

SENATE COMMITTEE ON **HEALTH**

LEGISLATIVE SUMMARY 2015 – 2016 SESSION



Senator Ed Hernandez, O.D., Chair
Senator Janet Nguyen, Vice Chair

1595-S

SENATE COMMITTEE ON HEALTH

2015-2016 LEGISLATIVE SUMMARY

2015 COMMITTEE MEMBERS

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Vincent D. Marchand, *Consultant*
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Aimee Anspach, *Committee Assistant*

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Aging and Long-Term Care

SB 547 (Liu) - Aging and long-term care services, supports, and program coordination.

Creates a Statewide Aging and Long-Term Care Services and Coordinating Council (Council), chaired by the Secretary of the California Health and Human Services Agency and requires the Council to develop a state aging and long-term care services strategic plan to address how California will meet the needs of the aging population in 2020, 2025, and 2030. *Vetoed.*

SB 613 (Allen) - State Department of Public Health: dementia guidelines: workgroup.

Requires the Department of Public Health (DPH) to convene a workgroup to update the 2008 Guidelines for Alzheimer's Disease Management in California to address changes in the health care system, and requires DPH to submit a report of the updates and recommendations from the working group to the Legislature on or before March 1, 2017. *Chapter 577, Statutes of 2015.*

SB 1384 (Liu) - California Partnership for Long-Term Care Program.

Requires the California Partnership for Long-Term Care to allow insurers to offer long-term care policies at a lower-priced option in addition to the 5% inflation escalator policy currently issued, permits participating insurers to offer home care coverage only policies, and creates a task force to provide advice and assistance in implementing reforms to the California Partnership for Long-Term Care. *Chapter 487, Statutes of 2016.*

Alcohol and Other Drugs

SB 1283 (Bates) - Substance abuse: structured sober living homes.

Allows a city, county, or city and county to adopt, by ordinance, health and safety standards and enforcement mechanisms for structured sober living homes, as defined. Specifies that a structured sober living home registered pursuant to an ordinance authorized by this bill is not subject to state licensure and regulation, as specified. *Failed passage in the Senate Health Committee.*

AB 848 (Mark Stone) - Alcoholism and drug abuse treatment facilities.

Allows alcoholism or drug abuse recovery or treatment facilities licensed by the Department of Health Care Services to provide incidental medical services, as specified, upon receiving a license to provide those services. Requires incidental medical services to be provided by a physician and surgeon or other health care practitioners who are knowledgeable about addiction medicine, as specified. *Chapter 744, Statutes of 2015.*

AB 1977 (Wood) - Opioid Abuse Task Force.

Requires health plan and health insurer representatives, in collaboration with others, to convene an Opioid Abuse Task Force. *These provisions were amended out of the bill.*

Communicable Disease

SB 115 (Fuller) - Valley fever.

Appropriates \$1 million from the General Fund to the Department of Public Health for the 2015–16 fiscal year, for purposes of valley fever vaccine research, as specified. *Held on the Assembly Appropriations Committee Suspense File.*

SB 277 (Pan, Allen) - Public health: vaccinations.

Eliminates the personal belief exemption from the requirement that children receive vaccines for certain infectious diseases prior to being admitted to any public or private elementary or secondary school or day care center. *Chapter 35, Statutes of 2015.*

SB 792 (Mendoza) - Day care facilities: immunizations: exemptions.

Prohibits, commencing September 1, 2016, a person from being employed or volunteering at a day care center or a day care home if he or she has not been immunized against influenza, pertussis, and measles. *Chapter 807, Statutes of 2015.*

SB 1090 (Mitchell) - Sexually transmitted diseases: outreach and screening services.

Requires the Department of Public Health, to the extent funds are appropriated by the Legislature for these purposes, to allocate funds to counties for sexually transmitted disease outreach and screening services. *Vetoed.*

AB 521 (Nazarian) - HIV testing.

Requires a patient who has been admitted as an inpatient to a hospital through the emergency department and has blood drawn after being admitted to the hospital, and who has consented, to be offered an HIV test. *Vetoed.*

AB 1117 (Cristina Garcia) - Medi-Cal: vaccination rates.

Requires the Department of Health Care Services (DHCS) to establish and administer the California Childhood Immunization Quality Improvement Fund (CCIQIF) program to improve childhood immunization rates as a waiver or demonstration project. Requires DHCS to allocate 33% of CCIQIF expenditures for use by DHCS for administrative staff, training, and other resources to support providers in employing strategies to improve immunization rates in their practices, and 66.7% of CCIQIF expenditures for \$125 reward payments to Medi-Cal managed care plans for each enrollee who receives all recommended vaccinations by the time he or she reaches two years of age. Sunsets this bill on the date that the DHCS director executes a declaration stating that the demonstration project has concluded. *Held on the Senate Appropriations Committee Suspense File.*

AB 2179 (Gipson) - Hepatitis C testing.

Authorizes a hepatitis C counselor, who meets specified training requirements and works in specified testing sites, to perform hepatitis C virus tests classified as waived under the federal Clinical Laboratory Improvement Amendments of 1988. *Vetoed.*

AB 2439 (Nazarian) - HIV testing.

Creates a pilot project, to be administered by the Department of Public Health (DPH), in order to assess and make recommendations regarding the effectiveness of the routine offering of an HIV test in the emergency department (ED) of a hospital. Requires DPH to select four hospitals that have EDs to voluntarily participate in the pilot project, as specified. *Chapter 668, Statutes of 2016.*

AB 2640 (Gipson) - Public health: HIV.

Requires a medical care provider or person administering a HIV test to provide patients who test negative, and are determined to be at high risk for HIV infection by the medical provider or person administering the test, with information about methods that prevent or reduce the risk of contracting HIV, including, but not limited to, pre-exposure prophylaxis and post-exposure prophylaxis, consistent with guidance of the federal Centers for Disease Control and Prevention. *Chapter 670, Statutes of 2016.*

Emergency Medical Services

SB 287 (Hueso) - Automated external defibrillators (AEDs).

Requires certain buildings with capacities of 200 persons or greater, as specified, constructed on or after January 1, 2017, to have an automated external defibrillator on the premises. *Chapter 449, Statutes of 2015.*

SB 326 (Beall) - Courts: penalties: emergency services funding.

Extends the sunset date of the \$4 penalty assessment for Vehicle Code violations (other than parking offenses) until January 1, 2018, with the resulting revenue deposited in the Emergency Medical Air Transportation Act Fund (Fund). Money in that Fund is primarily used to fund Medi-Cal reimbursement for emergency medical air transportation services. Requires the Department of Health Care Services to develop a funding plan that ensures adequate reimbursement to emergency medical air transportation providers following the termination of penalty assessments under this bill on January 1, 2018. *Chapter 797, Statutes of 2015.*

SB 534 (Pan) - Medi-Cal: ground emergency medical transportation services: supplemental reimbursement.

Requires the Department of Health Care Services (DHCS) to design and implement an intergovernmental transfer program for public Medi-Cal managed care ground emergency medical transport services in order to increase Medi-Cal capitation payments to Medi-Cal managed care plans for the purpose of increasing Medi-Cal reimbursement to public ground emergency medical transport services providers. Permits DHCS to provide supplemental Medicaid reimbursement for the cost of paramedic services at a rate of payment equal to cost through the use of certified public expenditures. *Held on the Senate Appropriations Committee Suspense File.*

SB 658 (Hill) - Automated external defibrillators.

Repeals or reduces various requirements relating to persons or entities who acquire automated external defibrillators, including repealing requirements that employees complete training, and reducing the inspection requirements from once every 30 days to once every 90 days. *Chapter 264, Statutes of 2015.*

SB 1300 (Hernandez) - Medi-Cal: emergency medical transport providers: quality assurance fee.

Imposes a quality assurance fee on each transport provided by an emergency medical transport provider in accordance with a prescribed methodology. Requires the resulting revenue to be placed in a continuously appropriated fund to be used to provide additional Medi-Cal reimbursement to emergency medical transport providers, to pay for state administrative costs, and to provide funding for health care coverage for Californians. *Vetoed.*

AB 503 (Rodriguez) - Emergency medical services.

Permits a hospital to release patient-identifiable medical information to an emergency medical services provider, to the local emergency medical services agency, or to the Emergency Medical Services Authority, for quality assessment and improvement purposes. *Chapter 362, Statutes of 2015.*

AB 1129 (Burke) - Emergency medical services: data and information system.

Requires an emergency medical care provider, when submitting data to a local emergency medical services agency (LEMSA), to use an electronic health record system that is compatible with specified standards, and that includes those data elements that are required by the LEMSA. Prohibits a LEMSA from mandating that a provider use a specific electronic health record system. *Chapter 377, Statutes of 2015.*

AB 1149 (Wood) - Public health emergencies: funding.

Adds trade associations to the list of entities that are eligible to receive federal funding that has been allocated to the Department of Public Health for public health preparedness and response. *Chapter 93, Statutes of 2015.*

AB 1223 (O'Donnell) - Emergency medical services: ambulance transportation.

Requires the Emergency Medical Services Authority (EMSA) to adopt a statewide standard methodology for the calculation and reporting by a Local Emergency Medical Services Agency (LEMSA) of ambulance patient offload time, and permits a LEMSA to adopt policies and procedures for calculating and reporting ambulance patient offload time using the statewide methodology adopted by EMSA. Requires, if a LEMSA adopts a policy for calculating and reporting ambulance patient offload time, to establish criteria for the reporting of, and quality assurance follow-up for, a “nonstandard patient offload time.” *Chapter 379, Statutes of 2015.*

AB 1386 (Low) - Emergency medical care: epinephrine auto-injectors.

Permits a health care provider to issue a prescription for, and a pharmacy to dispense, an epinephrine auto-injector to an authorized entity, which is defined as any entity or organization that employs at least one person that has completed an approved training course on the emergency use of epinephrine auto-injectors. *Chapter 374, Statutes of 2016.*

AB 1931 (Rodriguez) - Emergency medical services: paramedics: discipline.

Adds Emergency Medical Technician-Paramedics to the provisions of law governing the procedures for investigations and disciplinary actions that are current law for Emergency Medical Technician-Is and IIs. *Held on the Senate Appropriations Committee Suspense File.*

AB 2260 (Wood) - Emergency medical services.

Requires the Emergency Medical Services Authority to determine a single set of data elements and formatting for air ambulance providers to submit to local emergency medical services agencies. *Held on the Senate Appropriations Committee Suspense File.*

Food Safety and Labeling

SB 65 (Wolk) - Food labeling: olive oil.

Removes the use of American Viticultural Areas from olive oil labels and instead uses specific regions or estates within California to indicate oil source. This bill requires that olive oil labeled as originating from a specific region of California contain at least 85% oil made from olives grown in that specified region, and if labeled from a specific estate, 95% from olives grown on the specified estate. *Chapter 138, Statutes of 2015.*

SB 746 (Wolk) - Olive Oil Commission of California: voting members: chair of advisory committee.

Changes the chair of the advisory committee from an ex-officio member to a voting member on the Olive Oil Commission of California Board of Directors. This bill also requires the chair of the advisory committee to designate an alternate to serve in the chair’s absence. *Chapter 278, Statutes of 2016.*

SB 969 (Nguyen) - Vietnamese rice cakes.

Permits a food facility to sell Vietnamese rice cakes, as defined, that have been at room temperature for up to 24 hours, notwithstanding provisions of law that require potentially hazardous foods to either be refrigerated or kept hot. *Chapter 193, Statutes of 2016.*

SB 1067 (Huff) - Food facilities.

Requires the food safety certification examination, which must be completed by at least one person at every retail food facility, to include major food allergens and the symptoms that these allergens could cause in individuals who have allergic reactions. Revises and recasts provisions of law governing the serving of raw and undercooked meat, and makes various other updates and minor changes to the laws governing retail food facilities. *Chapter 195, Statutes of 2016.*

AB 143 (Wood) - Food facilities.

Extends an exemption from food facility regulation, that currently exists for breweries, to enable wineries to offer prepackaged non-potentially hazardous food. *Chapter 164, Statutes of 2015.*

AB 226 (Atkins) - Retail food safety: fishermen’s markets.

Establishes “fishermen’s markets” as a new category of food facility that sell only raw fresh or fresh-frozen fish or raw edible aquatic plants, caught or harvested by California-licensed fishermen or California-registered aquaculturists, and establishes requirements for fishermen’s markets. *Chapter 615, Statutes of 2015.*

AB 234 (Gordon) - Food: sale.

Revises provisions of law governing community food producers and gleaners by allowing community food producers to sell whole uncut fruits or vegetables, or unrefrigerated shell eggs, directly to a permitted food facility, not just a restaurant, and by limiting the ability of a local environmental health officer to require community food producers or gleaners to register with the local enforcement agency under specified conditions. *Chapter 616, Statutes of 2015.*

AB 384 (Perea) - Food safety.

Eliminates the January 1, 2016, sunset date on provisions of law establishing a \$100 food safety fee on registered food processors, which supports education and training programs related to food safety, thereby making this program permanent. *Chapter 477, Statutes of 2015.*

Health Care Coverage

SB 10 (Lara) - Health care coverage: immigration status.

Requires Covered California to apply to the United States Department of Health and Human Services for a Section 1332 waiver authorized under the Affordable Care Act to allow persons who are not otherwise able to obtain coverage through Covered California by reason of immigration status to obtain coverage from Covered California by waiving the requirement that Covered California offer only qualified health plans. *Chapter 22, Statutes of 2016.*

SB 26 (Hernandez) - California Health Care Cost and Quality Database.

Requires the Secretary of California Health and Human Services Agency to, no later than January 1, 2017, use a competitive process to contract, as specified, with one or more independent, nonprofit organizations in order to administer the California Health Care Cost and Quality Database. Requires the nonprofit organization, no later than January 1, 2019, to make a publicly available, web-based, searchable database, as specified. Requires the information and analysis included in the database to be presented in a way that facilitates comparisons of cost, quality, and patient satisfaction across payers, provider organizations, and other suppliers of health care services. *Held on the Senate Appropriations Committee Suspense File.*

SB 43 (Hernandez) - Health care coverage: essential health benefits.

