

SENATE COMMITTEE ON HEALTH

LEGISLATIVE SUMMARY 2019 – 2020 SESSION



2019

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SENATOR JEFF STONE, VICE CHAIR

2020

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SENATE COMMITTEE ON HEALTH

2019-2020 LEGISLATIVE SUMMARY

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Aging and Long-Term Care

SB-406 (Pan) - Health care omnibus bill.

Contains a number of changes to law related to health care coverage, vital records, food safety, adult health, and recovery facilities. Authorizes the Department of Health Care Services to obtain criminal record clearances for certain administrative personnel prior to issuing a new license for an Adult Day Health Center or Home Health Agency serving only Program for All-Inclusive Access to Care for the Elderly patients. *Chapter 302, Statutes of 2020.*

SB-407 (Monning) - Medicare supplement benefit coverage.

Requires an issuer of a Medicare supplement contract with new or innovative benefits commencing January 1, 2020, to identify the portion of the premium attributed to the new or innovative benefits as a separate line item on the payment or invoice and extends the Medicare supplement open enrollment period by 30 days. Requires the Department of Managed Health Care and the California Department of Insurance to collaborate to develop and implement policies and procedures that standardize new or innovative benefits for purposes of allowing consumer comparison of benefits, out-of-pocket costs, and premiums. *Chapter 549, Statutes of 2019.*

SB-440 (Pan) - Cognitive Impairment Safety Net System Task Force.

Requires the Secretary of Health and Human Services to convene a task force to study and assess the need for a cognitive impairment safety net for adults with cognitive impairment. Requires the task force to present its findings in a report with recommendations to the Legislature and the Governor by January 1, 2021. *Held on the Senate Appropriations Committee Suspense File.*

SB-784 (Committee on Health) - Medicare supplement benefit coverage.

Makes conforming changes in California law to the requirements and standards that apply to Medicare supplement contracts and policies, for the purpose of complying with the federal Medicare Access and CHIP Reauthorization Act. Contains an urgency clause to ensure that the provisions of this bill go into immediate effect upon enactment. *Chapter 157, Statutes of 2019.*

SB-1207 (Jackson) - Skilled nursing facilities: backup power system.

Requires skilled nursing facilities to have an alternative source of power to protect resident health and safety for no less than 96 hours during any type of power outage that complies with specified federal requirements. *Vetoed.*

AB-388 (Limón) - Alzheimer’s disease.

Requires the California Department of Public Health to implement the action agenda items identified in the Healthy Brain Initiative, and to operate a pilot program in up to eight local health jurisdictions to assist local planning and preparation related to brain health, cognitive aging, evidence-based practice and the health care professional workforce for people with Alzheimer’s disease and other dementias and their family care givers. *Held on the Senate Appropriations Committee Suspense File.*

AB-453 (Chau) - Emergency medical services: training.

Requires the Emergency Medical Services Authority, as part of its requirement to develop training standards for Emergency Medical Technicians, to include a component within the dementia-specific training hours on how to interact effectively with persons with dementia and their caregivers. *Chapter 88, Statutes of 2019.*

AB-480 (Salas) - Mental health: older adults.

Creates an Older Adult Mental Health (MH) Services Administrator (Administrator) within the Department of Health Care Services who is required to oversee MH services for older adults. Sets forth various responsibilities for the Administrator, including working in close coordination and collaboration with various state and local entities, as specified. *Held on the Senate Appropriations Committee Suspense File.*

AB-506 (Kalra) - Long-term health facilities.

Revises the criteria under which the Department of Public Health (DPH) issues civil penalties against long-term care (LTC) facilities that were found to have caused the death of a resident, so that instead of having to prove the death of a resident was the “direct proximate cause” of a violation by the facility, DPH would have to prove that the violation was a “substantial factor” in the death of a resident and that the death was a foreseeable result of the violation. Increases civil penalties assessed against LTC facilities. *Vetoed.*

AB-567 (Calderon) - Long-term care insurance.

Establishes the Long Term Care Insurance Task Force (Task Force), consisting of 15 voting members, within the Department of Insurance to be chaired by the Insurance Commissioner. Requires the Task Force to recommend options for establishing a statewide long-term care insurance program and comment on the respective degrees of feasibility of those options in a report by July 1, 2021. Sunsets the provisions of this bill on January 1, 2023. *Chapter 746, Statutes of 2019.*

AB-1042 (Wood) - Medi-Cal: beneficiary maintenance needs: home upkeep allowances: transitional needs funds.

Expands the home upkeep allowance that is available to a Medi-Cal beneficiary residing in a long-term care (LTC) facility, who intends to leave the facility to return to their existing home. Establishes a transitional needs fund, for the purposes of meeting the transitional costs of establishing a home, to be available to a Medi-Cal beneficiary who is residing in an LTC, and does not have a home in the community, but intends to leave the facility to establish a home in the community. Requires the Department of Health Care Services to conduct related information and outreach activities, as specified. *Held on the Senate Appropriations Committee Suspense File.*

AB-1088 (Wood) - Medi-Cal: eligibility.

