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August 12, 2022

The Suspense is Over: Appropriations Committees Determine Fate of Hundreds of Bills

In simultaneous hearings, the Senate and Assembly Appropriations Committees took action yesterday on their respective suspense files (a spot where measures that impose costs over a certain fiscal threshold are held in abeyance until the committee makes a final determination on their fate). As a reminder, the suspense file hearing is vote-only and involves no member or public testimony. The committee chair simply reads through the list of bills and reveals which will be held on the suspense file and which will move to that house's floor for consideration by the entire body.

Decisions regarding which bills come off suspense are made behind closed doors and remain under wraps until the time of the hearing. Yesterday, the Senate acted on 491 Assembly measures on its suspense file, while the Assembly considered 324 Senate bills. Interestingly, both committees held pretty much exactly one quarter of the bills – the Senate held 123 (25.05% of 491), and the Assembly held 80 (24.69% of 324).

Below, we detail outcomes on bills of greatest consequence. Many bills sprung from the suspense file were amended as part of the committee's action to make them less costly, although it may take a few days before amendments to show up in print. In the meantime, where possible, we have attempted to describe the amendments as best we understand them. As always, do not hesitate to reach out with any questions on the process or results.

Passed (As is or with amendments; now moves on to a floor vote)

AB 32 (Aguiar-Curry) – Would make various changes to Medi-Cal telehealth policy.

AB 240 (Rodriguez) – Would require the California Department of Public Health (CDPH) to contract with an appropriate and qualified entity to conduct an evaluation of the adequacy of the local health department infrastructure, and to make recommendations for future staffing, workforce needs, and resources, in order to accurately and adequately fund local public health. Recent amendments would clarify that CDPH is allowed, rather than required, to enter into a contract for purposes of conducting the evaluation and would delay the report date and sunset date by one year.

AB 557 (Muratsuchi) - Would require the Department of Justice to establish a grant program for the purpose of creating, supporting, or expanding vertical prosecution units for the prosecutions of hate crimes.

AB 1608 (Gipson) – Would repeal boards of supervisors' authority to consolidate, by ordinance, the duties of county sheriff and coroner offices. If those offices were consolidated prior to January 1, 2023, the bill would require them to be separated effective upon the conclusion of the term of the person elected or appointed to the consolidated offices on or before January 1, 2023.

AB 1663 (Maienschein) – Would revise various procedures in the probate conservatorship process; require the Judicial Council of California, upon appropriation, to establish a conservatorship diversion program; and establish a supported decision making process and a process for entering into a supported decision making agreement for adults with disabilities.

AB 1686 (Bryan) – Would create a presumption that child support payments made on behalf of a dependent child are likely to pose a barrier to reunification in cases where reunification services are available and would require the DSS to draft and implement regulations to reflect this presumption, no later than October 1, 2023.

AB 1947 (Ting) – Would require law enforcement agencies to report their hate crime policy and brochure to the Department of Justice and require the Commission on Peace Officers Standards and Training to develop a model hate crimes policy.

AB 1957 (Wilson) - Would update information that the Department of Developmental Services and regional centers are required to compile and report annually regarding the purchase of services for individuals with developmental disabilities.

AB 2234 (Rivas) – Would require large cities and counties to accept “post-entitlement” permits for housing projects via an internet-based permitting system and create timeframes for review and approval. The measure was amended to provide a two-year extension for online permitting requirements, require local agencies to provide written comments on application deficiencies, and make other clarifying changes.

AB 2242 (Santiago) – Would require individuals who have been involuntarily detained for purposes of evaluation and treatment, and placed under a

conservatorship, to receive a care coordination plan developed by specified entities. The bill would require the Department of Health Care Services (DHCS) to convene a stakeholder group to create a model care coordination plan to be followed when discharging those held under temporary holds or a conservatorship. The bill would require the Mental Health Services Oversight and Accountability Commission (MHSOAC) to develop, implement, and oversee a public and comprehensive framework for tracking and reporting spending on mental health programs and services. AB 2242 would permit county mental health plans to pay for the provision of services for individuals placed under involuntary detentions and conservatorship using specified funds, including Mental Health Services Act (MHSA) funds, as specified. The measure passed out of Senate Appropriations Committee with amendments.