Updates California's essential health benefits to make them consistent with new federal requirements promulgated under the Affordable Care Act, which includes adoption of the federally required definition of habilitative services and devices. *Chapter 648, Statutes of 2015.*

SB 125 (Hernandez) - Health care coverage.

Extends the sunset date of the California Health Benefit Review Program to June 30, 2017 and makes changes to its analyses and timelines. Extends the fee assessed on health plans and insurers for this purpose until fiscal year 2016-17. Establishes an annual open enrollment period for purchasers in the individual health insurance market for the policy year beginning on January 1, 2016, from November 1, of the preceding calendar year, to January 31, of the benefit year, inclusive. Conforms state law to federal requirements regarding how to count employees for the purposes of determining employer size with regard to small or large group health insurance markets. *Chapter 9, Statutes of 2015.*

SB 137 (Hernandez) - Health care coverage: provider directories.

Requires a health plan or insurer to make available a provider directory or directories that provide information on contracting providers, including those that accept new patients. Prohibits a provider directory from including information on a provider that does not have a current contract with the plan or insurer. *Chapter 649, Statutes of 2015.*

SB 282 (Hernandez) - Health care coverage: prescription drugs.

Permits the use of alternative methods of electronic prior authorization of prescription drugs other than the required standardized form, and exempts physician groups with delegated financial risk from the standardized prior authorization process. *Chapter 654, Statutes of 2015*

SB 289 (Mitchell) Telephonic and electronic patient management services.

Requires a health plan or health insurer to cover telephonic and electronic patient management services provided by a physician or non-physician health care provider and reimburse those services based on their complexity and time expenditure, as specified. *Held on the Senate Appropriations Committee Suspense File.*

SB-388 (Mitchell) - Solicitation and enrollment.

Makes uniform summary of benefits and coverage (SBC) information which must be provided to consumers by health plans and insurers under the federal Affordable Care Act and California law, a vital document, subject to specified translation requirements commencing October 1, 2016. Requires, not later than July 1, 2016, the Department of Managed Health Care and the California Department of Insurance, to make available on their Internet Web sites written translations of the template of uniform SBC, and specifies the language groups which require translation. *Chapter 655, Statutes of 2015.*

SB 435 (Pan) - Medical home: health care delivery model.

Requires the Secretary of the Health and Human Services Agency to convene a working group to identify appropriate payment methods to align incentives in support of patient centered medical homes. *These provisions were amended out of the bill.*

SB 503 (Hernandez) Cal-COBRA: disclosures.

Deletes an obsolete warning notice required of health plans and insurers providing group coverage and replaces it with a notice providing information about obtaining other health coverage, including through Medi-Cal or Covered California. *These provisions were amended out of the bill.*

SB 546 (Leno) - Health care coverage: rate review.

Establishes weighted average rate increase disclosure requirements for a health plan's or insurer's aggregated large group market products and requires the Department of Managed Health Care and the California Department of Insurance to conduct a public meeting regarding large group rate changes for each plan or insurer that offers coverage in the large group market between November 1, 2016, and March 1, 2017, and annually thereafter. Creates a notice to employers 60 days prior to renewal about the rate increase relative to rate increases negotiated by the California Health Benefit Exchange and CalPERS, and whether the rate change includes any portion of the excise tax paid by the plan. *Chapter 801, Statutes of 2015.*

SB 908 (Hernandez) - Health care coverage: premium rate change: notice: other health coverage.

Requires health plans and health insurers to notify purchasers in the individual and small group market if premium rates have been determined unreasonable or unjustified, and establishes timeframes associated with the health insurance rate review process. *Chapter 498, Statutes of 2016.*

SB 923 (Hernandez) - Health care coverage: cost sharing changes.

Prohibits a health plan contract or health insurance policy from changing any cost sharing design during the plan or policy year, except when required by state or federal law. *Chapter 192, Statutes of 2016.*

SB 932 (Hernandez) - Health care mergers, acquisitions, and collaborations.

Bans seven specified provisions from contracts between health care providers and payors and requires prior approval from the Department of Managed Health Care for mergers and other transactions between health care service plans, risk-based and other organizations. *Held on the Senate Appropriations Committee Suspense File.*

SB 999 (Pavley) - Health insurance: contraceptives: annual supply.

Authorizes a pharmacist to dispense a 12-month supply of United States Food and Drug Administration-approved, self-administered hormonal contraceptives, requires insurance to cover the cost, and incorporates chaptering amendments for SB 253 (Monning). *Chapter 499, Statutes of 2016.*

SB 1034 (Mitchell) - Health care coverage: autism.

Eliminates the sunset date on the health insurance mandate to cover behavioral health treatment for pervasive developmental disorder or autism, and makes other revisions to the law such as prohibiting denials for medically necessary behavioral health treatment based on the setting, location or time of the treatment. *Held on the Assembly Appropriations Committee Suspense File.*

SB 1135 (Monning) - Health care coverage: notice of timely access to care.

Requires health plans, health insurers and Medi-Cal managed care plans to notify enrollees and contracted providers about information on timely access to care standards and information about interpreter services, at least annually. *Chapter 500, Statutes of 2016.*

SB 1159 (Hernandez) - California Health Care Cost, Quality and Equity Data Atlas.

Requires the California Health and Human Services Agency to research the options for developing a cost, quality, and equity Data Atlas database that is consistent with the confidentiality of medical information in existing law. *Chapter 727, Statutes of 2016.*

AB 72 (Bonta, Bonilla, Dahle, Gonzalez, Maienschein, Santiago, Wood) - Health care coverage: out-of-network coverage.

Establishes a payment rate that is the greater of the average of a health plans or health insurer's contracted rate, as specified, or 125% of the amount Medicare reimburses for the same or similar services, and a binding independent dispute resolution process for claims and claim disputes related to covered services provided at a contracted health facility by a non-contracting health care professional. Limits enrollee and insured cost sharing for these covered services to no more than the cost sharing required had the services been provided by a contracting health care professional. *Chapter 492, Statutes of 2016.*

AB 248 (Roger Hernández) - Health insurance: minimum value: large group market policies.

Prohibits non-grandfathered health plans or health insurers that offer, amend, or renew a large group health plan contract or health insurance policy from marketing, offering, amending, or renewing a large group plan contract or health insurance policy that provides a minimum value of less than 60% (at least 60% of an enrollees' or insureds medical costs are covered by the plan). *Chapter 617, Statutes of 2015.*

AB 339 (Gordon) - Health care coverage: outpatient prescription drugs.

Requires health plans and health insurers that provide coverage for outpatient prescription drugs to have formularies that do not discourage the enrollment of individuals with health conditions, and requires combination antiretroviral drug treatment coverage of a single-tablet that is as effective as a multitablet regimen for the treatment of HIV/AIDS. Places in state law, federal requirements related to pharmacy and therapeutics committees, access to in-network retail pharmacies, standardized formulary requirements, formulary tier requirements similar to those required of health plans and insurers participating in Covered California and copayment caps of \$250 and \$500 for a supply of up to 30 days for an individual prescription. *Chapter 619, Statutes of 2015.*

AB 374 (Nazarian) - Health care coverage: prescription drugs.

Permits an exception to a health plan's or insurer's step therapy process to be submitted in the same manner as a request for prior authorization for prescription drugs. Requires those requests to be treated in the same manner, and responded to by the plan or insurer in the same manner, as a prior authorization request. *Chapter 621, Statutes of 2015.*

AB 533 (Bonta) - Health care coverage: out-of-network coverage.

Requires the Department of Managed Health Care and the California Department of Insurance to establish a binding independent dispute resolution process for claims for non-emergency covered services provided at contracted health facilities by a non-contracting health care professional, limits enrollee and insured cost sharing for these covered services to no more than the cost sharing required had the services been provided by a contracting health professional, and requires health plan and insurer reimbursement to the non-contracting health professional to be based on the amount the individual health professional would have been reimbursed by Medicare for the same or similar services in the general geographic area in which services were rendered. *Failed passage on the Assembly Floor for concurrence in Senate amendments.*

AB 796 (Nazarian) - Health care coverage: autism and pervasive developmental disorders.

Eliminates the sunset date on the health insurance mandate to cover behavioral health treatment for pervasive developmental disorder or autism. *Chapter 493, Statutes of 2016.*

AB 1102 (Santiago) - Health care coverage: Medi-Cal Access Program: disclosures.

Requires the Department of Health Care Services to inform an applicant of the Medi-Cal Access Program who is declined coverage, about the Major Risk Medical Insurance Program and options for potential subsidized coverage through Covered California. *These provisions were amended out of the bill.*

AB 1163 (Rodriguez) - Health care services plan and health insurers: agents and brokers: notice of contract changes.

Prohibits a health plan or health insurer from making material changes to contracts with insurance agents or brokers without providing at least 45 days of notice. *Chapter 482, Statutes of 2015.*

AB 1216 (Bonta) - Limitations on cost sharing: family coverage.

Exempts high deductible health plans (HDHP) sold in the large group health insurance market from a requirement to have individual family member deductibles if the corresponding HDHP product sold to individuals who do not have family coverage has a deductible amount that is less than an amount specified in federal Internal Revenue Service regulations. *No action taken on the Senate Floor.*

AB 1305 (Bonta) - Limitations on cost sharing: family coverage.

Requires maximum out-of-pocket limits and deductibles for health plan or health insurance coverage for families to include maximum out-of-pocket limits and deductibles for each individual of the family to be less than or equal to the maximum out-of-pocket limit and deductibles that apply for coverage purchased for an individual. Implements the individual deductible requirement in the large group market on contracts and policies issued, amended, or renewed on or after July 1, 2016. *Chapter 641, Statutes of 2015.*

AB 1763 (Gipson) - Health care coverage: colorectal cancer: screening and testing.

Requires health plan and health insurance coverage without cost sharing for specified colorectal cancer screening examinations and laboratory tests for individuals at average risk, and requires coverage for additional colorectal cancer screening examinations without cost-sharing for individuals at high risk, as specified. Prohibits the imposition of cost sharing on colonoscopies, including the removal of polyps, for an enrollee who is between 50 and 75 years of age and has received a positive test, as specified. *Vetoed.*

AB 1831 (Low) - Health care coverage: prescription drugs: refills.

Requires a health plan contract or health insurance policy issued, amended, or renewed on or after July 1, 2017 that provides coverage for prescription drugs to allow for early refills of covered topical ophthalmic products, as specified. *Vetoed.*

AB 1954 (Burke) - Health care coverage: reproductive health care services.

Establishes the Direct Access to Reproductive Health Care Act to prohibit health plans and health insurers from requiring an enrollee to receive a referral prior to receiving coverage or services for reproductive and sexual health care services. *Chapter 495, Statutes of 2016.*

AB 1977 (Wood) - Opioid Abuse Task Force.

Requires health plan and health insurer representatives, in collaboration with others, to convene an Opioid Abuse Task Force. *These provisions were amended out of the bill.*

AB 2004 (Bloom) - Hearing aids: minors.

Requires health insurers and health plans to cover for enrollees under 18 years of age, hearing aids including an initial assessment, new hearing aids every five years, and more frequently under specified circumstances. *Held on the Senate Appropriations Committee Suspense File.*

AB 2115 (Wood) - Health care coverage: disclosures.

Requires health plans and health insurers to inform an individual who ceases to be enrolled in coverage that additional information on low- or no-cost programs for health care and prescription medicines may be found on the Office of the Patient Advocate's Internet Web site or the Internet Web site determined to be the most appropriate to contain this information, and indicate that these programs may not meet the requirements of the individual mandate under the Affordable Care Act. *Vetoed.*

Health Care Facilities

SB 145 (Pan) - Health Facilities: patient transporting.

Prohibits hospitals from causing a patient with a blood alcohol content of 0.08 percent or greater to be transported to another location, except when the patient is medically stabilized or transferred to another licensed health facility, and provides for enforcement of repeat violators by the Attorney General or by local district attorneys, including civil penalties of \$150,000 for a second violation, and \$300,000 for subsequent violations. *These provisions were amended out of the bill.*

SB 275 (Hernandez) - Health facility data.

Requires the Office of Statewide Health Planning and Development to adopt a regulation that adds physician identifiers to the patient level data elements that are required to be collected and reported by hospitals and surgical clinics. *Hearing cancelled at the request of the author in the Assembly Health Committee.*

SB 315 (Monning, Hernandez) - Health care access demonstration project grants.

Creates the California Health Access Model Program (CHAMP) Two Account for purposes of administering a second competitive grant selection process, in accordance with the CHAMP authorizing statute, to fund one or more projects designed to demonstrate specified new or enhanced cost-effective methods of delivering quality health care services to improve access to care for vulnerable populations or communities, or both. *No action taken on the Assembly Floor.*

SB 346 (Wieckowski) - Health facilities: community benefits.

Repeals the existing hospital community benefit law, and establishes a new hospital community law to require private non-profit hospitals to complete a community needs assessment, followed by a community benefits plan. Defines "community benefit" and other terms for purposes of this bill, and requires 90% of a private non-profit hospital's community benefit moneys to be allocated to charity care and projects that improve community health for underserved and vulnerable populations, as defined. *Failed passage in the Senate Health Committee.*

SB 361 (Hill) - Skilled nursing facilities: antimicrobial stewardship guidelines.

Requires skilled nursing facilities to adopt and implement an antimicrobial stewardship policy by January 1, 2017. *Chapter 764, Statutes of 2015.*

SB 396 (Hill) - Health care: outpatient settings and surgical clinics: facilities: licensure and enforcement.