Requires the Department of Health Care Services to seek a Medicaid state plan amendment or waiver to implement an income disregard to allow an individual, who is enrolled under the Medi-Cal aged & disabled program and becomes ineligible for Medi-Cal benefits because of the state's payment of the individual's Medicare Part B Premium, to remain eligible for Medi-Cal benefits if their income and resources otherwise meet all eligibility requirements. *Chapter 450, Statutes of 2019.*

AB-1128 (Petrie-Norris) - Program of All-Inclusive Care for the Elderly.

Transfers, from the Department of Public Health to the Department of Health Care Services, the oversight and regulation of a primary care clinic, adult day health center, and home health agency that exclusively serves patients of a Program for All-Inclusive Care for the Elderly center. *Chapter 821, Statutes of 2019.*

AB-1695 (Carrillo) - Health facilities.

Requires a skilled nursing facility to give a written notice to all residents of the facility 90 days prior to a transfer of management or a change of ownership, and requires all employees to be retained for a 60-day transition employment period. *Chapter 832, Statutes of 2019.*

AB-1709 (Jones-Sawyer) - Nursing homes: staff.

Revises the minimum qualifications for an applicant to take the nursing home administrator licensing exam, when the applicant has a current valid license as a nursing home administrator in another state, to allow the applicant to hold a certification from the American College of Health Care Administrators as an alternative to meeting minimum education requirements, eliminates the continuing education requirements for nursing home administrators for their initial licensure renewal, and makes other modifications to the laws governing nursing home administrators. *These provisions were amended out of the bill.*

AB-2644 (Wood) - Skilled nursing facilities: deaths: reporting.

Requires a skilled nursing facility (SNF), during a declared emergency related to a communicable disease, to report each disease-related death within 24 hours, and requires SNFs to have a full-time Infection Preventionist. *Chapter 287, Statutes of 2020.*

Chronic Disease

SB-347 (Monning) - Sugar-sweetened beverages: safety warnings.

Establishes the Sugar-Sweetened Beverages Safety Warning Act, to be administered by the Department of Public Health. Requires a safety warning on all sealed sugar-sweetened beverage containers, as specified. Requires the safety warning label to be posted in a place that is easily visible at the point-of-purchase of an establishment, as specified. *Hearing cancelled at the request of the author in the Assembly Health Committee.*

SB-446 (Stone) - Medi-Cal: hypertension medication management services.

Requires hypertension medication management services provided by a pharmacist or an advanced practice pharmacist, as specified, to be a covered benefit under the Medi-Cal program. *Held on the Senate Appropriations Committee Suspense File.*

SB-452 (Jones) - Ken Maddy California Cancer Registry.

Requires the Department of Public Health to send an informational brochure about the Ken Maddy California Cancer Registry to every patient when they are entered into the registry. *Held on the Assembly Appropriations Committee Suspense File.*

SB-706 (Galgiani) - Public health: pulmonary hypertension task force.

Requires the Department of Public Health to establish a pulmonary hypertension task force to aggregate and disseminate information related to pulmonary hypertension, including pediatric pulmonary hypertension, and to develop and implement a strategic plan for improving health outcomes for individuals with pulmonary hypertension, as specified. *Vetoed.*

SB-746 (Bates) - Health care coverage: anticancer medical devices.

Requires every health plan contract and health insurance policy issued, amended, or renewed in California on or after January 1, 2020, that provides coverage for chemotherapy or radiation therapy for the treatment of cancer, to also provide coverage for anticancer medical devices. *Held on the Assembly Appropriations Committee Suspense File.*

AB-715 (Nazarian) - Richard Paul Hemann Parkinson's Disease Program.

Extends the Richard Paul Hemann Parkinson's Disease Program from January 1, 2020 to January 1, 2021. *Chapter 806, Statutes of 2019*

AB-848 (Gray) - Medi-Cal: covered benefits: continuous glucose monitors.

Requires Medi-Cal to provide coverage for continuous glucose monitors and related supplies for use with those monitors for the treatment of diabetes mellitus when medically necessary, subject to utilization control. *Vetoed.*

AB-1131 (Gloria) - Medi-Cal: comprehensive medication management.

Requires comprehensive medication management, as defined, to be a covered Medi-Cal benefit and to be offered to a beneficiary who is referred by a physician and meets certain conditions, as specified. *Held on the Senate Appropriations Committee Suspense File.*

AB-2293 (Mayes) - Chronic obstructive pulmonary disease (COPD): research, education, and treatment.

Requires the Department of Public Health (DPH) to conduct the Chronic Obstructive Pulmonary Disease (COPD) Provider Awareness Campaign. Authorizes DPH to partner with, or subcontract to, local, regional, or California-based national nonprofit organizations to conduct the COPD Provider Awareness Campaign. *Held on the Senate Appropriations Committee Suspense File.*

AB-2821 (Nazarian) - Richard Paul Hemann Parkinson's Disease Program.

Extends the California Parkinson's Disease Registry until January 1, 2022. *Chapter 103, Statutes of 2020.*

ACR-28 (Gipson) - Sickle Cell Disease Awareness Month.

