



**Summary:** This bill will decrease barriers for Primary Care Clinic (PCC) expansion by updating construction and building requirements for outpatient clinics.

**Background and Issue:**

In California today, there are over 1,270 Community Health Centers (CHCs) that provide healthcare services to approximately 7.7 million people – more than 1 in 5 Californians. Care provided by CHCs include: primary care, dental and behavioral health. These health centers provide care to everyone, regardless of their ability to pay, immigration status, or their individual circumstances.

The California Department of Public Health licenses CHCs as Primary Care Clinics. To obtain a PCC license, CHCs must adhere to specific rules, called OSHPD 3 building standards, set by the Department of Health Care Access and Information (HCAI), and the California Building Standards Commission.

The building standards required by OSHPD 3 are the same for PCCs (including CHCs) and hospital clinics with inpatient facilities. However, this is a problem because PCCs only provide outpatient services, while hospital clinics can provide up to 25% of their care as inpatient services where patients are admitted to a hospital to stay overnight. In contrast, outpatient services refer to any service or treatment that doesn't require hospitalization.

Currently, HCAI is restricted from updating PCC standards to the suitable acuity level for a primary care outpatient clinic setting. This makes it harder for PCCs to expand their services because it costs a lot of money to meet these requirements. In addition, private physician offices and county clinics are not required to comply with OSHPD 3 standards and display no increased risk to the health and safety of the public.

**SB 1382: Clinic Building Standards**

CHCs are vital to California's healthcare system as they provide quality healthcare services to vulnerable populations that are often uninsured or underinsured or who live in healthcare deserts and underserved communities. In order to fulfill the current construction standards, PCCs are financially burdened, restricting their ability to expand crucial healthcare services to those who need it most.

**Existing Law:**

Under current law, building requirements, as set by HCAI, for hospital clinics and PCCs are the same. OSHPD 3 requires that certain standards for electrical, plumbing, ventilation and mechanical systems (among many others) are met in order to become licensed to operate outpatient clinical facilities. Intermittent clinics, defined as clinics operated by a licensed PCC on separate premises from the licensed clinic and only open for limited services of no more than 40 hours a week, are exempt from the licensure process.

**Proposal:**

This bill would reform current California law by updating the construction and building standards for outpatient clinics by requiring them to comply with county or city building standards. Additionally, this bill would provide that PCCs in good standing would be able to acquire and operate an existing outpatient setting or build a new outpatient clinic provided they meet their county or city construction standards.

**Support:**

CPCA Advocates

**Contact:**

Policy: Austin Kenney, Legislative Intern  
916.651.4007 or [Austin.Kenney@sen.ca.gov](mailto:Austin.Kenney@sen.ca.gov)

Press: Steve Harmon, Communications Director  
916.651.4007 or [steven.harmon@sen.ca.gov](mailto:steven.harmon@sen.ca.gov)