Requires a Medicare-certified clinic and an accredited outpatient setting, as specified, to request a report from the appropriate healthcare regulatory board regarding the filing of a peer review report; requires licensees who perform procedures in outpatient settings to be subject to peer review every two years and that the governing body review the findings of those reports; and, specifies that inspections of accredited outpatient surgical centers may be unannounced with a 60-day warning of the pending inspection. *Chapter 287, Statutes of 2015*

SB 483 (Beall) - General acute care hospitals: observation services.

Requires a general acute care hospital that provides observation services in an observation unit, as defined, to apply for approval from the Department of Public Health for observation services as a supplemental service, as specified; limits observation services in an observation unit to 24 hours; requires observation services in an observation unit to have the same staffing requirements as emergency services; and, requires hospitals to report observation service data to the Office of Statewide Health Planning and Development. *Held on the Senate Appropriations Committee Suspense File.*

SB 648 (Mendoza) - Health and care facilities: referral agencies.

Adds referrals to residential care facilities for the elderly (RCFEs) to the body of law requiring anyone who refers someone to a skilled nursing or intermediate care facility for compensation to be licensed as a referral agency, and establishes new requirements on referral agencies, including disclosure of any agreement with the facilities that clients are being referred to, any commissions or fees received, and a requirement for liability insurance. *Vetoed.*

SB 675 (Liu) - Health facilities: family caregivers.

Revises the requirements for hospitals to have a discharge planning process by requiring a hospital to provide an opportunity for a patient who has been admitted to the hospital as an inpatient to identify one family caregiver to assist in post-hospital care, to record that information in the patient's medical chart, and to provide an opportunity for the patient and his or her designated family caregiver to engage in the discharge planning process, as specified. *Chapter 494, Statutes of 2015.*

SB 779 (Hall) - Skilled nursing facilities: certified nurse assistant staffing.

Increases the minimum number of required nursing hours per patient in a skilled nursing facility from 3.2 hours to 4.1 hours, requires the California Department of Public Health to develop regulations that establish staff-to-patient ratios that convert the 4.1 hours into minimum staff-to-patient ratios that reflect 2.8 hours for certified nurse assistants (CNAs) and 1.3 hours for licensed nurses, and establishes specific staff-to-patient ratios for CNAs. *Held on the Senate Appropriations Committee Suspense File.*

SB 787 (Bates) - Hospitals: closures.

Permits Saddleback Memorial Medical Center to operate an emergency department at its San Clemente campus, subject to approval by the Department of Public Health, even if the San Clemente campus stopped providing acute care services, thereby permitting a freestanding emergency department, subject to specified conditions. *Failed passage in the Senate Health Committee.*

SB 994 (Hill, Allen) - Antimicrobial stewardship policies.

Requires primary care clinics and specialty clinics, by January 1, 2018, and physicians, podiatrists and dentists when applying for their next renewal license, to adopt and implement an antibiotic stewardship policy, as defined. *These provisions were amended out of the bill.*

SB 1076 (Hernandez) - General acute care hospitals: observation services.

Establishes new requirements for observation services provided by a hospital, including that observation services provided in an outpatient observation unit comply with the same nurse-to-patient ratios as emergency services, and requiring patients to receive written notice when they are receiving observation services in an inpatient unit of the hospital. *Chapter 723, Statutes of 2016.*

SB 1365 (Hernandez) - Hospitals.

Requires a general acute care hospital to notify patients scheduled for a service in a hospital-based outpatient clinic, as defined, when that service is available at other locations that may cost less. *Chapter 501, Statutes of 2016.*

AB 81 (Wood) - Hospitals: seismic safety.

Permits a hospital in the City of Willits to request an eight-month deadline extension of a seismic safety requirement that hospitals be rebuilt or retrofitted to be capable of withstanding an earthquake, which it is currently required to meet by January 1, 2015, so that this hospital could have until September 1, 2015, to meet this seismic safety requirement. *Chapter 63, Statutes of 2015.*

AB 232 (Oberholte) - Hospitals: seismic safety.

Permits a critical access hospital located in the City of Tehachapi to submit a seismic safety extension application, pursuant to specified provisions of existing law that allow an extension up to January 1, 2020, notwithstanding a deadline of September 2012 to apply for this extension. *Chapter 555, Statutes of 2015.*

AB 348 (Brown) - Long-term health care facilities: complaints: investigations.

Requires the Department of Public Health (DPH) to apply the same time periods that are required for complaint investigations, inspections, and issuance of citations, to reports from licensed long-term health care facilities, and requires DPH to analyze its compliance on a quarterly basis with the time periods for investigations that were recently established by budget trailer bill language for complaints and expanded by this bill to facility reports. *Held on the Senate Appropriations Committee Suspense File.*

AB 389 (Chau) - Hospitals: language assistance services.

Requires hospitals to post, on their Internet Web sites, their language assistance policies, as well as a notice of the availability of language assistance services in English and in up to the five other languages most commonly spoken in the hospital's service area. This bill also requires the Department of Public Health to post each hospital's language assistance policy on its Internet Web site. *Chapter 327, Statutes of 2015.*

AB 444 (Gipson) - Health facilities: epidural and external feeding connectors.

Delays, until July 1, 2016, the deadline prohibiting general acute care, acute psychiatric, special hospitals, and skilled nursing facilities (SNFs) from using certain enteral connector devices.

Delays, until January 1, 2017, the deadline prohibiting general acute care, acute psychiatric, special hospitals, and SNFs from using certain epidural connector devices. *Chapter 198, Statutes of 2015*

AB 918 (Mark Stone) - Seclusion and restraint: developmental services: health facilities.

Requires the Secretary of California Health and Human Services agency to establish a system of mandatory, consistent, timely, and publicly accessible data collection related to data on seclusion and restraint in community facilities serving aged and developmentally disabled persons, as specified. Requires the Department of Developmental Services to publish on its Web page the number of incidents of physical and chemical restraint in community facilities, as specified.

Requires community facilities to report every death or serious injury of a person in seclusion or in physical or chemical restraint no later than the close of the business one day following the death or serious injury. *Chapter 340, Statutes of 2015.*

AB 941 (Wood) - Clinics: licensure and regulation: exemption.

Exempts from licensure and regulation by the Department of Public Health any clinic operated by a federally recognized Indian tribe under a contract with the United States pursuant to the Indian Self-Determination and Education Assistance Act, regardless of the location of the clinic. *Chapter 502, Statutes of 2015.*

AB 1130 (Gray) - Clinics: licensing: hours of operation.

Expands the licensure exemption for intermittent clinics that are operated by licensed clinics on separate premises by permitting these intermittent clinics to be open for up to 30 hours per week, instead of only 20 hours per week. *Chapter 412, Statutes of 2015.*

AB-1147 (Maienschein) - Health facilities: pediatric day health and respite care facilities.

Revises the definition of a pediatric day health and respite care facility, which is currently limited to children 21 years of age or younger, to also permit an individual who is 22 years of age or older to receive care if the facility receives approval for a Transitional Health Care Needs Optional Service Unit, which is established by this bill. *Chapter 206, Statutes of 2015.*

AB 1177 (Gomez, Burke, Low) - Primary care clinics: written transfer agreements.

Prohibits a primary care clinic, notwithstanding current regulations or any other law, from being required to enter into a written transfer agreement with a nearby hospital as a condition of licensure. *Chapter 704, Statutes of 2015.*

AB 1211 (Maienschein) - Health care facilities: congregate living health facility.

Increases the maximum capacity of congregate living health facilities, except those that are specifically permitted to have larger capacities due to meeting specified exemptions, from 12 to 18 beds. *Chapter 483, Statutes of 2015.*

AB 1235 (Gipson) - Medi-Cal: beneficiary maintenance needs: home upkeep allowances and transitional personal needs funds.

Requires the home upkeep allowance (HUA) for eligible Medi-Cal beneficiaries in long-term care facilities to be based on the actual minimum cost of maintaining the resident's home (the HUA is currently \$209 a month). Allows a long-term care facility resident who does not have a home to establish a transitional personal needs fund of up to \$7,500 to be set aside from the income that otherwise would be applied toward the resident's Medi-Cal share of cost for residing in the long term care facility. *Held on the Senate Appropriations Committee Suspense File.*

AB 1300 (Ridley-Thomas) - Mental health: involuntary commitment.

Allows an emergency physician or psychiatric professional, who is not a county-designated professional person, as specified, to detain a person who is a danger to self or others, or is gravely disabled, for up to 72 hours for evaluation and treatment, as specified. Requires a designated facility to accept, within its clinical capability and capacity, all categories of persons for whom it is designated, without regard to insurance or financial status. *Re-referred to the Senate Rules Committee, no further action taken.*

AB 1350 (Salas) - Kern County Hospital Authority.

Makes a number of changes to provisions of law governing the ability of Kern County (County) to establish a separate authority, and to transfer control of the county hospital, Kern Medical Center, to this authority, including requiring the County to be obligated to ensure that required employer contributions to fund retirement benefits for employees are paid; requiring an expired memorandum of understanding to be adhered to in the same manner as a memorandum of understanding that has not expired; and other technical, clarifying, and conforming changes. *Chapter 790, Statutes of 2015.*

AB 1518 (Committee on Aging and Long-Term Care) - Medi-Cal: nursing facilities.

Requires the Department of Health Care Services, by February 1, 2016, to apply for an additional 5,000 slots beyond those currently authorized for the home- and community-based Nursing Facility/Acute Hospital Waiver in 2016-17. *No action taken on the Senate Floor.*

AB 2024 (Wood) - Critical access hospitals: employment.

Authorizes a federally certified critical access hospital (CAH) to employ physicians and charge for their services until 2024 and requires the Medical Board of California to provide a report to the Legislature on the impact of authorizing CAHs to employ physicians. *Chapter 496, Statute of 2016.*

AB 2053 (Gonzalez, Gray) - Primary care clinics.

Requires the Department of Public Health to issue a single consolidated license to a primary care clinic that includes more than one physical plant operated on separate premises. *Chapter 639, Statutes of 2016.*

AB 2079 (Calderon) - Skilled nursing facilities: staffing.

Increases the minimum number of required nursing hours per patient in a skilled nursing facility (SNF) from 3.2 hours to 4.1 hours incrementally beginning on January 1, 2018, with full implementation on January 1, 2020, and specifies that within the required minimum of 4.1 nursing hours when fully implemented, SNFs are required to have a minimum of 2.8 hours per patient day for certified nursing assistants, and 1.3 hours per patient day for licensed nurses. *No action taken on the Senate Floor.*

AB 2737 (Bonta) - Nonprovider health care districts.

Requires a nonprovider healthcare district, which this bill defines using parameters that limit its application to the Eden Township Healthcare District in Alameda County, to spend at least 80% of its annual budget on community grants awarded to organizations that provide direct health services, and no more than 20% of its annual budget on administrative expenses. *Chapter 421, Statutes of 2016.*

AB 2747 (Hadley) - Chronic dialysis clinics.

Requires the Department of Public Health (DPH) to process a license application for a chronic dialysis clinic, and conduct a licensure survey, within 90 days of receiving an application, and to also conduct an unannounced certification survey for the Centers for Medicare and Medicaid Services (CMS) within 60 days after DPH receives approval from CMS to conduct the CMS certification survey. *Vetoed.*

Infant and Children's Health

SB 118 (Liu) - School-Based Health and Education Partnership Program.

Modifies and renames an existing school health center grant program to add a population health grant, alters existing sustainability grant amounts, adds services for which the grants may be used, and updates terminology. *Held on the Assembly Appropriations Committee Suspense File.*

SB 319 (Beall) - Child welfare services: public health nursing.

Expands the duties of the foster care public health nurse to include monitoring and oversight of the administration of psychotropic medication to foster children, as specified. *Chapter 535, Statutes of 2015.*

SB 402 (Mitchell) - Pupil health: vision examinations.

Requires a pupil's vision to be examined by a physician, optometrist, or ophthalmologist, as specified, and requires the pupil's parent or guardian to provide the results of the examination to the pupil's school. Prohibits a school from denying admission to a pupil or take any other adverse action against a pupil if his or her parent or guardian fails to provide the results of the examination. *Held on the Senate Appropriations Committee Suspense File.*

SB 484 (Beall) - Juveniles.

Requires the Department of Social Services (DSS) to establish a methodology for identifying group homes that have levels of psychotropic drug utilization warranting additional review, and to inspect identified facilities at least once a year, as specified. Permits DSS to share information and observations with the facility and to require the facility to submit a plan within 30 days to address identified risks, as specified. *Chapter 540, Statutes of 2015.*

SB 1095 (Pan) - Newborn screening program.

Requires the Department of Public Health to expand statewide screening of newborns to include screening for any disease that is detectable in blood samples as soon as practicable, but no later than two years after the disease is adopted by the federal Recommended Uniform Screening Panel or enactment of this bill, whichever is later. *Chapter 393, Statutes of 2016.*

SB 1258 (Huff) - Pupil health: food allergies: local educational agency policy.

Requires a school district, county office of education, and charter school to develop a comprehensive policy, as specified, in coordination with specified individuals, to protect pupils with food allergies. *Held on the Senate Appropriations Committee Suspense File.*

SB 1420 (Mendoza) - Child care and development: occupational health and safety training.

Requires caregivers, as defined, to attend a one-time, two-hour training on occupational health and safety, as specified. Requires the Department of Education and the Department of Public Health to develop the curriculum for the training, as defined. *Held on the Senate Appropriations Committee Suspense File.*

AB 170 (Gatto) Newborn screening: genetic diseases: blood samples collected.

Requires the Department of Public Health to provide information about genetic testing and to obtain a signed form, as specified, from a parent or guardian of a newborn child regarding the collection of blood samples, as specified. Allows parents and guardians, and individuals at least 18 years of age, to request, as specified, that blood samples not be used for medical research, or to be destroyed, or both, as specified. *Failed passage in the Senate Health Committee.*

AB 766 (Ridley-Thomas) - Public School Health Center Support Program.