Recognizes September 2020 as Sickle Cell Disease Awareness Month and encourages the Legislature to appropriate funds for research, treatment, monitoring, education, and outreach related to the disease. *No action taken in Senate Appropriations Committee.*

ACR-101 (Lackey) - Pediatric cancer.

Calls for increased research on the causes and cures for pediatric cancer and ways in which to detect the cancer early on. *Chapter 2, Statutes of 2020.*

Communicable Disease

SB-159 (Wiener) - HIV: preexposure and postexposure prophylaxis.

Authorizes a pharmacist to initiate and furnish HIV preexposure prophylaxis (PrEP) and postexposure prophylaxis (PEP), as specified. Prohibits health plans and insurers from requiring prior authorization or step therapy for PrEP or PEP, and requires coverage of pharmacist-prescribed PrEP and PEP. Prohibits health plans and health insurers from covering PrEP furnished by a pharmacist in excess of a 60-day supply to a single patient once every two years, unless the pharmacist has been directed otherwise by a prescriber. Allows Medi-Cal reimbursement for pharmacists prescribing PrEP and PEP. *Chapter 532, Statutes of 2019.*

SB-276 (Pan) - Immunizations: medical exemptions.

Requires the Department of Public Health (DPH) to develop an electronic, statewide, standardized medical exemption request form for immunization requirements in existing law. Requires DPH to make the request form available for use by physicians and to be transmitted directly to a state database. Requires the request form to be the only medical exemption documentation that an educational governing authority may accept. Requires DPH to create a standardized system to monitor immunization levels in schools and institutions, and to monitor patterns of unusually high exemption form submissions by a particular physician. *Chapter 278, Statutes of 2019.*

SB-689 (Moorlach) - Needle and syringe exchange programs.

Requires the Department of Public Health to authorize or reauthorize a clean needle and syringe exchange project entity pursuant to existing law only if the city or county in which the entity will be operating has adopted an ordinance or resolution approving that authorization or reauthorization. *Failed passage in the Senate Health Committee.*

SB-714 (Pan) - Immunizations.

Amends certain provisions of SB 276 (Pan, Chapter 276, Statutes of 2019) and becomes operative only if SB 276 is enacted and becomes effective. *Chapter 281, Statutes of 2019.*

SB-932 (Wiener) - Communicable diseases: COVID-19: data collection.

Requires any electronic tool used by local health officers for the purpose of reporting cases of communicable disease to the Department of Public Health to include the capacity to collect and report data relating to the sexual orientation and gender identity of individuals who are diagnosed with a reportable disease, and requires health care providers who are in attendance on a case of a reportable disease to report the patient's sexual orientation and gender identity, if known. *Chapter 183, Statutes of 2020.*

AB-262 (Gloria) - Local health officers: communicable diseases.

Requires local health officers (LHOs), during an outbreak of a communicable disease, or upon the imminent and proximate threat of a communicable disease outbreak or epidemic that threatens the public's health, to notify and update governmental entities within the LHO's jurisdiction and make relevant information available to governmental entities. *Chapter 798, Statutes of 2019.*

AB-320 (Quirk) - Pest control: mosquito abatement.

Establishes the California Mosquito Surveillance and Research Program, administered by the University of California, Davis, and outlines the duties of the program. *Chapter 422, Statutes of 2019.*

AB-993 (Nazarian) - Health care coverage: HIV specialists.

Requires health plan contracts and health insurance policies to permit an HIV specialist to be an eligible primary care provider, if the provider requests primary care provider status and meets the health plan or insurer's eligibility criteria for all specialists seeking primary care provider status. *Vetoed.*

AB-2077 (Ting) - Hypodermic needles and syringes.

Extends the sunset on existing law, until January 1, 2026, which permits pharmacists to furnish hypodermic needles and syringes without a prescription or a permit, to a person 18 years of age or older and which permits a person 18 years of age or older, without a prescription or license, to obtain hypodermic needles and syringes solely for personal use from a physician or pharmacist. *Chapter 274, Statutes of 2020.*

Emergency Medical Services

SB-156 (Nielsen) - Health facilities: emergency medical services.

Requires the Department of Public Health to issue a special permit to a hospital to offer emergency stabilization services at the site of the former Feather River Hospital in Paradise for up to six years, if specified requirements are met. *Chapter 839, Statutes of 2019.*

SB-275 (Pan) - Health Care and Essential Workers: personal protective equipment.

Requires the Department of Public Health and the Office of Emergency Services to establish a personal protective equipment (PPE) stockpile, and requires certain health care employers, including hospitals and skilled nursing facilities, to maintain an inventory of PPE at least sufficient for 45 days of surge consumption, effective on January 1, 2023, or one year after regulations are adopted defining 45 days of surge consumption, whichever is later. *Note: these provisions were added in the Assembly, replacing the prior content, which was heard in the Senate Business and Professions Committee. Normally, this bill would have been referred to the Senate Health Committee when it was returned to the Senate for concurrence in Assembly amendments. However, due to the time limitations imposed on the Legislature as a result of the COVID-19 pandemic, a referral was not possible, so it was never heard in the Senate Health Committee. Chapter 301, Statutes of 2020.*

SB-438 (Hertzberg) - Emergency medical services: dispatch.

