shortage has serious consequences. Diabetes disproportionately impacts low-income communities and communities of color, and limited access to specialized foot care contributes to preventable hospitalizations and amputations. Yet, current law does not provide a structured pathway to recruit and prepare students, especially

those from underrepresented backgrounds, for careers in podiatric medicine. The author concludes that this bill is a proactive step toward protecting mobility, preventing amputations, and ensuring equitable access to essential podiatric services statewide.

Arguments in Support

The California Podiatric Medical Association (CPMA) is the sponsor of this bill and states that California is facing a significant and growing shortage of DOPMs, particularly in rural and medically underserved communities. More than half of California counties have fewer than one licensed podiatrist per 25,000 residents, and nearly one-quarter of practicing DOPMs plan to retire within the next five years – the highest projected retirement rate among health care provider groups. At the same time, the educational pipeline into the profession is shrinking. CPMA notes that there are currently two podiatric medical schools in California. During the 2024–2025 academic year, one school operated at 62% capacity for incoming students while the other was at 52% capacity. These trends signal that California is not producing enough new doctors of podiatric medicine to replace those leaving the workforce. CPMA contends that to address this gap, California needs a coordinated, state-supported pathway to recruit and prepare undergraduate students for podiatric medical education.

Arguments in Opposition

None on file.

FISCAL COMMENTS

According to the Assembly Appropriations Committee, HCAI estimates General Fund costs of \$899,000 in fiscal year 2026-27 and ongoing for administration, program oversight, and monitoring. To award planning and coordination grants to universities and colleges, staff would need to establish grant standards and procedures, review and approve grant applications, issue funds to awardees, monitor the awarded funds, and annually develop a report for the Legislature. HCAI anticipates it would need five staff.

VOTES

ASM HEALTH: 16-0-0

YES: Bonta, Chen, Addis, Aguiar-Curry, Pacheco, Caloza, Carrillo, Mark González, Johnson, Patel, Patterson, Rogers, Sanchez, Schiavo, Sharp-Collins, Stefani

ASM HIGHER EDUCATION: 10-0-0

YES: Fong, DeMaio, Boerner, Jeff Gonzalez, Jackson, Irwin, Patel, Bennett, Sharp-Collins, Tangipa

ASM APPROPRIATIONS: 11-0-4

YES: Wicks, Aguiar-Curry, Calderon, Caloza, Fong, Mark González, Krell, Pacheco, Pellerin, Sharp-Collins, Solache

ABS, ABST OR NV: Hoover, Dixon, Ta, Tangipa

UPDATED

VERSION: May 18, 2026

CONSULTANT: Lara Flynn / HEALTH / (916) 319-2097

FN: 0002999



Version: 05/18/26 - Amended Assembly 01/15/26 - Introduced

AB-1591 California Podiatric Pipeline Program.(2025-2026)

As Amends the Law Today

SECTION 1.

This act shall be known, and may be cited, as the California Podiatric Pipeline Program Act.

SEC. 2.

The Legislature finds and declares all of the following:

(a) California faces a growing shortage of Doctors of Podiatric Medicine particularly in rural and underserved communities.

(b) Many undergraduate students are unaware of podiatric medicine as a career path and lack opportunities for mentorship and exposure to the field.

(c) Establishing an undergraduate-to-podiatric-medical-school pathway will increase awareness, diversity, and the number of students entering podiatric programs in California.

(d) Two accredited podiatric medical schools operate in California, the California School of Podiatric Medicine at Samuel Merritt University and the Western University of Health Sciences College of Podiatric Medicine, and can serve as anchor partners for such a pipeline.

SEC. 3.

Article 6 (commencing with Section 128055) is added to Chapter 2 of Part 3 of Division 107 of the Health and Safety Code, to read:

Article 6. California Podiatric Pipeline Program

128055.

(a) The Department of Health Care Access and Information shall establish and administer the California Podiatric Pipeline Program to promote careers in podiatric medicine and support the educational advancement of California residents pursuing the doctor of podiatric medicine degree.

Attachment E

(b) In consultation with the California State University, the University of California, the Podiatric Medical Board of California, the California Podiatric Medical Association, and accredited schools of podiatric medicine in California, the department shall take actions that include, but are not limited to, all of the following:

(1) Developing partnerships and agreements that link undergraduate institutions with California podiatric medical schools.

(2) Providing mentorship, outreach, and clinical-shadowing opportunities for undergraduate students interested in podiatric medicine.

(3) Creating a structured pathway for eligible students to receive early admission consideration to participating podiatric medical schools, contingent on meeting academic and professional benchmarks.

(4) Prioritizing recruitment of students from underrepresented, rural, or medically underserved areas of the state.

(c) The department may award planning or coordination grants to participating universities or colleges to support implementation of this program as funding is made available.

(d) The department may use funds from the Health Professions Education Fund or Health Professions Pathways Program for the purposes of this article, subject to the requirements of Article 1 (commencing with Section 128330) of Chapter 5.

(e) (1) Notwithstanding Section 10231.5 of the Government Code, the department, subject to an appropriation by the Legislature, shall annually report to the Legislature on the number of students participating, the number matriculating into doctor of podiatric medicine programs, and recommendations for expanding residency opportunities for podiatric graduates.

(2) A report submitted to the Legislature pursuant to this subdivision shall be submitted in compliance with Section 9795 of the Government Code.

128056.

Implementation of this article shall be contingent upon appropriation by the Legislature.

128057.

This article shall remain in effect only until January 1, 2032, and as of that date is repealed.