Requires the Department of Public Health to give grant funding preference, as specified, to schools with a high percentage of children and youth who receive free or low-cost insurance through Medi-Cal. *Held on the Senate Appropriations Committee Suspense File.*

AB 1025 (Thurmond) - Pupil health: multitiered and integrated interventions pilot program.

Requires the Department of Education to establish a three-year pilot program in school districts to encourage inclusive practices that integrate mental health, special education, and school climate interventions following a multitiered framework. *Held on the Senate Appropriations Committee Suspense File.*

AB 2872 (Patterson) - Children.

Makes technical and clarifying changes related to adoption laws, including requiring hospitals to complete a Health Facility Minor Release Report upon the request of a birth parent. *Chapter 702, Statutes of 2016.*

Medi-Cal

SB 4 (Lara) - Health care coverage: immigration status.

Requires undocumented individuals under 19 years of age enrolled in Medi-Cal at the time the Director of the Department of Health Care Services makes the determination to begin enrollment to be enrolled in full scope of Medi-Cal benefits, if otherwise eligible, pursuant to an eligibility and enrollment plan. *Chapter 709, Statutes of 2015.*

SB 33 (Hernandez) - Medi-Cal: estate recovery.

Limits Medi-Cal estate recovery to only those services required to be recovered under federal Medicaid law. Eliminates estate recovery against the estate of a surviving spouse of a deceased Medi-Cal beneficiary. Requires the Department of Health Care Services (DHCS) to waive its estate recovery claim when the estate is a homestead of modest value in determining the existence of a substantial hardship. Narrows the definition of “estate” to mean all real and personal property and other assets that are required to be subject to a claim for recovery under federal law. Limits the amount DHCS can charge a current or former beneficiary who is subject to estate recovery to up to \$5 once per year. The provisions of SB 33 were included in SB 833 (Committee on Budget and Fiscal Review), Chapter 30, Statutes of 2016, the 2016 health budget trailer bill. *No action taken on the Assembly Floor.*

SB 36 (Hernandez, De León) - Medi-Cal: demonstration project.

Authorizes the Department of Health Care Services (DHCS) to request one or more temporary waiver extensions to continue the operation of, and the authorities provided under, the current "California Bridge to Reform Demonstration," the state's Section 1115 Medicaid waiver. Requires DHCS to extend and apply the existing hospital payment methodologies and allocations on a state fiscal year, annual, partial year, or other basis, to the extent permitted under any approved temporary waiver extension, an approved subsequent waiver, or as otherwise permitted under federal Medicaid law. *Chapter 759, Statutes of 2015.*

SB 123 (Liu) – Medi-Cal: school-based administrative activities.

Establishes a revised process for school-based and non-school-based administrative claiming, beginning January 1, 2018, authorizes the Department of Health Care Services (DHCS) to administer or oversee a single statewide quarterly random moment time survey, requires the DHCS and California Department of Education to enter into an interagency agreement or memorandum of understanding by July 1, 2018, and establishes a workgroup to provide advice on issues related to the delivery of school-based Medi-Cal services to students. *Vetoed.*

SB 147 (Hernandez) - Federally qualified health centers.

Requires the Department of Health Care Services to authorize a three-year payment reform pilot project for federally qualified health centers (FQHCs) using an alternative payment methodology (APM) authorized under federal Medicaid law. Requires an FQHC participating in the pilot to receive a per member per month payment for each of its APM enrollees from a Medi-Cal managed care health plan, instead of the wrap around payment FQHCs currently receive from DHCS. *Chapter 760, Statutes of 2015.*

SB 243 (Hernandez) - Medi-Cal: reimbursement: provider rates.

Repeals prior year Medi-Cal provider and managed care rate reductions. Increases specified fee-for-service Medi-Cal provider rates to Medicare levels. Requires rates paid to Medi-Cal managed care plans to be actuarially equivalent to the payment rates established under the Medicare program. Requires Medi-Cal hospital inpatient claims for diagnosis-related groups to be increased by 16 percent for the 2015–16 fiscal year, and to be increased annually thereafter. Requires Medi-Cal managed care plan rates to be increased by a proportionately equal amount for increased payments for hospital services. *Held on the Senate Appropriations Committee Suspense File.*

SB 276 (Wolk) - Medi-Cal: local educational agencies.

Requires the Department of Health Care Services to seek federal financial participation for covered services that are provided by a local educational agency (LEA) to a child who is an eligible Medi-Cal beneficiary, regardless of whether the child has an individualized education plan or an individualized family service plan, or whether those same services are provided at no charge to the beneficiary or to the community at large, if the LEA takes all reasonable measures to ascertain and pursue claims for payment of covered services against legally liable third parties. *Chapter 653, Statutes of 2015.*

SB 296 (Cannella) - Medi-Cal: specialty mental health services: documentation requirements.

Limits the scope of the service billing documentation requirements that the Department of Health Care Services (DHCS) may apply when conducting an audit of Medi-Cal specialty mental health services, as specified. Requires DHCS to consider further revisions to its service billing documentation requirements and to prepare, in consultation with counties, providers, and other stakeholders, and to submit to the Legislature, a proposal to accomplish specified objectives. *No action was taken on the Senate Floor to concur in Assembly amendments.*

SB 299 (Monning) - Medi-Cal: provider enrollment.

Exempts health care providers submitting a Medi-Cal provider application package to the Department of Health Care Services' (DHCS) Medi-Cal provider enrollment division from the current notarization requirements if the provider enrolls electronically. This bill conforms state law to federal regulation by requiring DHCS to designate a provider or applicant as a “high” categorical risk if DHCS lifted a temporary moratorium within the previous six months for the particular provider type submitting the application. *Chapter 271, Statutes of 2015.*

SB 326 (Beall) - Courts: penalties: emergency services funding.

Extends the sunset date of the \$4 penalty assessment for Vehicle Code violations other than parking offenses, until January 1, 2018, with the resulting revenue deposited in the Emergency Medical Air Transportation Act Fund (Fund). Money in that Fund is primarily used to fund Medi-Cal reimbursement for emergency medical air transportation services. Requires the Department of Health Care Services to develop a funding plan that ensures adequate reimbursement to emergency medical air transportation providers following the termination of penalty assessments under this bill on January 1, 2018. *Chapter 797, Statutes of 2015.*

SB 447 (Allen) - Medi-Cal: clinics: drugs and supplies.

Revises the Medi-Cal and Family Planning Access and Treatment reimbursement formula for drugs and supplies dispensed by specified clinics by requiring the clinic dispensing fee to be the difference between the actual acquisition cost of a drug or supply and the Medi-Cal reimbursement rate, and removes the maximum dispensing fee caps in existing law. *Held on the Assembly Appropriations Committee Suspense File.*

SB 492 (Liu) - Coordinated Care Initiative: Consumer Bill of Rights.

Enacts the “Coordinated Care Initiative Consumer and Patient Educational and Informational Guide,” which requires the Department of Health Care Services to develop and post on its Internet Web site an educational and informational guide for consumers and patients about the Coordinated Care Initiative (CCI). Requires the guide to describe consumer and patient rights under the CCI, and inform consumers and patients of effective ways to exercise their rights and who to contact for assistance in securing those rights. *No action taken on the Assembly floor.*

SB 534 (Pan) - Medi-Cal: ground emergency medical transportation services: supplemental reimbursement.

Requires the Department of Health Care Services (DHCS) to design and implement an intergovernmental transfer program for public Medi-Cal managed care ground emergency medical transport services in order to increase Medi-Cal capitation payments to Medi-Cal managed care plans for the purpose of increasing Medi-Cal reimbursement to public ground emergency medical transport services providers. Permits DHCS to provide supplemental Medicaid reimbursement for the cost of paramedic services at a rate of payment equal to cost through the use of certified public expenditures. *Held on the Senate Appropriations Committee Suspense File.*

SB 586 (Hernandez) - Children’s services.

Allows the Department of Health Care Services to establish a Whole Child Model for children enrolled in both Medi-Cal and the California Children’s Services (CCS) Program in 21 counties served by four county organized health systems, instead of the existing arrangement in most counties where CCS services are “carved out” from the Medi-Cal managed care plan. Continues the CCS “carve out” in the remaining 37 counties until January 1, 2022. *Chapter 625, Statutes of 2016*

SB 610 (Pan) - Medi-Cal: federally qualified health centers and rural health clinics: managed care contracts.

Establishes timeframes for the Department of Health Care Services (DHCS) to review and finalize federally qualified health center (FQHC) and rural health clinic (RHC) Medi-Cal-related scope-of-service changes and reconciliation changes, and requires DHCS to make payments within specified timeframes if reconciliation payments are owed. Establishes timeframes for DHCS to finalize rates for new FQHCs and RHCs. Requires DHCS to update the provider master file within specified timeframes with the rates for new FQHCs and RHCs and when a scope-of-service change is complete. Requires DHCS to correct erroneous payments at least quarterly, and to reprocess past claims and ensure all claims are reimbursed at the finalized new rate. *Vetoed.*

SB 614 (Leno) - Medi-Cal: mental health services: peer and family support specialist certification.

Requires the Department of Health Care Services (DHCS) to establish a program for certifying peer and family support specialists and to collaborate with interested stakeholders. Allows DHCS to seek any federal waivers or state plan amendments to implement the certification program. *These provisions were amended out of the bill.*

SB 815 (Hernandez, De León) - Medi-Cal: demonstration project.

Enacts the statutory provisions of “Medi-Cal 2020,” the state’s recently approved five-year federal Section 1115 waiver, which runs through December 31, 2020. Implements the Public Hospital Redesign and Incentive in Medi-Cal program, the Global Payment Program for county designated public hospitals, and the access assessment required under the Special Terms of Conditions of Medi-Cal 2020. *Chapter 111, Statutes of 2016.*

SB 997 (Lara) - Health care coverage: immigration status.

Requires undocumented children eligible for full-scope Medi-Cal benefits who were enrolled in a comprehensive, low-cost coverage provided by Kaiser Permanente (Kaiser) or a Medi-Cal managed care plan as of May 1, 2016 to be enrolled in full-scope Medi-Cal with Kaiser or their Medi-Cal managed care plan if the undocumented child is determined eligible for full-scope Medi-Cal benefits. *These provisions were amended out of the bill.*

SB 1098 (Cannella) - Medi-Cal: dental services: utilization rate: report.

Requires the Department of Health Care Services (DHCS) to report to the Legislature on progress towards the goal of raising the Denti-Cal utilization rate among eligible child beneficiaries to 60% or greater and to identify a date by which DHCS projects this utilization goal will be met. Sunsets the provisions of this bill on January, 1, 2021. *Chapter 630, Statutes of 2016.*

SB 1291 (Beall) - Medi-Cal: specialty mental health: children and youth.

Requires a mental health plan review to be conducted annually by an external quality review organization that includes specific data for specific data for Medi-Cal eligible minor and nonminor dependents in foster care. *Chapter 844, Statutes of 2016.*

SB 1300 (Hernandez) - Medi-Cal: emergency medical transport providers: quality assurance fee.

Imposes a quality assurance fee on each transport provided by an emergency medical transport provider in accordance with a prescribed methodology. Requires the resulting revenue to be placed in a continuously appropriated fund to be used to provide additional Medi-Cal reimbursement to emergency medical transport providers, to pay for state administrative costs, and to provide funding for health care coverage for Californians. *Vetoed.*

SB 1335 (Mitchell) - Medi-Cal benefits: federally qualified health centers and rural health centers: Drug Medi-Cal and specialty mental health services.

Authorizes federally qualified health centers (FQHCs) and rural health clinics (RHCs) to receive reimbursement from county specialty mental health plans and through Drug Medi-Cal under the terms of a contract between the FQHC and RHC and either the county or the Department of Health Care Services (DHCS) outside of the regular Medi-Cal reimbursement structure that applies to FQHCs and RHCs. *No action taken on the Assembly Floor.*

SB 1339 (Monning) - Public social services: intercounty transfers.

Clarifies the process counties must follow when a recipient of public assistance benefits, including CalWORKs, CalFresh, and Medi-Cal, moves between counties. *Chapter 801, Statutes of 2016.*

SB 1361 (Nielsen) - Medi-Cal: eyeglasses.

Provides Medi-Cal coverage of one pair of eyeglasses provided every two years for an individual who is 21 years of age or older and who is unable to meet or exceed the driver's license vision standards established by the Department of Motor Vehicles. *Held on the Senate Appropriations Committee Suspense File.*

SB 1401 (McGuire) - Pediatric and Home Care Expansion Act.

Requires the Department of Health Care Services to develop at least three regional pilot projects in counties located in the San Francisco Bay Area, the Central Valley and Los Angeles County to increase access for children receiving Medi-Cal or California Children's Services Program benefits who are eligible for in-home, shift nursing care services by increasing private duty nursing reimbursement rates by 20% for participating licensed home health agencies. Sunsets the provisions of this bill on July 1, 2020. *Held on the Senate Appropriations Committee Suspense File.*

SB 1466 (Mitchell) - Early and Periodic Screening, Diagnosis, and Treatment Program: trauma screening.

Requires screening services provided under the Early and Periodic Screening, Diagnosis, and Treatment Program to include screening for trauma, as defined. *Vetoed.*

AB 50 (Mullin) - Medi-Cal: evidence-based home visiting programs.

Requires the Department of Health Care Services to develop a feasibility plan on or before January 1, 2017, that describes the costs, benefits, and any potential barriers related to offering evidence-based home visiting programs to Medi-Cal eligible pregnant and parenting women. *Vetoed.*

AB 68 (Waldron) - Medi-Cal.