Prohibits a public agency from entering into a contract for 911 call processing regarding the dispatch of emergency response resources unless the contract is with another public agency, or the contract is made by cooperative agreement. *Chapter 389, Statutes of 2019.*

AB-1 (Cooper) - Youth athletics: California Youth Football Act.

Enacts the California Youth Football Act, which establishes certain requirements on youth football, including limiting full-contact practices to 30 minutes per day, and no more than two days per week, requires an emergency medical technician or higher-level medical professional to be present during all games, and one independent non-rostered individual to be present at all practice locations with the authority to evaluate and remove any youth tackle football participant from practice who exhibits an injury. *Chapter 158, Statutes of 2019.*

AB-451 (Arambula) - Health care facilities: treatment of psychiatric emergency medical conditions.

Requires a psychiatric unit of a general acute care hospital, a psychiatric health facility, and an acute psychiatric hospital, to comply with provisions of law requiring emergency services to be provided regardless of a patient's ability to pay in order to treat a psychiatric emergency medical condition, as defined, regardless of whether the facility operates an emergency department, if specified requirements are met, including the facility having an available bed and appropriate facilities and qualified personnel available to provide the services. *No action taken on the Senate Floor.*

AB-453 (Chau) - Emergency medical services: training.

Requires the Emergency Medical Services Authority, as part of its requirement to develop training standards for Emergency Medical Technicians, to include a component within the dementia-specific training hours on how to interact effectively with persons with dementia and their caregivers. *Chapter 88, Statutes of 2019.*

AB-651 (Grayson) - Air ambulance services.

Limits a health plan enrollee or insured's payment for covered services provided by an air ambulance service provider that does not have a contract with the health plan or health insurer to no more than the same cost sharing that the enrollee or insured would pay for the same covered services received from a contracted air ambulance provider. Sunsets the supplemental Emergency Medical Air Transportation Act on July 1, 2022. *Chapter 537, Statutes of 2019.*

AB-774 (Reyes) - Health facilities: reporting.

Adds additional data elements to reports that hospitals are required to file with the Office of Statewide Health Planning and Development for each patient encounter in a hospital emergency department by requiring the time of service to be reported and the date and time of release from emergency care. *Vetoed.*

AB-1116 (Grayson) - Firefighters: peer support.

Enacts the California Firefighter Peer Support and Crisis Referral Services Act to enable confidential peer support and crisis referral services for emergency service personnel. *Chapter 388, Statutes of 2019.*

AB-1544 (Gipson) - Community Paramedicine or Triage to Alternate Destination Act.

Enacts the Community Paramedicine or Triage to Alternate Destination Act of 2019, which permits local emergency medical services agencies, with approval by the Emergency Medical Services Authority, to develop programs to provide community paramedic or triage to alternate destination services in one of the following specialties: (1) providing directly observed tuberculosis therapy; (2) providing case management services to frequent emergency medical services users; (3) providing hospice services to treat patients in their homes; and, (4) providing patients with transport to an alternate destination, which can either be an authorized mental health facility, or an authorized sobering center. *Chapter 138, Statutes of 2020.*

AB-1705 (Bonta) - Medi-Cal: emergency medical transportation services.

Requires Department of Health Care Services, no sooner than July 1, 2021, to implement the Public Provider Intergovernmental Transfer Program (IGT program) for an eligible provider of emergency medical transport services to receive a supplemental Medi-Cal reimbursement in addition to the Medi-Cal rate of payment the provider would otherwise receive for those services. Requires the IGT program to replace the ground emergency medical transportation supplemental payment program, as specified. Exempts public ambulance providers from the quality assurance fee (QAF), data reporting, and the resulting Medi-Cal add on payments resulting from revenue from the QAF, if the IGT program is implemented. *Chapter 544, Statutes of 2019.*

AB-2300 (Cooper) - California Youth Football Act.

Revises the California Youth Football Act to delete the ability of an emergency medical technician or paramedic to “evaluate” youth tackle football participants, and instead specifies that an emergency medical technician or paramedic has the authority to provide prehospital emergency medical care or rescue services consistent with their certification or license. *Chapter 49, Statutes of 2020.*

AB-2450 (Grayson) - Air ambulance services.

Extends the assessment of penalties of the Emergency Medical Air Transportation Act to July 1, 2021 and the sunset of its provisions to July 1, 2024; and contains an urgency clause that will make this bill effective upon enactment. *Chapter 52, Statutes of 2020.*

Food Safety and Labeling

SB-406 (Pan) - Health care omnibus bill.

Contains a number of changes to law related to health care coverage, vital records, food safety, adult health, and recovery facilities. Makes conforming changes in the Health and Safety Code to align with the Food and Agriculture Code related to the California Organic Food and Farming Act. *Chapter 138, Statutes of 2020.*

SB-677 (Allen) - Retail food safety: nonlatex gloves.

Prohibits the use of latex gloves in retail food service establishments, and permits nonlatex gloves, including nitrile, polyethylene, and vinyl gloves. *Chapter 254, Statutes of 2019.*

AB-228 (Aguiar-Curry) - Food, beverage, and cosmetic adulterants: industrial hemp products.