[AB 2306 \(Cooley\)](#) – Would extend the Independent Living Program (ILP) to include current and former foster youth up to 22 years of age, subject to an appropriation and federal approval, and provides intent to expand eligibility up to 23 years of age. The bill would expand the services for which counties can provide stipends to assist youth with specified independent living needs and, subject to appropriation, would provide stipends for former foster youth up to 25 years of age, as specified.

[AB 2402 \(Rubio\)](#) – Would establish continuous Medi-Cal eligibility for children ages 0-5. The measure passed out of Senate Appropriations Committee with amendments.

[AB 2438 \(Friedman\)](#) – Would require state transportation funding programs to align with state climate plans. The measure was amended to make technical changes to transparency provisions related to posting of transit project application summaries prior to grant awards.

[AB 2680 \(Arambula\)](#) – Would require DHCS to create the Community Health Navigator (CHN) Program to make direct grants to community-based organizations to conduct targeted outreach, enrollment, retention, and access activities for Medi-Cal-eligible individuals and families.

[AB 2697 \(Aguiar-Curry\)](#) – Would require DHCS to implement a community health workers and promotores (CHW/P) benefit under the Medi-Cal program.

[SB 6 \(Caballero\)](#) – Would allow the development of housing through a streamlined process on qualifying sites that allow parking, office or retail as a principal permitted use. The bill was amended to add a reporting requirement.

[SB 17 \(Pan\)](#) – Would establish the Office of Racial Equity; amendments coming out of Assembly Appropriations would create a Commission instead of an office.

[SB 361 \(Umberg\)](#) – Would have prohibited the County of Orange or any city located within Orange County from proceeding with disposal of property if the Department of Housing and Community Development (HCD) issues a notice of violation (NOV) of the Surplus Lands Act (SLA). The Assembly Appropriations Committee amendments delete Section 1 of the bill and limit the bill only to the City of Anaheim.

SB 490 (Caballero) – Would, upon appropriation, establish the Community Anti-Displacement and Preservation Technical Assistance Program, with the purpose of providing technical assistance to qualified entities engaged in acquisition-rehabilitation projects.

SB 897 (Wieckowski) – Would make numerous changes to the laws governing accessory dwelling units and junior accessory dwelling units, including height limits and the ability to require correction of non-compliant zoning conditions and building code violations. The bill also states the intent of the Legislature that grant programs funding ADU construction provide for predevelopment costs.*

Please note that SB 897 was not a candidate for the suspense file, but it did pass directly out of the Senate Appropriations Committee this week. It is a bill of considerable interest and thus warrants a mention in the “moved to the floor” category even though (we are detail people here) we acknowledge it doesn’t qualify as a bill that passed off the suspense file.

SB 929 (Eggman) – Would expand DHCS’ existing responsibility to collect and publish information about involuntary detentions under the Lanterman-Petris-Short (LPS) Act to include additional information, such as clinical outcomes, services provided, and availability of treatment beds, and requires DHCS to convene a stakeholder group with specified membership to make recommendations on the methods to be used for efficiently providing the department with this information

SB 932 (Portantino) – Would require cities and counties, upon the next substantive revision of the general plan’s circulation element on or after January 1, 2025, to develop and implement bicycle plans, pedestrian plans, and identify safety corridors within specified urbanized areas. The bill was amended to remove the new cause of action and make other clarifying and technical changes.

SB 944 (Pan) – Would require Covered California to implement specified options for increasing health care affordability, including affordability assistance to reduce copays, coinsurance, and maximum out-of-pocket costs, and to eliminate deductibles for all benefits.

SB 948 (Becker) – Prohibits the Department of Housing and Community Development from requiring a project-specific transition reserve for affordable housing projects and instead creates a pooled statewide reserve to mitigate impacts from the loss of rental or operating subsidies.

SB 964 (Wiener) – The bill was substantially amended coming out of Assembly Appropriations to remove all provisions of the bill except the landscape analysis of the state’s behavioral health workforce needs.

SB 966 (Limón) – Would authorize federally qualified health centers (FQHCs) and rural health clinics (RHCs) to include face-to-face service provided by an associate clinical social worker (ACSW) or associate marriage and family

therapist (AMFT) in the definition of a “visit,” and prohibits the DHCS from requiring an FQHC or RHC to process the addition of services by an ACSW or AMFT as a change in scope of service.

