AMENDED IN ASSEMBLY APRIL 10, 2025 AMENDED IN ASSEMBLY MARCH 19, 2025

CALIFORNIA LEGISLATURE—2025–26 REGULAR SESSION

ASSEMBLY BILL

No. 641

Introduced by Assembly Member Jeff Gonzalez (Coauthor: Assembly Member Mark González)

February 13, 2025

An act to add and repeal Chapter—2 (commencing with Section 125711) of Part 8 of Division 106—5 (commencing with Section 104895.5) to Part 3 of Division 103 of the Health and Safety Code, relating to public health.

LEGISLATIVE COUNSEL'S DIGEST

AB 641, as amended, Jeff Gonzalez. Drug-Induced Movement Disorder Awareness Program.

Under existing law, the State Department of Public Health is responsible for the administration and oversight of various health care programs. Existing law, the California Osteoporosis Prevention and Education Act, states the intent of the Legislature to raise awareness of the causes of and options for the prevention of osteoporosis, to educate the public regarding the prevention and management of osteoporosis, and to improve management of osteoporosis, thereby minimizing its impact. Existing law sets forth the requirements for administration of the program.

Existing law requires the State Department of Public Health to conduct various programs related to disease prevention and health promotion, including a program for identifying, screening, and providing followup care related to exposure to diethylstilbestrol while $AB 641 \qquad \qquad -2 -$

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pregnant, which can cause fetal abnormalities. Existing law states the intention of the Legislature to fund this program in subsequent fiscal years through the normal budgetary process.

This bill would direct, upon appropriation of funds, as specified, the State Department of Public Health, by January 1, 2027 2028, to develop and administer a program related to drug-induced movement disorder awareness, as specified. The bill would repeal the program on January 1, 2031. 2032. The bill would include related findings and declarations.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

SECTION 1. The Legislature finds and declares the following: (a) In order to enhance the potential for positive outcomes in mental health treatment, it is essential to provide patients and health

care providers with educational information about the importance of screening for and recognizing symptoms of mental health

drug-induced movement-disorders, develop guidance on clinical standards for treating drug-induced movement disorders, including

via telehealth, disorders, and the elimination of bias and reduction of stigma for people living with drug-induced movement disorders

of stigma for people living with drug-induced movement disorders related to the treatment of mental health conditions.

(b) Patients receiving treatment with medications for their mental health conditions may be at risk of developing a drug-induced movement disorder. Drug-induced movement disorders, as discussed in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), are of "frequent importance"

Manual of Mental Disorders (DSM-5), are of "frequent importance"when mental disorders and other medical conditions are managed

with antipsychotic medications. These involuntary movement

disorders are caused by medications that help control dopamine,

such as first- and second-generation antipsychotics commonly prescribed to treat people living with mental illnesses like

schizophrenia, bipolar disorder, and major depression.

(c) Some drug-induced movement disorders, such as tardive dyskinesia, are persistent, irreversible, potentially disabling neurological conditions characterized by uncontrollable repetitive movements of the face, torso, or other parts of the body. While untreated involuntary movements can be stigmatizing and

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debilitating, the rates of undiagnosed patients living with drug-induced movement disorders remains high.

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- (d) Awareness of and periodic screenings for movement disorders are fundamental to the proper identification, diagnosis, and timely treatment of drug-induced movement disorders. Recent updates to the American Psychiatric Association's clinical guidelines reflect the importance of screening in people at risk of developing drug-induced movement disorders, but health care and mental health providers, patients, and the public may be unaware of these standards.
- (e) Public education and information about drug-induced movement disorders will help health professionals, public safety officials, and the community better understand these disorders, including what causes these types of involuntary movements and their prevalence. This can help reduce stigma by clarifying that some abnormal movements that may be mistaken as a public safety concern are actually uncontrollable physical symptoms of conditions caused by medication used to treat mental illness.
- (f) In addition, services provided via telehealth to patients at risk of developing drug-induced movement disorders, such as those treated with antipsychotic medications, should align with existing clinical standards of care. This includes ensuring that at-risk patients are periodically screened and assessed for developing drug-induced movement disorders. The needs of patients living with or at risk of developing drug-induced movement disorders encompass both mental and physical health care, and therefore may require additional considerations when determining the clinical appropriateness of telehealth.
- SEC. 2 Chapter 5 (commencing with Section 104895.5) is added to Part 3 of Division 103 of the Health and Safety Code, to read:

Chapter 5. Drug-induced movement disorder awareness PROGRAM

104895.5. (a) Upon appropriation by the Legislature or the appropriation of federal funds to the State Department of Public Health for this purpose, the department shall, by January 1, 2028, develop and administer a program to raise awareness about

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drug-induced movement disorders. The program shall include, but is not limited to, both of the following:

- (1) Evidence-based educational information on the importance of screening for and identifying symptoms of drug-induced movement disorders, and the risk factors for developing drug-induced movement disorders.
- (2) Education and outreach to eliminate the stigma for people living with drug-induced movement disorders related to the treatment of mental health conditions.
- (b) The department may consult with the State Department of Health Care Services and the Behavioral Health Services Oversight and Accountability Commission in implementing this chapter.
- (c) This chapter shall remain in effect only until January 1, 2032, and as of that date is repealed.
- SEC. 2. Chapter 2 (commencing with Section 125711) is added to Part 8 of Division 106 of the Health and Safety Code, to read:

CHAPTER 2. DRUG-INDUCED MOVEMENT DISORDER AWARENESS PROGRAM

125711. (a) Upon appropriation by the Legislature or the appropriation of federal funds to the State Department of Public Health for this purpose, the State Department of Public Health shall, by January 1, 2027, develop and administer a program to raise awareness about drug-induced movement disorders. The program shall include, but is not limited to, all of the following:

- (1) Educational information on the importance of screening for and identifying symptoms of drug-induced movement disorders.
- (2) The development of guidance on clinical standards for treating drug-induced movement disorders, including for services provided via telehealth.
- (3) Education and outreach to eliminate stigma for people living with drug-induced movement disorders related to the treatment of mental health conditions.
- (b) This chapter shall remain in effect only until January 1, 2031, and as of that date is repealed.