Establishes a regulatory framework for industrial hemp products that contain no more than 0.3% tetrahydrocannabinol and is a cosmetic, food, food additive, dietary supplement, or herb. *Held on the Senate Appropriations Committee Suspense File.*

AB-377 (Eduardo Garcia) - Microenterprise home kitchen operations.

Clarifies provisions of law governing the authorization and regulation of microenterprise home kitchens (MHKs), including clarifying that only a county or one of four cities with an environmental health department can authorize MHKs, and if authorized by one of these jurisdictions, they are permitted in all areas of those jurisdictions. *Chapter 536, Statutes of 2019.*

AB-619 (Chiu) - Retail food: reusable containers: multiuse utensils.

Permits a local enforcement agency to allow a temporary food facility to use multiuse utensils that are clean, rinsed, and sanitized, as an alternative to single-use utensils, and clarifies provisions of law governing the ability of consumers to bring empty containers to food facilities intended for refilling with food or beverages. *Chapter 93, Statutes of 2019.*

AB-746 (Wood) - Sherman Food, Drug, and Cosmetic Law: beer manufacturer licensees: exemption.

Exempts beer manufacturers that are licensed by the Department of Alcoholic Beverage Control from the requirement to register with the Department of Public Health as a food processing facility. *Chapter 277, Statutes of 2019.*

AB-1178 (Quirk) - Dietary supplements: labeling: live microorganisms.

Requires a manufacturer or distributor of dietary supplements that contain live microorganisms, to include the genus, species, and strain of each live microorganism in the dietary supplement on the label of the dietary supplement, commencing January 1, 2022. *Held on the Senate Appropriations Committee Suspense File.*

AB-1360 (Ting) - Third-party food delivery.

Establishes requirements on food delivery platforms that deliver food to consumers from a grocery establishment, a retail store with a grocery department, or a grocery warehouse, including requiring that a food delivery driver have specified training, and that the food delivery platform maintains liability insurance. *No action taken on the Senate Floor.*

AB-1532 (Bauer-Kahan) - Food facilities: food safety: employee knowledge.

Enacts the Natalie Giorgi Sunshine Act to require the food handler training course to include instructions on safe handling food practices for major food allergens. *Chapter 131, Statutes of 2019.*

AB-3336 (Carrillo) - Third-party food delivery service: food safety.

Requires ready-to-eat food delivered by third-party food delivery services to be transported in a manner that protects the food from contamination and spoilage, including by requiring the interior floor, sides, and top of the food holding area to be clean, requiring the food to be maintained at a holding temperature necessary to prevent spoilage, and by requiring bags or containers to be closed with a tamper-evident method prior to the food deliverer taking possession of the ready-to-eat food. *Chapter 105, Statutes of 2020.*

Health Care Coverage

SB-11 (Beall) - Health care coverage: mental health parity.

Requires the Department of Managed Health Care and the California Department of Insurance to report annually on all actions taken to enforce state and federal mental health parity laws, and prohibits prior authorization or step therapy requirements on any prescription medication approved by the federal Food and Drug Administration for the treatment of substance use disorders. *Held on the Senate Appropriations Committee Suspense File.*

SB-65 (Pan) - Health care coverage: financial assistance.

Reduces Covered California health insurance premiums to zero for people with household incomes at or below 138% of the federal poverty level (FPL), and specifies the state premium assistance subsidy amounts for people with household incomes of 139% to 600% FPL. Requires state financial assistance administered by Covered California to include cost-sharing reduction assistance to reduce the copays, deductibles, coinsurance, out-of-pocket maximums, and other cost sharing for people with household income between 200% and 400% FPL. *Held on the Assembly Appropriations Committee Suspense File.*

SB-129 (Pan) - Health care coverage reporting.

Requires annual health plan and insurer enrollment reporting to include enrollment data for products sold inside and outside of Covered California, any other business lines, and multiple employer welfare arrangements; and requires the California Department of Insurance and the Department of Managed Health Care to publicly report annual enrollment data no later than April 15th of each year. *Chapter 241, Statutes of 2019.*

SB-159 (Wiener) - HIV: preexposure and postexposure prophylaxis.

Authorizes a pharmacist to initiate and furnish HIV preexposure prophylaxis (PrEP) and postexposure prophylaxis (PEP), as specified. Prohibits health plans and insurers from requiring prior authorization or step therapy for PrEP or PEP, and requires coverage of pharmacist-prescribed PrEP and PEP. Prohibits health plans and health insurers from covering PrEP furnished by a pharmacist in excess of a 60-day supply to a single patient once every two years, unless the pharmacist has been directed otherwise by a prescriber. Allows Medi-Cal reimbursement for pharmacists prescribing PrEP and PEP. *Chapter 532, Statutes of 2019.*

SB-163 (Portantino) – Health care coverage: pervasive developmental disorder or autism.

Revises and expands the definition of behavioral health treatment (BHT) and expands the provider qualifications to include more provider types that can provide BHT under the mandate that health plans and insurers cover BHT for pervasive developmental disorder or autism. Prohibits the setting, location, or time of treatment recommended by a qualified autism services provider from being used as the only reason to deny or reduce coverage for medically necessary services. Requires the setting to be consistent with the standard of care for BHT. *Vetoed.*

SB-175 (Pan) - Health care coverage: minimum essential coverage.