SB 970 (Eggman) – Would establish, in the California Health and Human Services Agency, the California Mental Health Services Act Outcomes and Accountability Review (MHSAOAR), with a dedicated workgroup tasked with assisting county mental health programs improve MHSA-funded activities.

SB 989 (Hertzberg) – Would, until January 1, 2026, property taxes to be deferred, without penalty or interest, if the property owner has claimed relief under Proposition 19, but the county assessor has not yet completed the determination of whether the property is eligible for that relief in the County of Los Angeles. (All other counties would be eligible to opt-in.) The Assembly Appropriations Committee amendments clarify county opt-in language, require county auditor approval, and add an urgency clause.

SB 1014 (Hertzberg) – Would requires DHCS, subject to an appropriation by the Legislature, to authorize the Enhanced Clinically Integrated Program, a new supplemental payment program for federally qualified health centers (FQHCs), or another type of payment program DHCS determines will best meet the goals of ECIP and is permissible under federal law.

SB 1090 (Hurtado) – Would bill expand the definition of “current or former foster youth” for purposes of accessing the Family Urgent Response System (FURS) to include youth under a voluntary program of supervision or voluntary placement, youth who are the subject of a petition declaring them dependents of the juvenile court, youth placed in California pursuant to the Interstate Compact on the Placement of Children, and youth who have exited foster care for any reason. Assembly Appropriations passed the bill with technical amendments.

SB 1121 (Gonzalez) – Would require the California Transportation Commission to prepare a needs assessment of the costs to operate, maintain, and provide for the future growth of the state and local transportation system for the next 10 years.

SB 1131 (Newman) – Would expand the address confidentiality program administered by the Secretary of State for reproductive health care service providers, employees, volunteers, and patients to include other individuals who face threats of violence or violence or harassment from the public because of their work for a public entity. The Assembly Appropriations Committee moved the bill with technical amendments.

SB 1143 (Roth) – Would establish the California Acute Care Psychiatric Hospital Loan Fund in the State Treasury to provide zero-interest loans to qualifying county or city and county applicants for the purpose of building or renovating acute care psychiatric hospitals, psychiatric health facilities, or psychiatric units in general acute care hospitals. The Assembly Appropriations Committee approved the bill with amendments requested by the State Treasurer’s Office.

SB 1180 (Pan) – Would extend the existing time and distance and appointment availability standards for Medi-Cal managed care plans, county mental health plans, county Drug Medi-Cal organized Delivery Systems (DMC-ODS) and Denti-Cal managed care plans an additional three years, from January 1, 2023, to January 1, 2026. This bill also requires DHCS to seek input from stakeholders, including consumer advocates, MCMC plans, and providers prior to January 1, 2025, to determine what changes, if any, are needed to the time and distance and appointment availability standards.

SB 1238 (Eggman) – Would require DHCS, beginning January 1, 2024, and at least every five years thereafter, in consultation with local governments, to conduct a review of, and prepare a report regarding current and projected behavioral health (BH) care infrastructure and service needs, including barriers to meeting projected future needs and suggestions to alleviate bottlenecks in the continuum in each region.

SB 1338 (Umberg) – Would enact the Community Assistance, Recovery, and Empowerment (CARE) Act. Assembly Appropriations passed the measure with amendments from the Administration, but did not detail those amendments, which should be in print shortly.

SB 1340 (Hertzberg) – Would have extended, for 12 years, the property tax exclusion for a newly constructed active solar energy system and substitutes a modified partial exclusion for a larger scale system. Committee amendments delete the contents of the bill and provide a two-year extension of the existing property tax exclusion.

SB 1446 (Stern) – Would declare it is the public policy of the state that relevant state agencies, including the Department of Health Care Services (DHCS), the Department of Public Health (DPH), the Department of Social Services (DSS), and the Department of Housing and Community Development (HCD), must ensure an individual who, because of a severe behavioral health (BH) disorder, is not living safely in the community receives an individualized range of clinically appropriate BH-related treatment, housing that heals, and other services or supports. Assembly Appropriations amended the measure; however, amendments are not in print as of the publication of this document.

SCA 2 (Allen) – Would put a ballot measure before the voters that, if approved, would eliminate the constitutional requirement for voter-approval when local governments fund low-income affordable housing developments.