Requires a Medi-Cal beneficiary to be entitled to an automatic urgent appeal, as defined, when a Medi-Cal managed care plan denies coverage for a drug prescribed for the treatment of seizures and epilepsy that is approved by the Food and Drug Administration (FDA) for the use in the treatment of seizures and epilepsy if the patient's treating provider demonstrates that in his or her reasonable, professional judgment, the drug is medically necessary and consistent with FDA labeling and use rules and regulations, as supported in at least one of the official compendia, and the drug is not on the formulary of the Medi-Cal managed care plan. *Vetoed.*

AB 73 (Waldron, Gipson) - Patient Access to Prescribed Antiretroviral Drugs for HIV/AIDS Treatment Act

Requires the denial by a Medi-Cal managed care plan of a non-formulary drug prescribed for the treatment of HIV/AIDS that is approved by the federal Food and Drug Administration for use in the treatment of HIV/AIDS to be subject to an urgent appeal process established by this bill, if the treating provider demonstrates, consistent with federal law, that in his or her reasonable, professional judgment, the drug is medically necessary and consistent with the federal labeling and use rules and regulations. *These provisions were amended out of the bill.*

AB 145 (Gomez) - Public benefits reports.

Corrects a drafting error in legislation related to a report of employers with employees who are enrolled in the Medi-Cal Program. *Chapter 358, Statutes of 2015.*

AB 187 (Bonta) - Medi-Cal: managed care: California Children's Services program.

Extends the sunset date on the California Children's Services (CCS) "carve out" by an additional one year, under which CCS-covered services are prohibited from being incorporated in a Medi-Cal managed care plan. *Chapter 738, Statutes of 2015.*

AB 366 (Bonta) - Medi-Cal: annual access monitoring report.

Requires the Department of Health Care Services (DHCS) to submit to the Legislature, and post on the DHCS' Internet Web site, a Medi-Cal access monitoring report. Requires the report to present results of DHCS' ongoing access monitoring efforts in fee-for-service and managed care and to compare the level of access to care and services available through Medi-Cal, to the level of access to care and services available to the general population in different geographic areas of California. *These provisions were amended out of the bill.*

AB 461 (Mullin) - Coordinated Care Initiative.

Authorizes a Medi-Cal beneficiary receiving services through a regional center or who is enrolled in a Medi-Cal home- and community-based waiver who resides in San Mateo County to voluntarily enroll in the CalMediConnect demonstration project for individuals dually eligible for Medicare and Medi-Cal under the Coordinated Care Initiative. *Chapter 199, Statutes of 2015.*

AB 635 (Atkins) - Medical interpretation services.

Requires the Department of Health Care Services (DHCS) to conduct a study to identify current requirements for medical interpretation services, and requires DHCS to work with identified stakeholders to establish a pilot project in up to four separate sites to evaluate a mechanism to provide and improve medical interpretation services for limited-English proficient Medi-Cal beneficiaries based on the recommendations of the study related to pilot projects and available funding. *Chapter 600, Statutes of 2016.*

AB 664 (Dodd) - Medi-Cal: universal assessment tool report.

Extends, from July 1, 2017, to September 1, 2018, the duration of the existing provisions of law requiring the Department of Health Care Services, the Department of Social Services and the California Department of Aging to establish a stakeholder workgroup to develop a universal assessment process, a universal assessment tool (UAT), authorization for piloting of the UAT, and reporting requirements on those provisions. Delays two existing reports to the Legislature on program implementation and a post-implementation report. Requires the existing post-implementation report to include additional information from consumers assessed. *Chapter 367, Statutes of 2015.*

AB 858 (Wood) - Medi-Cal: federally qualified health centers and rural health clinics.

Adds marriage and family therapists to the list of health care providers that qualify for a face-to-face encounter with a patient at a Federally Qualified Health Center (FQHC) or Rural Health Clinic (RHC) for purposes of the per visit Medi-Cal payment billed by FQHCs and RHCs. *Vetoed.*

AB 1018 (Cooper) - Medi-Cal: Early and Periodic Screening, Diagnosis, and Treatment (EPSDT).

Requires the Department of Health Care Services and the Department of Education to convene a task force, as specified, to examine the delivery of mental health services through EPSDT services. *Held on the Senate Appropriations Committee Suspense File.*

AB 1051 (Maienschein) - Denti-Cal program.

Increases Denti-Cal provider reimbursement rates for the 15 most common prevention, treatment, and oral evaluation services to the regional average commercial rates, effective January 1, 2017. *Held on the Senate Appropriations Committee Suspense File.*

AB 1102 (Santiago) - Health care coverage: Medi-Cal Access Program: disclosures.

Requires the Department of Health Care Services to inform an applicant of the Medi-Cal Access Program who is declined coverage, about the Major Risk Medical Insurance Program and options for potential subsidized coverage through Covered California. *These provisions were amended out of the bill.*

AB 1114 (Eggman) - Medi-Cal: pharmacist services.

Requires pharmacist services to be a benefit under the Medi-Cal program, establishes a list of covered pharmacist services that may be provided to a Medi-Cal beneficiary, and requires the Department of Health Care Services to establish a fee schedule for the list of pharmacist services that is 85% of the fee schedule for physician services under the Medi-Cal program. *Chapter 602, Statutes of 2016.*

AB 1117 (Cristina Garcia) - Medi-Cal: vaccination rates.

Requires the Department of Health Care Services (DHCS) to establish and administer the California Childhood Immunization Quality Improvement Fund (CCIQIF) program to improve childhood immunization rates as a waiver or demonstration project. Requires DHCS to allocate 33% of CCIQIF expenditures for use by DHCS for administrative staff, training, and other resources to support providers in employing strategies to improve immunization rates in their practices, and 66.7% of CCIQIF expenditures for \$125 reward payments to Medi-Cal managed care plans for each enrollee who receives all recommended vaccinations by the time he or she reaches two years of age. Sunsets this bill on the date that the DHCS director executes a declaration stating that the demonstration project has concluded. *Held on the Senate Appropriations Committee Suspense File.*

AB 1162 (Holden) - Medi-Cal: tobacco cessation.

Requires tobacco cessation services to be a covered benefit under the Medi-Cal program, and requires tobacco cessation services to include all intervention recommendations, as periodically updated, assigned a grade A or B by the United States Preventive Services Task Force. *Vetoed.*

AB 1231 (Wood) - Medi-Cal: nonmedical transportation.

Adds nonmedical transportation as a Medi-Cal benefit, subject to utilization controls and federally permissible time and distance standards, for a beneficiary to obtain covered Medi-Cal services. *Vetoed.*

AB 1235 (Gipson) - Medi-Cal: beneficiary maintenance needs: home upkeep allowances and transitional personal needs funds.

Requires the home upkeep allowance (HUA) for eligible Medi-Cal beneficiaries in long-term care facilities to be based on the actual minimum cost of maintaining the resident's home (the HUA is currently \$209 a month). Allows a long-term care facility resident who does not have a home to establish a transitional personal needs fund of up to \$7,500 to be set aside from the income that otherwise would be applied toward the resident's Medi-Cal share of cost for residing in the long term care facility. The personal needs fund would be used to cover the costs of securing a home for the individual. *Held on the Senate Appropriations Committee Suspense File.*

AB 1261 (Burke) - Community-based adult services: adult day health care centers.

Requires Community-Based Adult Services to be a Medi-Cal benefit, and to be included as a covered service in contracts with all Medi-Cal managed health care plans, with standards, eligibility criteria, and provisions described in the Special Terms and Conditions of the state's "Bridge to Reform" Section 1115 Medicaid Demonstration Waiver and any successor federal authorities. *Vetoed.*

AB 1319 (Dababneh) - Medi-Cal benefits: share of cost requirements.

Increases the personal and incidental needs deduction for Medi-Cal beneficiaries residing in a licensed community care facility from \$20 to \$50. *Held on the Senate Appropriations Committee Suspense File.*

AB 1518 (Committee on Aging and Long-Term Care) - Medi-Cal: nursing facilities.

Requires the Department of Health Care Services, by February 1, 2016, to apply for an additional 5,000 slots beyond those currently authorized for the home- and community-based Nursing Facility/Acute Hospital Waiver in 2016-17. *No action taken on the Senate Floor.*

AB 1568 (Bonta, Atkins) - Medi-Cal: demonstration project.

Enacts specified statutory provisions of "Medi-Cal 2020," the state's five-year federal Section 1115 waiver, which runs through December 31, 2020, including the Dental Transformation Initiative, the Whole Person Care program and the evaluations required under the Special Terms of Conditions (STCs) of Medi-Cal 2020. Requires the Department of Health Care Services to conduct or arrange to have conducted studies, reports and assessments required under the STCs. *Chapter 42, Statutes of 2016.*

AB 1696 (Holden) - Medi-Cal: tobacco cessation services.

Requires tobacco cessation services to be a covered benefit under the Medi-Cal program, subject to utilization controls. Requires tobacco cessation services to include all intervention recommendations assigned a grade A or B by the United States Preventive Services Task Force. *Chapter 606, Statutes of 2016.*

AB 1739 (Waldron) - Medi-Cal: allergy testing.

Requires the Medi-Cal standard of coverage and medical necessity for allergy tests to be consistent with consensus standards and recommendations in clinical guidelines from the National Institutes of Health, Clinical and Laboratory Standards Institute, and the most current peer-reviewed medical literature pertaining to the utilization of modern serologic-specific IgE tests (a type of blood test). *Vetoed.*

AB 1863 (Wood) - Medi-Cal: federally qualified health centers: rural health centers.

Adds marriage and family therapists to the list of healthcare professionals that qualify for a face-to-face encounter with a patient at Federally Qualified Health Centers or Rural Health Clinics for purposes of a per-visit Medi-Cal payment under the prospective payment system. *Chapter 610, Statutes of 2016.*

AB 2207 (Wood) - Medi-Cal: dental program.

Requires the Department of Health Care Services (DHCS) to expedite the Medi-Cal dental program (Denti-Cal) provider enrollment process, including an alternative automatic enrollment process for a provider already commercially enrolled, subject to federal approval. Requires automatic deactivation of a dental provider who has not submitted a claim over a continuous 12-month period, after notice to the provider. Requires DHCS to monitor access and utilization of Denti-Cal services to assess opportunities to improve access and utilization. Expands and aligns Denti-Cal fee-for-service and Denti-Cal managed care annual reporting requirements, and requires quarterly data reporting requirements. Codifies the data reporting and evaluation requirements for the Dental Transformation Initiative in the state's "Medi-Cal 2020" Section 1115 waiver. *Chapter 613, Statutes of 2016.*

AB 2394 (Eduardo Garcia) - Medi-Cal: nonmedical transportation.

Requires Medi-Cal to provide coverage of nonmedical transportation for a beneficiary to obtain covered Medi-Cal services, subject to utilization controls and permissible time and distance standards. *Chapter 615, Statutes of 2016.*

AB 2821 (Chiu, Santiago) - Medi-Cal Housing Program.

Requires the Department of Housing and Community Development to establish the Housing for a Healthy California Program, which would fund competitive grants to pay for interim and long-term rental assistance for homeless Medi-Cal beneficiaries who meet specified criteria, including who are eligible for Supplemental Security Income. Establishes criteria for an applicant to be eligible for a grant, including having identified a source of funding for housing transition services and tenancy sustaining services and which agrees to contribute funding for interim and long-term rental assistance. Requires the Housing for a Healthy California Program to be funded, upon appropriation by the Legislature. *Vetoed.*

[Mental Health](#)

SB 291 (Lara) - Mental health: vulnerable communities.

Expands the definition of "vulnerable communities," as specified, and requires the Department of Health Care Services to include stakeholders in vulnerable communities in its meaningful decision making process for purposes of providing technical assistance to specified entities. *Vetoed.*

SB 296 (Cannella) - Medi-Cal: specialty mental health services: documentation requirements.

Limits the scope of the service billing documentation requirements that the Department of Health Care Services (DHCS) may apply when conducting an audit of Medi-Cal specialty mental health services, as specified. Requires DHCS to consider further revisions to its service billing documentation requirements and to prepare, in consultation with counties, providers, and other stakeholders, and to submit to the Legislature, a proposal to accomplish specified objectives. *No action was taken on the Senate Floor to concur in Assembly amendments.*

SB 319 (Beall) - Child welfare services: public health nursing.

Expands the duties of the foster care public health nurse to include monitoring and oversight of the administration of psychotropic medication to foster children, as specified. *Chapter 535, Statutes of 2015.*

SB 484 (Beall) - Juveniles.

Requires the Department of Social Services (DSS) to establish a methodology for identifying group homes that have levels of psychotropic drug utilization warranting additional review, and to inspect identified facilities at least once a year, as specified. Permits DSS to share information and observations with the facility and to require the facility to submit a plan within 30 days to address identified risks, as specified. *Chapter 540, Statutes of 2015.*

SB 614 (Leno) - Medi-Cal: mental health services: peer and family support specialist certification.

Requires the Department of Health Care Services (DHCS) to establish a program for certifying peer and family support specialists and to collaborate with interested stakeholders. Allows DHCS to seek any federal waivers or state plan amendments to implement the certification program. *These provisions were amended out of the bill.*

SB 955 (Beall) - State hospital commitment: compassionate release.

Requires the Director of the Department of State Hospitals to release a patient, as specified, from confinement, parole, or outpatient status if specified criteria are met for being terminally ill or permanently medically incapacitated, and the conditions under which the patient would be released do not pose a threat to public safety. *Chapter 715, Statutes of 2016.*

SB 1034 (Mitchell) - Health care coverage: autism.

Eliminates the sunset date on the health insurance mandate to cover behavioral health treatment for pervasive developmental disorder or autism, and makes other revisions to the law such as prohibiting denials for medically necessary behavioral health treatment based on the setting, location or time of the treatment. *Held on the Senate Appropriations Committee Suspense File.*

SB 1113 (Beall) - Pupil health: mental health.

Authorizes a county, or a qualified provider operating as part of the county mental health plan network, and a local educational agency to enter into a partnership for the provision of Early and Periodic Screening, Diagnosis, and Treatment mental health services. *Vetoed.*

SB 1273 (Moorlach) - Crisis stabilization units: funding.

Allows a county to use its Mental Health Services Fund moneys for outpatient crisis stabilization services to individuals who are voluntarily receiving those services, even when facilities co-locate services to individuals who are involuntarily receiving services. *No action taken on the Assembly Floor.*

AB 38 (Eggman) - Mental health: Early Diagnosis and Preventive Treatment Program.