Rewrites existing law that bans health plan and insurer limitations on annual and lifetime benefits by deleting federal statutory citations and replacing those citations with the actual federal provisions that impose the requirements. *No action taken in the Assembly Health Committee.*

SB-260 (Hurtado) - Automatic health care coverage enrollment.

Requires Covered California, commencing July 1, 2021, to enroll an individual or individuals using electronic information from Medi-Cal or the Children’s Health Insurance Program in the lowest cost silver Covered California plan. Requires a health plan or insurer to annually notify an individual that when he or she ceases to be enrolled in coverage, his or her contact information will be provided to Covered California to assist him or her in obtaining other coverage, or that he or she may opt out of this transfer of information. *Chapter 845, Statutes of 2019.*

SB-343 (Pan) – Health care data disclosure.

Eliminates provisions in health insurance rate filing requirements that permit Kaiser Permanente health plans and insurers to report medical trend assumptions in a different manner than other health plans, including reporting trends in fewer categories, and eliminates provisions in certain hospital reporting requirements that permit Kaiser Permanente hospitals to report certain data as a group rather than by individual facility, and to not have to report certain financial data. *Chapter 247, Statutes of 2019.*

SB-406 (Pan) - Health care omnibus bill.

Contains a number of changes to law related to health care coverage, vital records, food safety, adult health, and recovery facilities. Delinks requirements on health plans and health insurers related to preventive services without cost sharing and annual and lifetime benefit limits from the Affordable Care Act, extends the California Health Benefits Review Program and other operational authority to 2022, and makes other technical and conforming changes to existing law. *Chapter 302, Statutes of 2020.*

SB-407 (Monning) - Medicare supplement benefit coverage.

Requires an issuer of a Medicare supplement contract with new or innovative benefits commencing January 1, 2020, to identify the portion of the premium attributed to the new or innovative benefits as a separate line item on the payment or invoice and extends the Medicare supplement open enrollment period by 30 days. Requires the Department of Managed Health Care and the California Department of Insurance to collaborate to develop and implement policies and procedures that standardize new or innovative benefits for purposes of allowing consumer comparison of benefits, out-of-pocket costs, and premiums. *Chapter 549, Statutes of 2019.*

SB-583 (Jackson) - Clinical trials.

Conforms California law with respect to health plan and insurer coverage requirements for participants in clinical trials to incorporate federal requirements enacted as part of the Affordable Care Act, which includes expanding the type of clinical trials to include life-threatening diseases or conditions. *Chapter 482, Statutes of 2019.*

SB-600 (Portantino) – Health care coverage: fertility preservation.

States that standard fertility preservation services are covered as basic health services when a covered treatment may directly or indirectly cause iatrogenic infertility. *Chapter 853, Statutes of 2019.*

SB-612 (Pan) - Health care: data reporting.

Requires health plans, health insurers, and medical groups to report participation in specified health care delivery and management collaboratives and activities to the Office of Statewide Health Planning and Development, as specified. *Held on the Senate Appropriations Committee Suspense File.*

SB-746 (Bates) - Health care coverage: anticancer medical devices.

Requires every health plan contract and health insurance policy issued, amended, or renewed in California on or after January 1, 2020, that provides coverage for chemotherapy or radiation therapy for the treatment of cancer, to also provide coverage for anticancer medical devices. *Held on the Senate Appropriations Committee Suspense File.*

SB-784 (Committee on Health) - Medicare supplement benefit coverage.

Makes conforming changes in California law to the requirements and standards that apply to Medicare supplement contracts and policies, for the purpose of complying with the federal Medicare Access and CHIP Reauthorization Act. Contains an urgency clause to ensure that the provisions of this bill go into immediate effect upon enactment. *Chapter 157, Statutes of 2019.*

SB-855 (Wiener) - Health coverage: mental health or substance abuse disorders.

Repeals California's mental health parity law and replaces it with a broader requirement on health plans and disability insurers to cover medically necessary treatment of mental health and substance use disorders under the same terms and conditions applied to other medical conditions; establishes new requirements for medically necessary care determinations and utilization review; and bans discretionary clauses in health plan contracts. *Chapter 151, Statutes of 2020.*

AB-174 (Wood) - Health care coverage: financial assistance.

Requires Covered California to develop and prepare biannual public reports to inform the California Health and Human Services Agency, the Legislature, and the public about state individual market financial assistance established in the 2019-2020 Budget Act. Corrects an incorrect cross reference contained in AB 651 (Muratsuchi, Chapter 782, Statutes of 2017) related to nonprofit health facilities. *Chapter 795, Statutes of 2019*

AB-290 (Wood) - Health care service plans and health insurance: third-party payments.