Held in Committee (Dead)

AB 4 (Arambula) – Would have extended, beginning January 1, 2022, eligibility for full scope Medi-Cal benefits to anyone regardless of age, and who is otherwise eligible for those benefits but for their immigration status.

AB 1878 (Wood) – Would have required Covered California to provide affordability assistance to reduce cost-sharing including copays, coinsurance, and maximum out-of-pocket costs, and to eliminate deductibles for all benefits.

AB 1900 (Arambula) – Would have increased the amount of income a Medi-Cal beneficiary who is required to pay a share of cost for their health care services can retain, from \$600 a month to an amount equal to 138% of the federal poverty level, so long as federal authorization is obtained. The policy issue was addressed in the 2022-23 state budget.

AB 1972 (Ward) – Would have increased civil and criminal grand jury per diem from \$15 to 70% of a county's median income.

AB 1995 (Arambula) – Would have eliminated premiums from the Other Targeted Low-Income Children's Program, the 250% Working Disabled Programs, the Medi-Cal Access Program, the Medi-Cal Access Infant Program, and the County Children's Health Initiative Program. The policy was included in the 2022-23 state budget.

AB 2186 (Grayson) – Would have established the Housing Cost Reduction Incentive Program to reimburse cities and counties for up to 50% of the development impact fees they reduced or deferred for affordable housing developments.

AB 2360 (Arambula) – Would have required the Office of Health Equity within CDPH to convene an advisory workgroup to develop protocols for the allocations of funds during a state or local emergency in order to reduce racial disparities in emergency response efforts.

AB 2419 (Bryan) – Would have required a state agency administering federal funds under the federal Infrastructure Investment and Jobs Act to allocate a minimum of 40% of those funds to projects that provided a direct benefit to disadvantaged communities and an additional 10% to projects that provided direct benefits to low-income households.

AB 2579 (Bennett) – Would have required, to the extent funding is provided for this purpose, a county placing agency to implement model practices for intensive family finding for children and youth in foster care.

SB 1154 (Eggman) – Would have required CDPH, in consultation with the DHCS and the State Department of Social Services (DSS), and conferring with specified stakeholders, to develop a real-time, internet-based database to collect, aggregate, and display information about beds in inpatient psychiatric facilities, crisis stabilization units, residential community mental health facilities, and licensed residential alcoholism or drug abuse recovery or treatment facilities, in order to facilitate the identification and designation of facilities for the temporary treatment of individuals in mental health or substance use disorder crisis.

SB 1339 (Pan) – Would have required a general acute care hospital in a building with a Structural Performance Category-2 (SPC-2) seismic rating to submit the estimated cost to comply with the 2030 seismic requirements to the Department of Health Care Access and Information (HCAI). This bill would have also required HCAI to compile a list of hospitals with an SPC-2 building, an inventory of services provided in each SPC-2 building, an assessment of the projected costs to retrofit each hospital building to meet specified 2030

seismic requirements, and provide this information in a report to the Legislature.

SB 1410 (Caballero) – Would have required the Office of Planning and Research to establish a grant program for local jurisdictions to implement guidelines related to the criteria and alternative metrics used for analyzing transportation impacts as well as required OPR to conduct and submit a study on those guidelines to the Legislature.

LAO Releases Overview of 2022-23 State Budget

The Legislative Analyst's Office (LAO) today released its **Overview of the 2022-23 Spending Plan**, a preliminary overview of the state's recently approved budget. The report provides information as to how the state allocated a \$53 billion General Fund surplus and a \$34 billion surplus for K-12 schools and community colleges, as well as changes to ensure that the state remained below its State Appropriations Limit. (As of now, the Administration does not anticipate that revenues will exceed the limit any time soon.) Expect additional reports from LAO regarding specific programmatic spending decisions in the coming weeks.

Legislature Continues Oversight of Kaiser Mental Health Services

The Senate Select Committee on Mental Health and Addiction, chaired by Senator Wiener, held an informational hearing this week entitled, "Timely Access to Mental Health Care & Compliance with SB 221." The hearing was primarily focused on whether health plans – particularly Kaiser Permanente – are complying with the provisions of SB 221, which require health plans to ensure mental health patients receive follow-up appointments generally within 10 business days of their initial visit.