Establishes the Early Diagnosis and Preventive Treatment (EDAPT) program Fund in the state Treasury to fund EDAPT programs, which utilize integrated systems of care for persons with severe mental illness and children with severe emotional disturbance, for participants whom have private health benefit coverage that does not cover the full range of services. *Chapter 547, Statutes of 2016*

AB 59 (Waldron) - Mental health services: assisted outpatient treatment.

Extends the repeal date of the Assisted Outpatient Treatment (AOT) Demonstration Project Act of 2002, or “Laura’s Law,” by five years, to January 1, 2022, and deletes and recasts in existing law the Department of Health Care Service’s reporting requirement, as specified, regarding the AOT services a county provides. *Chapter 251, Statutes of 2016.*

AB 168 (Maienschein) - Mental health: community-based services.

Requires the Department of Health Care Services, if chosen to participate in a federal demonstration program that creates criteria for certified community behavioral health clinics, as specified, to provide an update to the Legislature related to county funding for mental health services by March 1, 2017. *Chapter 283, Statutes of 2016.*

AB 253 (Roger Hernández) - Mental health.

Requires specified government entities responsible for administering the Veterans Housing and Homeless Prevention Act of 2014 (VHHP) to give preference to applicants for funding from the VHHP for supportive housing projects, as specified. Requires the Governor to appoint two additional members to the Mental Health Services Oversight and Accountability Commission with mental health experience, as specified. Requires the Department of Health Care Services to post specified information from mental health plans to a dedicated Internet Web page and to notify appropriate committees of the Legislature, as specified. *Hearing cancelled at the request of the author in the Senate Transportation and Housing Committee.*

AB 580 (O'Donnell) - Pupil mental health: model referral protocols.

Requires the California Department of Education to develop model referral protocols for voluntary use by schools to address the appropriate and timely referral by school staff of students with mental health concerns. *Vetoed.*

AB 741 (Williams) - Mental health: community care facilities.

Expands the definition of a short-term residential treatment center to include a children’s crisis residential center to be used as a diversion from psychiatric hospitalization, and limits the stay to 10 consecutive days and no more than 20 total days within a six-month period. *Vetoed.*

AB 745 (Chau) - Mental Health Services Oversight and Accountability Commission.

Requires the Governor to appoint an additional member to the Mental Health Services Oversight and Accountability Commission who has experience providing supportive housing to people with a severe mental illness. *Vetoed.*

AB 796 (Nazarian) - Health care coverage: autism and pervasive developmental disorders.
Eliminates the sunset date on the health insurance mandate to cover behavioral health treatment for pervasive developmental disorder or autism. *Chapter 493, Statutes of 2016*

AB 847 (Mullin, Ridley-Thomas) - Mental health: community-based services.

Requires the Department of Health Care Services (DHCS) to develop a proposal for the United States Secretary of Health and Human Services (USSHHS) for selection as a participating state in a time-limited demonstration program, as specified, to improve mental health services provided by specified entities to Medi-Cal beneficiaries. Requires DHCS to use funds awarded to the state, as specified, to pay for costs that will support this effort. Appropriates \$1 million of Mental Health Services Fund monies to support DHCS's proposal to the USSHHS. *Chapter 6, Statutes of 2016.*

AB 861 (Maienschein) - Mental health: community-based services.

Requires the Department of Health Care Services (DHCS) to submit an application for a specified federal competitive grant for purposes of improving mental health services to Medi-Cal beneficiaries, as specified. Requires DHCS to work with counties and stakeholders, as specified, to identify the unmet need for covered services and to estimate the number of individuals who need housing assistance. Requires the competitive grant proposal to require counties that select to participate to include a plan to redirect current funds, as specified, to provide housing for those with severe mental illness. *Vetoed.*

AB 1018 (Cooper) - Medi-Cal: Early and Periodic Screening, Diagnosis, and Treatment (EPSDT).

Requires the Department of Health Care Services and the Department of Education to convene a task force, as specified, to examine the delivery of mental health services through the EPSDT services. *Held on the Senate Appropriations Committee Suspense File.*

AB 1025 (Thurmond) - Pupil health: multitiered and integrated interventions pilot program.

Requires the Department of Education to establish a three-year pilot program in school districts to encourage inclusive practices that integrate mental health, special education, and school climate interventions following a multitiered framework. *Held on the Senate Appropriations Committee Suspense File.*

AB 1194 (Eggman) - Mental health: involuntary commitment.

Requires a person who determines that an individual should be taken into custody, because he or she is a danger to self or others, to consider available information related to the historical course of the individual's mental health disorder, as specified. Requires, when a person is determined to need detainment, an admitting facility to require a written application that records whether information about the person's historical course, as specified, was considered. *Chapter 570, Statutes of 2015.*

AB 1299 (Ridley-Thomas) - Medi-Cal: specialty mental health services: foster children.

Requires the California Health and Human Services Agency to coordinate with the Department of Health Care Services (DHCS) and the Department of Social Services to facilitate the receipt of medically necessary specialty mental health services for foster youth, as specified. Requires DHCS to issue policy guidance concerning the conditions for and exceptions to presumptive transfer of foster youth, as specified, and to seek federal approval, as specified, to implement the provisions in this bill. *Chapter 603, Statutes of 2016.*

AB 1300 (Ridley-Thomas) - Mental health: involuntary commitment.

Allows an emergency physician or psychiatric professional, who is not a county-designated professional person, as specified, to detain a person who is a danger to self or others, or is gravely disabled, for up to 72 hours for evaluation and treatment, as specified. Requires a designated facility to accept, within its clinical capability and capacity, all categories of persons for whom it is designated, without regard to insurance or financial status. *Re-referred to the Senate Rules Committee, no further action taken.*

AB 1424 (Mullin) - Mental health: community mental health board.

Allows a consumer of mental health (MH) services who has obtained full- or part-time employment with specified government or contracting agencies, as specified, to be appointed to a MH board if certain conditions are met. *Chapter 127, Statutes of 2015.*

AB 1644 (Bonta) - School-based early mental health intervention and prevention services.

Renames the School-based Early Mental Health Intervention and Prevention Services for Children Act of 1991, known as the Early Mental Health Initiative, the Healing from Early Adversity to Level the Impact of Trauma in Schools Act. Requires the Department of Public Health (DPH) to create a new four-year program, as specified, and requires DPH to perform technical assistance and outreach to local educational agencies about the new program, which will target pupils with adverse childhood experiences, as specified. *Held on the Senate Appropriations Committee Suspense File.*

AB 2017 (McCarty) - College Mental Health Services Program.

Establishes the College Mental Health Services Program Act, as specified, until January 1, 2022. Requires the Mental Health Services Oversight and Accountability Commission to create a grant program for specified colleges to provide required services to college students related to improved access to mental health services and early identification and intervention programs, and requires grant awardees to report to specified entities on the use of funds for programs. *Vetoed.*

AB 2279 (Cooley) - Mental Health Services Act: county-by-county spending reports.

Requires the Department of Health Care Services, in consultation with specified entities, to collect and publicly report specified information related to Mental Health Services Act revenue and expenditures, based on the current annual reporting requirement. *Vetoed.*

Organ and Tissue Donation

SB 1316 (Wolk) - Tissue banks: human milk.

Requires a “human milk tissue bank,” as defined, to comply with specified nationally recognized guidelines, and the Department of Public Health to adopt rules and regulations for the safe procuring, processing, storing, and distributing of human milk that is collected from a “participating mother,” as defined. *Held on the Senate Appropriations Committee Suspense File.*

SB 1408 (Allen) - Tissue donation.

Allows for the transplantation of organs into the body of a person, as specified, when the donor of the organs is found reactive for HIV, and removes penalties for organ donors who are found reactive to HIV, as specified. *Chapter 18, Statutes of 2016.*

SB 1419 (Galgiani) - Uniform Anatomical Gift Act: prison inmates.

Requires the Department of Corrections and Rehabilitation (CDCR) to develop a form, as specified, allowing a prisoner to elect to make an anatomical gift in the event of his or her death. Requires CDCR to present the form to the prisoner, as specified, as well as to allow the prisoner to revoke his or her election to make an anatomical gift, as specified. *Held on the Senate Appropriations Committee Suspense File.*

AB 258 (Levine) - Organ transplants: medical marijuana: qualified patients.

Prohibits the eligibility determination of a patient on the organ transplant waiting list from being based solely on his or her status as a qualified patient for medical marijuana (MM), as specified, or based solely on a positive test for the use of MM by a qualified patient. *Chapter 51, Statutes of 2015.*

AB 2750 (Gomez) - Tissue banks.

Exempts from tissue bank licensure the storage of allograft tissue by a person, as defined, if specified criteria are met. *Chapter 273, Statutes of 2016.*

Prescription Drugs

SB 149 (Stone) - Investigational drugs, biological products, or devices: right to try.

Enacts the Right to Try Act, and permits a manufacturer of an investigational drug, biological product, or device to make available an investigational drug, biological product, or device to an eligible patient, as defined. *Held on the Assembly Appropriations Committee Suspense File.*

SB 282 (Hernandez) - Health care coverage: prescription drugs.

Permits the use of alternative methods of electronic prior authorization of prescription drugs other than the required standardized form, and exempts physician groups with delegated financial risk from the standardized prior authorization process. *Chapter 654, Statutes of 2015*

SB 447 (Allen) - Medi-Cal: clinics: drugs and supplies.

Revises the Medi-Cal and Family Planning Access and Treatment reimbursement formula for drugs and supplies dispensed by specified clinics by requiring the clinic dispensing fee to be the difference between the actual acquisition cost of a drug or supply and the Medi-Cal reimbursement rate, and removes the maximum dispensing fee caps in existing law. *Held on the Assembly Appropriations Committee Suspense File.*

SB 671 (Hill) - Pharmacy: biological product.

Authorizes a pharmacist to substitute an alternative biological product when filling a prescription for a prescribed biological product if the alternative biological product is designated as interchangeable with the reference product, among other conditions, and communication is provided to the patient and physician that a substitution was made. Requires the Board of Pharmacy to maintain a link on its Website to the list of biological products recognized as interchangeable by the federal Food and Drug Administration. *Chapter 545, Statutes of 2015.*

SB 999 (Pavley) - Health insurance: contraceptives: annual supply.

Authorizes a pharmacist to dispense a 12-month supply of United States Food and Drug Administration-approved, self-administered hormonal contraceptives, requires insurance to cover the cost, and incorporates chaptering amendments for SB 253 (Monning). *Chapter 499, Statutes of 2016.*

SB 1010 (Hernandez) - Health care: prescription drug costs.

Requires health plans and health insurers that report rate information to also include information regarding covered prescription drugs, as specified. Requires the Department of Managed Health Care and the California Department of Insurance to compile and report this data in an aggregated report to demonstrate the overall impact of drug costs on health care premiums. Requires any manufacturer of a prescription drug, who sells to or is reimbursed by a state purchaser, health plan, health insurer, or pharmacy benefit manager to provide advanced notice describing a price increase, as specified. *No action taken on the Assembly Floor.*

AB 68 (Waldron) - Medi-Cal.

Requires a Medi-Cal beneficiary to be entitled to an automatic urgent appeal, as defined, when a Medi-Cal managed care plan denies coverage for a drug prescribed for the treatment of seizures and epilepsy that is approved by the Food and Drug Administration (FDA) for the use in the treatment of seizures and epilepsy if the patient's treating provider demonstrates that in his or her reasonable, professional judgment, the drug is medically necessary and consistent with FDA labeling and use rules and regulations, as supported in at least one of the official compendia, and the drug is not on the formulary of the Medi-Cal managed care plan. *Vetoed.*

AB 73 (Waldron, Gipson) - Patient Access to Prescribed Antiretroviral Drugs for HIV/AIDS Treatment Act

Requires the denial by a Medi-Cal managed care plan of a non-formulary drug prescribed for the treatment of HIV/AIDS that is approved by the federal Food and Drug Administration for use in the treatment of HIV/AIDS to be subject to an urgent appeal process established by this bill, if the treating provider demonstrates, consistent with federal law, that in his or her reasonable, professional judgment, the drug is medically necessary and consistent with the federal labeling and use rules and regulations. *These provisions were amended out of the bill.*

AB 159 (Calderon) - Investigational drugs, biological products, and devices.

Permits a manufacturer of an investigational drug, biological product, or device to make available an investigational drug, biological product, or device to an eligible patient, as defined. Prohibits this bill from requiring that a manufacturer make available an investigational drug, biological product, or device to an eligible patient. *Vetoed.*

AB 339 (Gordon) - Health care coverage: outpatient prescription drugs.

Requires health plans and health insurers that provide coverage for outpatient prescription drugs to have formularies that do not discourage the enrollment of individuals with health conditions, and requires combination antiretroviral drug treatment coverage of a single-tablet that is as effective as a multitablet regimen for the treatment of HIV/AIDS. Places in state law, federal requirements related to pharmacy and therapeutics committees, access to in-network retail pharmacies, standardized formulary requirements, formulary tier requirements similar to those required of health plans and insurers participating in Covered California and copayment caps of \$250 and \$500 for a supply of up to 30 days for an individual prescription. *Chapter 619, Statutes of 2015.*

AB 374 (Nazarian) - Health care coverage: prescription drugs.

Permits an exception to a health plan or insurer's step therapy process to be submitted in the same manner as a request for prior authorization for prescription drugs. Requires those requests to be treated in the same manner, and responded to by the plan or insurer in the same manner, as a prior authorization request. *Chapter 621, Statutes of 2015.*

AB 1668 (Calderon) - Investigational drugs, biological products, and devices.