Establishes requirements on financially interested health care providers and entities that make third-party premium payments on behalf of health plan enrollees and insureds that includes a process by which a financially interested provider's payment rate may be reduced. Applies these requirements to financially interested entities covered by Advisory Opinion 97-1, upon a finding by the United States Department of Health and Human Services Office of Inspector General that compliance does not violate the federal laws addressed by Advisory Opinion 97-1 or a successor agreement, if an updated opinion is requested prior to July 1, 2020. *Chapter 862, Statutes of 2019.*

AB-414 (Bonta) - Health care coverage: minimum essential coverage.

Directs the Franchise Tax Board to report to the Legislature regarding specific information resulting from California's minimum essential health coverage requirement and individual shared responsibility penalty. *Chapter 801, Statutes of 2019.*

AB-577 (Eggman) - Health care coverage: maternal mental health.

Permits completion of covered services, for up to 12 months from diagnosis or from the end of the pregnancy, whichever occurs later, for an individual who presents written documentation of being diagnosed with a maternal mental health condition to her health plan or health insurer when her provider is terminated, or when she is newly covered, if the provider agrees to the rate and terms and conditions of the health plan or policy. *Chapter 776, Statutes of 2019.*

AB-598 (Bloom) - Hearing aids: minors.

Requires a health plan contract or health insurance policy issued, amended, or renewed on or after July 1, 2020, to include coverage for hearing aids up to a maximum covered amount of \$3,000 per individual hearing aid, for all enrollees under 18 years of age when medically necessary. *Withdrawn from enrollment at the request of the Assembly.*

AB-651 (Grayson) - Air ambulance services.

Limits a health plan enrollee or insured's payment for covered services provided by an air ambulance service provider that does not have a contract with the health plan or health insurer to no more than the same cost sharing that the enrollee or insured would pay for the same covered services received from a contracted air ambulance provider. Sunsets the supplemental Emergency Medical Air Transportation Act on July 1, 2022. *Chapter 537, Statutes of 2019.*

AB-731 (Kalra) - Health care coverage: rate review.

Requires large group health insurance products to be reviewed by the Department of Managed Health Care (DMHC) and the California Department of Insurance (CDI) similar to individual and small group products based on methodology, and benefit and cost-sharing variations. Requires new reporting for all health plans and insurers on specified fees, reclassification of services, comparisons to Medicare on prices paid, and variations in medical trend by geographic region. Requires, upon request, DMHC and CDI to determine if large group experience rated changes are unreasonable or unjustified, and if so, requires health plans and insurers to notify the purchaser of an unreasonable or unjustified rate determination. *Chapter 807, Statutes of 2019.*

AB-744 (Aguiar-Curry) - Health care coverage: telehealth.

Requires health coverage contracts after January 1, 2021, to specify that the health plan or insurer is required to cover and reimburse diagnosis, consultation, or treatment delivered through telehealth on the same basis and to the same extent that the plan or insurer is responsible for coverage and reimbursement for the same service provided through in-person diagnosis, consultation, or treatment. Updates other telehealth provisions in existing law. *Chapter 867, Statutes of 2019.*

AB-767 (Wicks) – Health care coverage: in vitro fertilization.

Requires Covered California, in consultation with stakeholders, to develop options for the inclusion of in vitro fertilization coverage as part of, or as supplementary to, coverage currently offered through Covered California, and report the options to the Legislature on or before July 1, 2020. *These provisions were amended out of the bill.*

AB-929 (Luz Rivas) - California Health Benefit Exchange: data collection.

Requires a Covered California qualified health plan to report on cost reduction efforts, quality improvements, or disparity reductions. Requires Covered California to post annually on its website plan-specific data and information on cost reduction efforts, quality improvements, and disparity reductions in a manner that protects the personal information of enrollees. *Chapter 812, Statutes of 2019.*

AB-954 (Wood) - Dental services: third-party network access.

Permits health plans and health insurers that cover dental services, or contracting entities such as health plans or third-party administrators, to grant third party access to dental provider network contracts, a provider's dental services, or contractual discounts, if specified requirements are met such as a notification to the health care provider about the third-party access and allowing the provider to choose not to participate in third-party access to the provider network contract. *Chapter 540, Statutes of 2019.*

AB-993 (Nazarian) - Health care coverage: HIV specialists.

Requires health plan contracts and health insurance policies to permit an HIV specialist to be an eligible primary care provider, if the provider requests primary care provider status and meets the health plan or insurer's eligibility criteria for all specialists seeking primary care provider status. *Vetoed.*

AB-1063 (Petrie-Norris) – Health care coverage: waivers.

Prohibits a state innovation waiver pursuant to the federal Affordable Care Act from being requested from the federal United States Department of Health and Human Services without express statutory authority. *These provisions were amended out of the bill.*

AB-1124 (Maienschein) - Health care service plans: regulations: exemptions.

Permits the Department of Managed Health Care to authorize a pilot program that allows health care providers to undertake risk-bearing arrangements with a voluntary employees' beneficiary association, as defined under federal and state law with enrollment of greater than 100,000 lives, or, a trust fund that is a welfare plan, and a multiemployer plan, as defined in federal law, with enrollment greater than 25,000 lives. *Chapter 266, Statutes of 2020.*

AB-1246 (Limón) - Health care coverage: basic health care services.