Senator Wiener noted during the hearing that no health plan representatives chose to appear at the hearing, despite an invitation. The hearing **agenda** included Department of Managed Health Director Mary Watanabe, Kaiser patients and Kaiser clinicians. As additional context, the hearing comes as Northern California Kaiser mental health professionals represented by the National Union of Healthcare Workers prepare to hold an open-ended strike next week. A bargaining session was slated to occur today.

During the hearing, Senators asked the DMHC director what happens with SB 221 compliance during a strike. Director Watanabe stated that it is Kaiser's responsibility to comply with the law during a strike and could do so by arranging for out-of-network care at in-network rates for patients.

Senate Select Committee Hears from State and Local Leaders on Response to Monkeypox

The Senate Select Committee on Monkeypox held an informational hearing this week. (Somewhat inexplicably, the Monkeypox discussion was held concurrently with the hearing of the Senate Special Committee on Pandemic Emergency Response discussing “Lessons Learned from COVID-19: Preparing California for the Next Pandemic.” That latter hearing is discussed immediately below.)

The Monkeypox hearing [featured](#) three panels: (1) State Response, Medical Overview, and Patient Perspective; (2) County Response during which four counties (City and County of San Francisco along with the Counties of Los Angeles, Riverside, and San Diego) presented their experience and perspectives; and (3) Statewide LGBTQ+ Organizations, Community-Based Organizations, and Labor. Several common themes emerged during the hearing:

- Presenters discussed the ways in which persistent federal government inaction – inaction that many noted was similar to the inaction during the HIV crisis – resulted in an outbreak that was predictable and decidedly preventable. Additionally, despite there being an effective vaccine, the federal government allowed the nation’s considerable stockpile to expire and never replaced it. Those decisions have resulted in today’s critical (and, again, preventable) vaccine shortage.
- Despite news this week that intradermal dosing of the vaccine (known as TPOXX) will extend the supply – given that one traditional dose can be stretched into five intradermal doses – vaccines supply is still woefully scarce. Concerns also were raised about the vaccine distribution methodology; several speakers suggested other factors that should be considered.
- TPOXX is available to address severe symptoms and reduce pain but only can be prescribed on a compassionate use basis. However, the very difficult and time-consuming prescribing process inhibits its use, leaving patients in excruciating pain and providers very frustrated. There is widespread media coverage on these prescribing barriers, and immediate attention is needed to reduce the wait and increase access. Additionally, speakers – including two recovering patients – raised concerns about the suboptimal testing procedures.
- Because the outbreak – for now – is primarily centered in the LGBTQ+ community, concerns around stigma are particularly heightened, especially given how government approached the HIV crisis. To avoid repeating these same mistakes, today’s efforts are focused on harm reduction; avoiding stigma; building on lessons learned during COVID for stopping spread; as well as realistic, positive messaging through trusted community partners.

- Beyond considerable challenges with vaccine and PPE access, there is a critical need to have mechanisms in place for those who are infected, including patient supports like designated spaces for isolation, income replacement, and sick leave for both patients and caregivers. Resources for the public health response as well as community providers are essential and should be targeted to testing, treatment, vaccinations, and public awareness.
- Finally, representatives from the LGBTQ+ community spoke compellingly about the long history of the queer community being marginalized and asked that the committee and public at large acknowledge the fear, confusion, and anger around the Monkeypox outbreak.

[Senate Holds Hearing on Pandemic Lessons Learned](#)
[The Senate Special Committee on Pandemic Emergency Response held a hearing on August 9 to discuss “Lessons Learned from COVID-19: Preparing California for the Next Pandemic.”](#) The **[agenda](#)** and **[briefing paper](#)** prepared for the hearing are posted on the Committee’s **[website](#)**.

The overview panel include Dr. Michael Osterholm, Director, Center for Infectious Disease Research and Policy along with Professor Rich Callahan, Co-Director, University of San Francisco Master of Public Health Program. Dr. Osterholm provided his thoughts about the challenges associated with the COVID pandemic, including bringing the community along in participating in risk reduction. He reminded the Committee that the virus won’t just go away. He predicted that infectious diseases will continue to be a part of the future.

Dr. Callahan focused his comments on the intergovernmental dimensions of the pandemic. The state cannot respond alone – California has to work with other states, federal agencies and local governments. He also emphasized the role of data collection, testing and vaccine distribution. He urged policy makers that in looking to the future 1) they should accept the reality of a highly decentralized system and focus on how to make it work better (instead of centralizing) and 2) they should fund research about advancing health equity during a pandemic.