Permits a manufacturer of an investigational drug, biological product, or device to make available an investigational drug, biological product, or device to an eligible patient, as defined. Prohibits this bill from requiring that a manufacturer make available an investigational drug, biological product, or device to an eligible patient. *Chapter 684, Statutes of 2016.*

AB 1831 (Low) - Health care coverage: prescription drugs: refills.

Requires a health plan contract or health insurance policy issued, amended, or renewed on or after July 1, 2017 that provides coverage for prescription drugs to allow for early refills of covered topical ophthalmic products, as specified. *Vetoed.*

Serious and Chronic Illness

SB 19 (Wolk) - Physician Orders for Life Sustaining Treatment form: statewide registry.

Establishes a Physician Orders for Life Sustaining Treatment (POLST) eRegistry Pilot operated by the California Emergency Medical Services Authority for the purpose of collecting a POLST form received from a physician, or his or her designee, and disseminating the information in the form to authorized persons. *Chapter 504, Statutes of 2015*

SB 128 (Wolk, Monning) - End of life.

Permits a qualified adult with capacity to make medical decisions, who has been diagnosed with a terminal disease to receive a prescription for an aid in dying drug if certain conditions are met, such as two oral requests, a minimum of 15 days apart and a signed written request witnessed by two individuals is provided to his or her attending physician, the attending physician refers the patient to an independent, consulting physician to confirm diagnosis and capacity of the patient to make medical decisions, and the attending physician refers the patient for a mental health specialist assessment if there are indications of a mental disorder. Protects a person from civil, criminal, administrative, employment, or contractual liability, or professional disciplinary action, for participating in good faith compliance with this bill. Permits a person or entity that elects, for reasons of conscience, morality, or ethics, not to engage in activities authorized pursuant to this bill. Makes it a felony to knowingly alter or forge a request for a drug to end an individual's life without his or her authorization or concealing or destroying a withdrawal or a rescission of a request for an aid in dying drug if the act is done with the intent or effect of causing the individual's death. Makes it a felony to knowingly coerce or exert undue influence on an individual to request an aid in dying drug for the purpose of ending his or her life. *Hearing canceled at the request of author in the Assembly Health Committee.*

SB 203 (Monning) - Sugar-sweetened beverages: safety warnings.

Establishes the Sugar-Sweetened Beverages Safety Warning Act, to be administered by the Department of Public Health, and requires a safety warning on all sealed sugar-sweetened beverage containers, as specified. Requires the warning label to be posted in a place that is easily visible at the point-of-purchase of an establishment where a beverage container is not filled by the consumer. *Failed passage in the Senate Health Committee.*

SB 1002 (Monning) - End of Life Option Act: telephone number.

Requires the Department of Public Health to establish and maintain a toll-free telephone number for the purpose of receiving and responding to inquiries regarding the End of Life Option Act. *Held on the Senate Appropriations Committee Suspense File.*

SCR 117 (Pan) - Palliative care.

Encourages the state to study the status and importance of coordinated palliative care and to develop solutions, tools, and best practices for providing better patient-centered care and information to individuals with chronic disease in California. *Chapter 96, Statutes of 2016.*

SCR 134 (Pan) - Diabetes: the “Screen at 23” campaign.

Urges the Department of Public Health (DPH) to endorse and support the “Screen at 23” campaign’s efforts to increase awareness of diabetes among Asian American communities, including the use of appropriate screening measures for Asian American patients and to eliminate disparities. Urges DPH to encourage all public and private health providers and facilities to also participate in these efforts. *Chapter 178, Statutes of 2016.*

AB 572 (Beth Gaines) - Diabetes prevention: treatment.

Requires the Department of Public Health (DPH) to update the California Wellness Plan 2014 to include specified items, and requires DPH to report to the Legislature on or before January 1, 2018, as specified, on the progress of the update. *Held on the Senate Appropriations Committee Suspense File.*

AB 637 (Campos) - Physician Orders for Life Sustaining Treatment forms.

Allows a nurse practitioner or a physician assistant acting under the supervision of a physician to sign a completed Physician Orders for Life Sustaining Treatment form. *Chapter 217, Statutes of 2015.*

AB 1763 (Gipson) - Health care coverage: colorectal cancer: screening and testing.

Requires health plan and health insurance coverage without cost sharing for specified colorectal cancer screening examinations and laboratory tests for individuals at average risk, and requires coverage for additional colorectal cancer screening examinations without cost-sharing for individuals at high risk, as specified. Prohibits the imposition of cost sharing on colonoscopies, including the removal of polyps, for an enrollee who is between 50 and 75 years of age and has received a positive test, as specified. *Vetoed.*

AB 1795 (Atkins) - Health care programs: cancer.

Makes changes to the Breast and Cervical Cancer Early Detection Program within the Department of Health Care Services regarding eligibility for screenings, as specified. *Chapter 608, Statutes of 2016.*

AB 1823 (Bonilla) - California Cancer Clinical Trials Program.

Requests the University of California (UC) to create a Board of Trustees of the California Cancer Clinical Trials Program, as specified, which would provide grants to increase patient access to eligible cancer clinical trials in underserved or disadvantaged communities, as specified. Allows the UC to decline to establish or participate in, and to terminate, the program, as specified. *Chapter 661, Statutes of 2016.*

AB 2325 (Bonilla) - Ken Maddy California Cancer Registry.

Requires, on or after January 1, 2019, a pathologist diagnosing cancer to report cancer diagnoses to the Department of Public Health, as specified, for purposes of the Ken Maddy California Cancer Registry. *Chapter 354, Statutes of 2016.*

AB 2424 (Gomez) - Community-based Health Improvement and Innovation Fund.

Creates the Community-based Health Improvement and Innovation Fund for allocation to the Department of Public Health to reduce health inequity and disparities in the rates and outcomes of priority chronic health conditions, as defined, and to evaluate the effectiveness of community-based prevention strategies, as specified. *Held on the Senate Appropriations Committee Suspense File.*

AB 2696 (Beth Gaines) - Diabetes prevention and management.

Requires the Department of Public Health (DPH) to submit a report to the Legislature, as specified with certain criteria, regarding the prevention and management of diabetes and its complications. Requires DPH to post annually specified information on its Internet Web site. *Chapter 108, Statutes of 2016.*

Tobacco

SB 24 (Hill) - Electronic cigarettes: licensing and restrictions.

Extends Stop Tobacco Access to Kids Enforcement Act requirements to the sale of electronic cigarettes (e-cigs), distinct from the definition of tobacco products, and requires enforcement, as specified, to begin July 1, 2016; extends current smoke-free laws and penalties to e-cigs; requires e-cig cartridges to be in childproof packaging, as defined; broadens the current definition of e-cigs, as specified; requires all retailers of e-cigs to apply for licensure to sell e-cigs, as specified; and raises the minimum age requirement to purchase and use e-cigs to 21, as specified. *These provisions were amended out of the bill.*

SB 140 (Leno) - Electronic cigarettes.

Recasts and broadens the definition of “tobacco product” in current law to include electronic cigarettes as specified; extends current restrictions and prohibitions against the use of tobacco products to electronic cigarettes; and, extends current licensing requirements for manufacturers, importers, distributors, wholesalers, and retailers of tobacco products to electronic cigarettes. *Held in the Assembly Governmental Organization Committee.*

SB 151 (Hernandez) - Tobacco products: minimum legal age.

Increases the minimum legal age to purchase or consume tobacco from 18 to 21 and makes additional conforming changes to restrictions and enforcement mechanisms in current law. *Hearing cancelled at the request of the author in the Assembly Governmental Organization Committee.*

SB 591 (Pan) - Cigarette and tobacco products taxes: California Tobacco Tax Act of 2015.

Imposes an additional excise tax of \$2.00 per package of 20 cigarettes. Imposes an equivalent one-time floor stock tax on cigarettes held or stored by dealers and wholesalers, and indirectly increases the tobacco products tax. *No action taken on the Senate Floor.*

SB 977 (Pan) - Tobacco: youth sports events.

Prohibits a person from smoking a tobacco product, as defined, within 250 feet of a youth sports event, as defined. Broadens the definition of “smoke or smoking” in existing law. *Chapter 537, Statutes of 2016.*

AB 216 (Cristina Garcia) - Product sales to minors: vapor products.

Prohibits the sale or furnishing of any vapor products, as specified, to a person under 18 years of age, or under 21 years of age, as specified; exempts drugs or medical devices, as specified; and makes the violation of the provisions in this bill an infraction punishable by specified fines. *Chapter 769, Statutes of 2015.*

AB 1162 (Holden) - Medi-Cal: tobacco cessation.

Requires tobacco cessation services to be a covered benefit under the Medi-Cal program, and requires tobacco cessation services to include all intervention recommendations, as periodically updated, assigned a grade A or B by the United States Preventive Services Task Force. *Vetoed.*

AB 1278 (Gray) - Cigarettes and tobacco products: identification requirements.

Specifies that an identification card issued by the U.S. Armed Forces, as specified, to purchase a tobacco product through the United States Postal Service or other package delivery service satisfies the proof of age requirement. *No action taken on the Senate Floor.*

AB 1696 (Holden) - Medi-Cal: tobacco cessation services.

Requires tobacco cessation services to be a covered benefit under the Medi-Cal program, subject to utilization controls. Requires tobacco cessation services to include all intervention recommendations assigned a grade A or B by the United States Preventive Services Task Force. *Chapter 606, Statutes of 2016.*

Women’s and Reproductive Health

SB 960 (Hernandez, Leno) - Medi-Cal: telehealth: reproductive health care.

Adds “reproductive health care” by store and forward provided by a physician, nurse practitioner, certified nurse midwife, licensed midwife, physician assistant, or registered nurse operating within her scope of practice, to existing law that prohibits face to face contact for teleophthalmology, teledermatology and teledentistry from being required in the Medi-Cal program. Requires Medi-Cal managed care plans to cover reproductive health care, teleophthalmology, teledermatology, and teledentistry. *Held on the Assembly Appropriations Committee Suspense File.*

SB 999 (Pavley) - Health insurance: contraceptives: annual supply.

Authorizes a pharmacist to dispense a 12-month supply of United States Food and Drug Administration-approved, self-administered hormonal contraceptives, requires insurance to cover the cost, and incorporates chaptering amendments for SB 253 (Monning). *Chapter 499, Statutes of 2016.*

AB 775 (Chiu, Burke) - Reproductive FACT Act.

Enacts the Reproductive Freedom, Accountability, Comprehensive Care, and Transparency Act and requires clinics and other facilities that provide family planning or pregnancy-related services to provide specified notices to clients. *Chapter 700, Statutes of 2015.*

AB 1954 (Burke) - Health care coverage: reproductive health care services.

Establishes the Direct Access to Reproductive Health Care Act to prohibit health plans and health insurers from requiring an enrollee to receive a referral prior to receiving coverage or services for reproductive and sexual health care services. *Chapter 495, Statutes of 2016.*

Workforce

SB 22 (Roth, Cannella, Galgiani) - Residency training.

Establishes the Medical Residency Training Advisory Panel (Advisory Panel) within the Office of Statewide Health Planning and Development's (OSHPD) Health Professions Education Foundation, consisting of 13 members, as specified. Specifies the duties of the Advisory Panel and OSHPD for the purpose of establishing and funding new residency positions in medically underserved areas of the state. *No action taken in the Assembly.*

SB 407 (Morrell) - Comprehensive Perinatal Services Program: licensed midwives.

Makes licensed midwives eligible to be a "comprehensive perinatal provider" as used in the Comprehensive Perinatal Services Program (CPSP) when regulations have been adopted by the Medical Board of California. Authorizes a health care provider to employ or contract with licensed midwives for the purpose of providing comprehensive perinatal services in the CPSP. *Chapter 313, Statutes of 2015.*

SB 1139 (Lara) - Health professionals: medical residency programs: undocumented immigrants: scholarships, loans, and loan repayment.

Prohibits a student, including a person without lawful immigration status, and/or a person who is exempt from nonresident tuition, who meets the requirements for admission to a medical degree program at any public or private postsecondary educational institution that offers such a program, or who meets the requirements for admission to a healing arts residency training program whose participants are not paid, from being denied admission based on his or her citizenship or immigration status. Prohibits specified grant and loan repayment and forgiveness programs from denying an application based on an applicant's citizenship or immigration status. *Chapter 786, Statutes of 2016.*

SB 1471 (Hernandez) - Health professions development: loan repayment.

Requires funds in the Managed Care Administrative Fines and Penalties Fund to be transferred each year to the Medically Underserved Account for Physicians in the Health Professions Education Fund and to the Major Risk Medical Insurance Fund, as specified. *Held on the Assembly Appropriations Committee Suspense File.*

AB 614 (Brown) - Health care standards of practice.

Permits the Department of Public Health, without taking regulatory action, to update references in the California Code of Regulations (CCR) to health care standards of practice adopted by a recognized state or national association when the state or national association and its outdated standards are already named in the CCR. *Chapter 435, Statutes of 2015.*

AB 2024 (Wood) - Critical access hospitals: employment.

Authorizes a federally certified critical access hospital (CAH) to employ physicians and charge for their services until 2024 and requires the Medical Board of California to provide a report to the Legislature on the impact of authorizing CAHs to employ physicians. *Chapter 496, Statute of 2016.*

AB 2048 (Gray) - National Health Service Corps State Loan Repayment Program.

Requires the Office of Statewide Planning and Development (OSHPD), in its administration of the State Loan Repayment Program, to include all federally qualified health centers located in California on the certified eligible site list. Permits OSHPD to use state funds for purposes of providing required matching funds for the National Health Service Corps State Loan Repayment Program in any year in which funding is appropriated by the annual Budget Act for that purpose. *Chapter 454, Statutes of 2016.*

AB 2179 (Gipson) - Hepatitis C testing.

Authorizes a hepatitis C counselor, who meets specified training requirements and works in specified testing sites, to perform hepatitis C virus tests classified as waived under the federal Clinical Laboratory Improvement Amendments of 1988. *Vetoed.*

AB 2216 (Bonta) - Primary care residency programs: grant program.

