

October 28, 2025

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Anabel Renteria
Initiative Coordinator
Office of the Attorney General
State of California
PO Box 994255
Sacramento, CA 94244-25550

Oct 31 2025

INITIATIVE COORDINATOR
ATTORNEY GENERAL'S OFFICE

Re: Initiative 25-0021 - Amendment Number One

Dear Initiative Coordinator:

Pursuant to subdivision (b) of Section 9002 of the Elections Code, enclosed please find Amendment #1 to Initiative No. 25-0021. The amendments are reasonably germane to the theme, purpose or subject of the initiative measure as originally proposed.

I am the proponent of the measure and request that the Attorney General prepare a circulating title and summary of the measure as provided by law, using the amended language.

Thank you for your time and attention processing my request.

Sincerely,



Carmela Coyle

Health Care Union Transparency, Accountability & Union Member Right to Vote Act

AMENDMENT 1

SECTION 1. Findings & Declarations and Statement of Purpose.

A. In the past 15 years, some large special interest health care unions have proposed dozens of state and local health care policy proposals that threaten patient access to quality health care at hospitals, health clinics, doctor's offices, and other medical providers. Additionally, some of these policy proposals threaten the jobs of the health care workers the unions are supposed to represent by jeopardizing the financial viability of health care providers.

B. These large special interest health care unions have used the initiative process to propose dangerous and costly initiative measures to gain leverage over targeted health care providers for the union's bargaining or organizing purposes. The constitutional power of initiative was not intended to be used for corrupt purposes.

C. For example, since 2012, just one large California health care labor union alone has been behind at least 45 state and local ballot initiatives in California – spending \$75 million on those initiatives. In most cases, the ballot initiatives either failed at the ballot or were withdrawn before reaching the ballot.

D. Newspapers across the state have editorialized against this abuse of the initiative process, calling it "a form of political blackmail", "coercion", "manipulation", "an abuse of the initiative process." Unfortunately, neither state nor federal law adequately prohibit such abuse.

E. What's worse, executives from these large health care unions are spending tens of millions of dollars of their hardworking members' dues on these dangerous measures, without first getting approval from their members. In fact, most of these union leaders were elected by a very small percentage of the union's total membership – often less than 10% of all union members.

F. Too often, these union leaders don't even disclose to their members exactly how they've spent their dues on political campaigns and political issues that threaten patients and health care workers. And the unions make it almost impossible for a member to opt out of financially supporting some, or all, of the union's political spending.

G. Labor unions have a right to spend money on political issues and measures and to solicit voluntary contributions from members to the union's political committee established under state law. But union members also have the right to know how their dues are being used and to consent before their dues, which were not provided with the expectation that they would support ballot measures that a majority of members might oppose, are spent on political activity.

H. This ballot measure will bring transparency and accountability by ensuring that union members are informed annually of how their dues money is being spent on politics, and by requiring that union members consent to significant expenditures of dues money on state and local ballot measures.

I. Therefore, the People hereby enact this measure to ensure health care union members have the right to vote and decide if large amounts of their dues money are to be spent on state and local ballot measures and to increase transparency, so union members know how their money is being spent on political activities every year.

SECTION 2. Chapter 5.5 (commencing with section 1107) of Part 3 of Division 2 of the Labor Code is added to read:

Chapter 5.5

Health Care Labor Union Members' Right to Vote and Notice of Union Political Activities.

1107. Every health care labor organization organized and operating in the state shall:

(a) Provide written notice to its members of the total amount spent on political activities during the preceding calendar year as provided herein.

(1) The notice shall be mailed to the member's mailing address and emailed to the member's email address, as maintained by the health care labor organization, on or before January 31 of each year. In addition, the currently applicable notice shall be continuously posted and prominently displayed on the health care labor organization's website.

(2) The notice shall include the following and shall be displayed prominently, commencing on the first page of the written and emailed notice required herein:

(A) The total amount of contributions made to elected officers, candidates for elective office, and political parties as identified in Division 7 of the Elections Code;

(B) The total amount of independent expenditures made to support or oppose elected officers and candidates for elective office;

(C) The total amount of contributions made to support or oppose the qualification or passage of state and local measures, including the identification by proposition number or measure number/letter, the jurisdiction, and the general subject matter of each measure;

(D) The total amount of expenditures made to support or oppose the qualification or passage of state or local measures, including the identification by proposition number or measure number/letter, the jurisdiction, and the general subject matter of each measure;

(E) The total amount of payments for member communications as described in Government Code section 85312;

(F) The total amount of payments to influence legislative or administrative action;

(G) The cumulative total of the amounts identified in subdivisions (A) through (F);

(H) The total amount paid by the member receiving the notice for the health care labor organization's political activities identified in subdivisions (A) through (F), whether from the member's dues or contributions; and

(I) A statement informing members that they have the right to opt-out of financially supporting some or all of the health care labor organization's political activities identified in subdivisions (A) through (F) at any time, along with instructions for exercising this right by providing written notice via electronic mail or U.S. mail.

(3) In determining the amounts required to be disclosed, the health care labor organization shall include all payments made from the health care labor organization and from any sponsored committee of the health care labor organization.