The front-line panel included Laura Ramos, Chief Executive, Providence St. Jude Medical Center; Dr. Veronica Kelley, Chief, Mental Health and Recovery Services, Orange County Health Care Agency; and Dr. Aimee Sisson, Health Officer, Yolo County Health & Human Services Agency. Ms. Ramos talked about the importance of a command center for their hospital system as well as the region. She also emphasized reviewing data and planning. The hospital

found that bringing physicians across specialties together weekly was very helpful.

Dr. Kelley talked about the role of county behavioral health in disaster response – often the first to arrive and the last to leave. She recommended 1) strengthening the behavioral health emergency response and 2) providing clearer guidance from public officials about the priority of behavioral health. Dr. Sisson outlined four lessons learned: 1) business as usual has no place in an emergency; 2) clear and transparent communication is critical; 3) investment in the public health workforce is critical; and 4) equity cannot be an afterthought. Public health did not create equity during the pandemic. The state must address root causes of inequity before the next pandemic. When asked about the number one recommendation to prepare for the next pandemic, both Dr. Kelley and Dr. Sisson said invest in workforce. Senator Limón noted to Senator Newman, the Committee chair, that there is an opportunity to partner with higher education institutions on workforce and that she would like to work with him.

The hearing concluded with remarks from Dr. Aragon, Director of CDPH; Stephanie Welch, deputy secretary of behavioral health from the California Health and Human Services Agency; and Mitch Medigovich, Deputy Director, California Governor's Office of Emergency Services.

Governor Newsom Names Two to Highest Court

Coming on the heels of the news that Chief Justice Tani Cantil-Sakauye would be retiring at the end of her term effective January 2, 2023, Governor Newsom announced this week that he will elevate recently appointed Supreme Court Justice Patricia Guerrero to serve as the next Chief Justice. Justice Guerrero, the first Latina to be appointed to the California Supreme Court and – if confirmed – the first to serve as Chief Justice, previously served as a state appellate court justice, among other roles. The Governor also announced that he plans to elevate sitting Alameda Superior Court Judge Kelli Evans to fill in behind the soon-to-be Chief Justice. Read more on the Governor's appointees [here](#). Both appointments are subject to confirmation.

Importantly, the role of the Chief Justice extends beyond participation as one of the state's seven final arbiters in legal disputes. The Chief also leads the state's judicial branch, which includes serving as the chair of the Judicial Council – the policymaking body of the court system – and the Commission on Judicial Appointments.

Governor Names Antonio Villaraigosa Infrastructure Advisor

Governor Gavin Newsom has [tapped](#) former Los Angeles Mayor and Assembly Speaker Antonio Villaraigosa – once his electoral rival – as an

Infrastructure Advisor to the State of California. Mayor Villaraigosa will be tasked with working with local, state, and federal leaders to identify priority projects and maximize access to federal funding across all regions of the state.

Villaraigosa served as the mayor of Los Angeles from 2005 to 2013 and was Governor Newsom's main antagonist in the 2018 gubernatorial race. He is currently a partner at the international consulting firm, Actum, LLC. Villaraigosa will not be a state employee, but will be paid through an arrangement with the non-profit group, [California Forward](#).

Newsom Administration Announces New Water Strategy

This week, Governor Gavin Newsom [announced "California's Water Supply Strategy, Adapting to a Hotter, Drier Future,"](#) a new strategy to increase water supply and adapt to more extreme weather patterns caused by climate change.

To address dwindling water supply, the strategy prioritizes actions to capture, recycle, de-salt, and conserve more water, including:

- Creating storage space for up to 4 million acre-feet of water, which will allow California to capitalize on big storms when they do occur and store water for dry periods
- Recycling and reusing at least 800,000 acre-feet of water per year by 2030, enabling better and safer use of wastewater currently discharged to the ocean.
- Freeing up 500,000 acre-feet of water through more efficient water use and conservation, helping make up for water lost due to climate change.
- Making new water available for use by capturing stormwater and desalinating ocean water and salty water in groundwater basins, diversifying supplies and making the most of high flows during storm events.

The state's water supply is expected to diminish by up to 10 percent by 2040 as rainfall goes down and evaporation increases because of climate change. The Newsom Administration says that modernizing the state's water system will generate water for 8.4 million households.