Creates the Teaching Health Center Primary Care Graduate Medical Education Fund (Fund) and requires the Office of Statewide Health Planning and Development director, subject to appropriation by the Legislature, to award planning and development grants and sustaining grants from the Fund to teaching health centers for the purpose of establishing new accredited or expanded primary care residency programs. *Held on the Assembly Appropriations Committee Suspense File.*

Miscellaneous

SB 476 (Mendoza) - Organized camps.

Redefines organized camps and separates them into two types: resident camps and day camps. Requires day camps and resident camps to follow public health and safety codes and regulations, including, but not limited to, notice of intent to operate, adequate training and background checks for staff, safety of camp location and facilities, and minimum camper supervision levels. *Held on the Assembly Appropriations Suspense File.*

SB 877 (Pan) - Reporting and tracking of violent deaths.

Requires the State Department of Public Health to establish and maintain the California Electronic Violent Death Reporting System and to collect data on violent deaths, as specified. *Chapter 712, Statutes of 2016.*

SB 1100 (Monning) - Worker occupational safety and health training and education program.

Expands the purpose of the worker occupational safety and health training and education program to include collaboration with the Occupational Health Branch of the Department of Public Health and the provision of training through an agreement with the University of California occupational health centers with the goal of preventing occupational injuries. *No action taken on the Senate Floor.*

SB 1189 (Pan, Jackson) - Postmortem examinations or autopsies: forensic pathologists.

Requires a forensic autopsy to be considered the practice of medicine and to only be conducted by a licensed physician who has expertise in forensic pathology or has been trained as a forensic pathologist. Requires all persons in the autopsy suite to have current bloodborne pathogen training and personal protective equipment in accordance with existing law for health and safety purposes. Prohibits, if an individual dies due to the involvement of law enforcement activity, law enforcement personnel directly involved with the care and custody of that individual from being involved with any portion of the postmortem examination nor allowed inside the autopsy suite during the performance of the autopsy. *Chapter 787, Statutes of 2016.*

SB 1238 (Pan) - Inmates: biomedical data.

Permits records-based biomedical research, using existing information, to be conducted on prisoners, notwithstanding a prohibition on biomedical research on prisoners. *Chapter 197, Statutes of 2016.*

SB 1377 (Nguyen) - Cognitively impaired adults: caregiver resource centers.

Appropriates \$3.3 million from the General Fund each fiscal year beginning with the 2016-17 fiscal year to the Department of Health Care Services for Caregiver Resource Centers (CRCs) for purpose of providing respite care. Permits CRC services to be provided both in-person and through the use of remote technologies, including but not limited to, web-based services, mobile applications, and telephone messaging services. *Held on the Senate Appropriations Committee Suspense File.*

SB 1477 (Committee on Health) - Health.

Requires the California Health Benefit Exchange to also be known as Covered California, replaces references from the now-repealed Healthy Families Program to the Medi-Cal program, and from the repealed AIM-Linked Infants Program to the Medi-Cal Access Program, permits the Department of Health Care Services to enter into contracts for administrative activities to help implement the new Medicaid Managed Care regulations, and makes a technical change to ensure that trade associations remain eligible for federal emergency preparedness funds. *Chapter 733, Statutes of 2016*

AB 21 (Wood, Bonta, Cooley, Jones-Sawyer, Lackey) - Medical marijuana: cultivation licenses.

Repeals a March 1, 2016, deadline by which cities and counties must act on ordinances to regulate or ban medical marijuana cultivation and allows local governments to exercise their police powers over certain cultivators of medical marijuana. *Chapter 1, Statutes of 2016.*

AB 176 (Bonta) - Data collection.

Specifies requirements for the collection of demographic data, by the state's public segments of postsecondary education and the Department of Managed Health Care (DMHC) pertaining to collection and tabulation categories for Native Hawaiian (NH), Asian, and Pacific Islander (API) groups. *Vetoed.*

AB 266 (Bonta, Cooley, Jones-Sawyer, Lackey, Wood) - Medical cannabis.

Establishes a licensing and regulatory framework for medical marijuana under the Medical Marijuana Regulation and Safety Act, and establishes the Bureau of Medical Marijuana Regulation within the Department of Consumer Affairs. *Chapter 689, Statutes of 2015.*

AB 648 (Low) - Community-based services: Virtual Dental Home program.

Establishes the Virtual Dental Home (VDH) grant program at the California Health Facilities Financing Authority and appropriates \$3 million from the California Health Facilities Financing Authority Hospital Equipment Loan Program to expand the VDH model of community-based delivery of dental care to California residents in greatest need. *Held on the Senate Appropriations Committee Suspense File.*

AB 658 (Wilk) - County jails: inmate health care services: rates.

Permits a hospital without a contract with a local law enforcement agency to request the most appropriate cost-to-charge ratio for determining reimbursement of services provided to law enforcement patients. *Chapter 119, Statutes of 2015.*

AB 1337 (Linder) - Medical records: electronic delivery.

Creates an authorization form for disclosure of health information by medical providers, and requires electronic medical records requested prior to the filing of any action or appearance of a defendant in an action to be provided electronically if requested in an electronic format, and if it is readily producible in that format. *Chapter 528, Statutes of 2015.*

AB 1526 (Committee on Aging and Long-Term Care) - Behavioral Risk Factor Surveillance System survey: caregiver module.

Requires the Department of Public Health to include the federal Centers for Disease Control and Prevention's Caregiver Module in the annual Behavioral Risk Factor Surveillance System survey for five years, beginning on January 1, 2016, unless another act extends before that time. *Vetoed.*

AB 1546 (Olsen) - Vital records.

Authorizes the release of comprehensive birth, death and nonconfidential marriage record indices to the county recorder pursuant to existing limitations. Permits the Department of Public Health to suspend the use of security features of a certified copy of a birth, death, or marriage record, as specified, through all-county letters, or similar instructions. Requires the State Registrar to study all security features of paper used to print vital records and requires a report to be submitted to the Legislature on or before January 1, 2018. *Chapter 255, Statutes of 2016.*

AB 1726 (Bonta) - Data collection.

Requires the Department of Public Health to collect demographic data related to each major Asian and Pacific Islander group, as specified. *Chapter 607, Statutes of 2016.*

AB 2007 (McCarty) - Youth athletics: youth sports organizations: concussions or other head injuries.

Establishes requirements for youth sports organizations to remove an athlete who is suspected of sustaining a concussion or other head injury until he or she is evaluated and cleared by a licensed health care provider. *Chapter 516, Statutes of 2016.*

AB 2568 (Atkins) - Integrated health and human services program.

Authorizes the San Diego County to operate an integrated and comprehensive health and human services system, upon approval by the county board of supervisors. *Chapter 469, Statutes of 2016.*

AB 2589 (Gomez) - Public health: lactation services and equipment.

Requires the Department of Public Health (DPH) to coordinate with the Department of Health Care Services (DHCS) and Covered California to develop processes, procedures, and an electronic interface for eligibility-related information sharing to streamline enrollment into the Women, Infants, and Children (WIC) Program as part of the application process for Medi-Cal and Covered California. Requires the California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS is the on-line application system administered by DHCS and Covered California) and the county Statewide Automated Welfare Systems to identify individuals who are potentially eligible for the WIC Program to electronically link them to a WIC Program application (by January 1, 2017), and (by January 1, 2022) to provide a simple interface for the individual to electronically complete a WIC Program application. Requires DPH to coordinate with DHCS, through a stakeholder engagement process, to develop measures and outcomes for breastfeeding rates. *Held on the Senate Appropriations Committee Suspense File.*

Second Extraordinary Session 2015-2016 LEGISLATIVE SUMMARY

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Public Health and Developmental Services Committee

SBX2 5 (Leno) - Electronic cigarettes.

Recasts and broadens the definition of “tobacco product” in current law to include electronic cigarettes, as specified; extends current restrictions and prohibitions against the use of tobacco products to electronic cigarettes; extends current licensing requirements for manufacturers, importers, distributors, wholesalers, and retailers of tobacco products to electronic cigarettes; and requires electronic cigarette cartridges to be child-resistant. *Chapter 7, Statutes of 2015-16 Second Extraordinary Session.*

SBX2 6 (Monning) - Smoking in the workplace.

Prohibits smoking in owner-operated businesses and removes specified exemptions in existing law that allows tobacco smoking in certain workplaces. *No action taken in the Assembly.*

SBX2 7 (Hernandez) - Tobacco products: minimum legal age.

Increases the minimum legal age to purchase or consume tobacco from 18 to 21 and makes additional conforming changes to restrictions and enforcement mechanisms in current law. *Chapter 8, Statutes of 2015-16 Second Extraordinary Session*

SBX2 8 (Liu) - Tobacco use programs.

Extends current tobacco use prevention funding eligibility and requirements for county offices of education and school districts to include charter schools. Broadens the definition of products containing tobacco and nicotine, as specified, and prohibits their use in specified areas of schools and school districts, regardless of funding. Requires specified signs to be prominently displayed at all entrances to school property. *No action taken in the Assembly.*

SBX2 9 (McGuire) - Local taxes: authorization: cigarettes and tobacco products.

Allows counties to impose a tax on the privilege of distributing cigarettes and tobacco products. *No action taken in the Assembly.*

SBX2 10 (Beall) - Cigarette and tobacco product licensing: fees and funding.

Revises the Cigarette and Tobacco Products Licensing Act of 2003 to change the retailer license fee from a \$100 one-time fee to a \$265 annual fee, and increases the distributor and wholesaler license fee from \$1,000 to \$1,200. *No action taken in the Assembly.*

SBX2 14 (Hernandez) - Tobacco: electronic cigarettes: taxes: managed care organization provider tax: in-home supportive services.

Imposes an additional excise tax of \$2 per package of 20 cigarettes, imposes an equivalent one-time “floor stock tax” on the cigarettes held or stored by dealers and wholesalers, and indirectly increases the tobacco products tax. Imposes a tax on electronic cigarettes equivalent to the \$2 per package tax imposed on cigarettes by this bill. Requires revenue from tobacco and electronic cigarette taxes to be used for various tobacco use prevention and research, law enforcement, medical school education, for improved payments for Medi-Cal funded services, and to backfill existing tobacco-tax funded services for any revenue decline resulting from the additional tax. Imposes a managed care organization provider tax (MCO tax) on health plans, with different taxing tiers based on enrollment. Continuously appropriates funds from the MCO tax for purposes of funding the nonfederal share of Medi-Cal managed care rates, and transfers \$230 million, to be used upon appropriation by the Legislature, to increase the funding provided to regional centers and to increase rates paid to providers of service to the developmentally disabled. Repeals the 7% reduction in hours of service to each In-Home Supportive Services recipient of services. *No action taken on the Senate floor.*

SBX2 15 (Hernandez) - Medi-Cal: managed care organization tax.

Imposes a three-year managed care organization provider tax (MCO tax) on health plans, with taxing tiers and based on enrollment assessed during a base year period of October 1, 2014 through September 30, 2015. Continuously appropriates funds from the MCO tax for purposes of funding the nonfederal share of Medi-Cal managed care rates. Reduces the amount of the Corporate or Gross Premium taxes that specified health plans and insurers are required to pay for the three years of the MCO tax assessment. Sunsets these provisions June 30, 2020. *No action taken in the Senate Committee on Public Health and Developmental Services.*

ABX2 9 (Thurmond, Nazarian) - Tobacco use programs.

Extends current tobacco use prevention funding eligibility and requirements for county offices of education and school districts to include charter schools. Broadens the definition of products containing tobacco and nicotine, as specified, and prohibits their use in specified areas of schools and school districts, regardless of funding. Requires specified signs to be prominently displayed at all entrances to school property. *Chapter 5, Statutes of 2015-16 Second Extraordinary Session.*

ABX2 10 (Bloom) - Local taxes: authorization: cigarettes and tobacco products.

Allows counties to impose a tax on the privilege of distributing cigarettes and tobacco products. *Vetoed.*

ABX2 11 (Nazarian) - Cigarette and tobacco Products Licensing: fees and funding.

Revises the Cigarette and Tobacco Products Licensing Act of 2003 to change the retailer license fee from a \$100 one-time fee to a \$265 annual fee, and increases the distributor and wholesaler license fee from \$1,000 to \$1,200. *Chapter 6, Statutes of 2015-16 Second Extraordinary Session.*

ABX2 15 (Eggman, Alejo, Mark Stone) - End of life.

Permits a competent, qualified individual who is an adult with a terminal disease to receive a prescription for an aid-in-dying drug if certain conditions are met, such as two oral requests, a minimum of 15 days apart, and a written request signed by two witnesses, is provided to his or her attending physician, the attending physician refers the patient to a consulting physician to confirm diagnosis and capacity to make medical decisions, and the attending physician refers the patient to a mental health specialist, if indicated. Sunsets these provisions on January 1, 2026. *Chapter 1, Statutes of 2015-16, Second Extraordinary Session.*

Conference Committee

SBX2 2 (Hernandez) - Medi-Cal: managed care organization tax.

Imposes a three-year managed care organization provider tax (MCO tax) on health plans, with different taxing tiers and based on enrollment assessed during a base year period of October 1, 2014 through September 30, 2015. Continuously appropriates funds from the MCO tax for purposes of funding the nonfederal share of Medi-Cal managed care rates. Reduces the amount of the Corporate or Gross Premium taxes that specified health plans and insurers are required to pay for the three years of the MCO tax assessment. Sunsets these provisions on June 30, 2020. *Chapter 2, Statutes of 2015-16, Second Extraordinary Session.*

ABX2 1 (Thurmond) - Developmental services: Medi-Cal: funding.

Implements targeted rate increases for the community-based developmental services system, and forgives retroactive recoupment of Medi-Cal payment reductions and rate freezes, pursuant to AB 97 (Committee on Budget, Chapter 3, Statutes of 2011), for distinct part nursing facilities. *Chapter 3, Statutes of 2015-16, Second Extraordinary Session.*

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