(4) The notice shall include a certification signed, under penalty of perjury, by an officer of the health care labor organization that:

(A) the amounts identified were done so for the benefit of the members and in the furtherance of the organization's stated purposes as provided in the charter, bylaws, or other governing document of the organization; and

(B) the health care labor organization has complied with this section.

1108. Every health care labor organization organized and operating in the state shall:

(a) Obtain written consent from a majority of its members comprising a quorum before the organization makes:

(1) one or more contributions or expenditures, totaling one million dollars (\$1,000,000) or more to support or oppose the qualification or passage of any single state measure during a calendar year;

(2) one or more contributions or expenditures, totaling one hundred thousand dollars (\$100,000) or more to support or oppose the qualification or passage of any single local measure during a calendar year.

(b) The written consent form shall be signed and dated by the member. It shall identify the state or local measure, including the general subject matter of the measure proposed to be supported or opposed, identified by proposition number or measure number/letter, if assigned, and the jurisdiction.

(c) The record of such written consent given shall be submitted to the Labor Commissioner and shall be maintained by the health care labor organization for a period of 5 years.

(d) Any labor organization that receives one hundred thousand dollars (\$100,000) or more from a health care labor organization and, within one year of receipt, seeks to use any portion of those funds to make a contribution or expenditure to support or oppose a state or local measure as provided in subparagraph (a)(1) or (2), shall not make such contribution or expenditure unless and until the health care labor organization obtains written consent from its members in accordance with the requirements of this section.

(e) This section shall not apply to voluntary contributions made by a member to a sponsored committee of a health care labor organization formed to support or oppose state or local ballot measures or to contributions or expenditures made by such a sponsored committee.

(f) This section may not be waived by agreement or contract between the health care labor organization and the member.

1109. (a) For purposes of this chapter, the definitions in chapter 2 (commencing with section 82000) of Title 9 of the Government Code, shall apply to the following terms: "contribution;" "candidate;" "committee;" "elected officer;" "elective office;" "expenditure;" "independent expenditure;" "measure;" "payment;" "payment to influence legislative or administrative action;" and "sponsored committee."

(b) For purposes of this chapter, the term

(1) "health care labor organization" means any organization or any agency or employee representation committee or any local unit thereof that:

(A) files a federal tax return under a federal tax identification number assigned to the organization;

(B) has more than fifty thousand (50,000) members;

(C) a majority of its members are employees of a health care facility; and

(D) participates in, and exists for the purpose of, in whole or in part, dealing with health care facility employers concerning grievances, labor disputes, wages, hours of employment, or conditions of work.

(2) "member" means a person who is employed in the state and is eligible to vote for the health care labor organization's officers.

(3) "health care facility" means any "health facility" as defined in section 1250 of the Health and Safety Code, an integrated health care delivery system, and any "clinic" as defined in sections 1200, 1200.1, 1204, 1204.1 and 1204.3 of the Health and Safety Code.

(4) "integrated health care delivery system" means an entity or group of related entities that includes both of the following: (A) one or more hospitals and (B) one or more physician groups, health care service plans, medical foundation clinics, other health care facilities, or other entities, providing health care or supporting the provision of health care, where the hospital or hospitals and other entities are related through one of the following:

(A) parent and subsidiary relationships, joint or common ownership or control, common branding, or common boards of directors and shared senior management.

(B) a contractual relationship in which affiliated covered physician groups or medical foundation clinics contract with a health care service plan, hospital or other part of the system, all operating under a common trade name.

(C) a contractual relationship in which a nonprofit health care service plan provides medical services to enrollees in a specific geographic region of the state through an affiliated hospital system, and contracts with a single covered physician group in each geographic region of the state to provide medical services to a majority of the plan's enrollees in that region.

(5) "quorum" means two-thirds (2/3) of the health care labor organization's total membership at the time the written consent is sought.

1109.5. (a) A member of a health care labor organization, the Attorney General, or a district attorney may report a violation of this chapter to the Labor Commissioner, who shall investigate the complaint, and if a violation is determined to have occurred, the Commissioner shall obtain reimbursement for the costs of its investigation from the health care labor organization, and:

(1) impose a civil penalty for each violation of section 1107 in the amount of one thousand dollars (\$1,000) per member, which shall be paid to the members who did not receive the notice required by section 1107; or

(2) impose a civil penalty equal to the amount contributed or expended in violation of section 1108, which shall be paid to the members, on a pro rata basis, who were entitled to, but were denied the opportunity to provide the consent required by section 1108.

(b) The Labor Commissioner, the Attorney General, a district attorney, or any member of a health care labor organization may seek injunctive relief in a superior court to compel compliance with this section or remedy a violation, including an award of attorneys' fees.

SECTION 3. General Provisions.

(a) If any provision of this Act or application thereof to any person or circumstance is held invalid, that invalidity shall not affect other provisions or applications of the Act that can be given effect without the invalid provision or application, and to this end the provisions of this Act are severable. The People intend that each of the substantive provisions of this measure are independently important reforms that the People would have enacted without any of the other provisions.

(b) This Act is intended to be comprehensive. It is the intent of the People that in the event this Act or acts relating to the same subject shall appear on the same statewide election ballot, the provisions of the other act or acts shall be deemed to be in conflict with this Act. In the event that this Act receives a greater number of affirmative votes, the provisions of this Act shall prevail in their entirety, and all provisions of the other act or acts shall be null and void.