Requires large group health insurance policies, regulated by the California Department of Insurance (CDI), to include medically necessary basic health care services, and defines these services consistent with the Knox-Keene Health Care Service Plan Act of 1975. States intent that CDI harmonize implementation with the Department of Managed Health Care. *Held on the Senate Appropriations Committee Suspense File.*

AB-1249 (Maienschein) - Health care service plans: regulations: exemptions.

Permits the Department of Managed Health Care (DMHC) director to authorize for five years a pilot program in northern California and southern California, whereby health care providers approved by DMHC may undertake risk-bearing arrangements with a voluntary employees' beneficiary association, as defined, with enrollment of greater than 100,000 lives, or a trust fund that is a welfare plan, as defined, and a multiemployer plan, as defined, with enrollment of greater than 25,000 lives to demonstrate the control of costs for health care services and the improvement of health outcomes and quality of services when compared against a sole fee-for-service provider reimbursement model, as specified. *Vetoed.*

AB-1309 (Bauer-Kahan) - Health care coverage: enrollment periods.

Makes the annual health insurance open enrollment period the beginning of November 1 of the preceding calendar year to January 31 of the benefit year, for individual market policies available on or after January 1, 2020. *Chapter 828, Statutes of 2019.*

AB-1802 (Committee on Health) - Health care service plans.

Makes technical and clarifying changes to existing law related to health care service plans and corrects an error in existing law related to timely claims payment. *Chapter 113, Statutes of 2019.*

AB-1803 (Committee on Health) - Pharmacy: health care coverage: claims for prescription drugs sold for retail price.

Delays for one year a provision in existing pharmacy law that requires a pharmacy claim to be submitted to a health plan or health insurer in the same manner as if a customer purchased the prescription drug by paying the cost-sharing instead of the retail price of the prescription drug. *Chapter 114, Statutes of 2019.*

AB-2118 (Kalra) - Health care service plans and health insurers: reporting requirements.

Establishes new reporting requirements for health plans and insurers with respect to premium rates, cost sharing, benefits and benefit designs of products offered and sold in the individual and small group markets. *Chapter 277, Statutes of 2020.*

AB-2157 (Wood) - Health care coverage: independent dispute resolution process.

Requires the Department of Managed Health Care and the California Department of Insurance to include confidential information as part of the independent dispute resolution process (IDRP) created for processing and resolving claims disputes between health plans/health insurers and noncontracting health professionals, and requires the IDRP organization to conduct a de novo review, and assign reviewers with relevant background and experience. *Chapter 278, Statutes of 2020*

AB-2360 (Maienschein) - Telehealth: mental health.

Requires a health plan or health insurer to provide access to a telehealth consultation program by July 1, 2021 that provides providers who treat children and pregnant and postpartum persons with access to a mental health consultation during standard provider hours, which may include evenings and weekends. *Vetoed.*

Health Care Facilities

SB-156 (Nielsen) - Health facilities: emergency medical services.

Requires the Department of Public Health to issue a special permit to a hospital to offer emergency stabilization services at the site of the former Feather River Hospital in Paradise for up to six years, if specified requirements are met. *Chapter 839, Statutes of 2019.*

SB-227 (Leyva) - Health and care facilities: inspections and penalties.

Requires periodic inspections of hospitals by the Department of Public Health to include reviews of compliance with nurse staffing ratios, and establishes administrative penalties for nurse staffing ratio violations of \$15,000 for a first violation, and \$30,000 for each subsequent violation. *Chapter 843, Statutes of 2019.*

SB-275 (Pan) - Health Care and Essential Workers: personal protective equipment.

Requires the Department of Public Health and the Office of Emergency Services to establish a personal protective equipment (PPE) stockpile, and requires certain health care employers, including hospitals and skilled nursing facilities, to maintain an inventory of PPE at least sufficient for 45 days of surge consumption, effective on January 1, 2023, or one year after regulations are adopted defining 45 days of surge consumption, whichever is later. *Note: these provisions were added in the Assembly, replacing the prior content, which was heard in the Senate Business and Professions Committee. Normally, this bill would have been referred to the Senate Health Committee when it was returned to the Senate for concurrence in Assembly amendments. However, due to the time limitations imposed on the Legislature as a result of the COVID-19 pandemic, a referral was not possible, so it was never heard in the Senate Health Committee. Chapter 301, Statutes of 2020*

SB-305 (Hueso) - Compassionate Access to Medical Cannabis Act or Ryan's Law.

Prohibits a health care facility from interfering with a terminally ill patient's use of medical cannabis within the health care facility. *Vetoed.*

SB-322 (Bradford) - Health facilities: inspections: employee reporting.

Requires hospital employees to have the right to discuss possible regulatory violations or patient safety concerns with the inspector privately during the course of an investigation or inspection by the Department of Public Health. *Chapter 72, Statutes of 2019.*

SB-343 (Pan) – Health care data disclosure.

Eliminates provisions in health insurance rate filing requirements that permit Kaiser Permanente health plans and insurers to report medical trend assumptions in a different manner than other health plans, including reporting trends in fewer categories, and eliminates provisions in certain hospital reporting requirements that permit Kaiser Permanente hospitals to report certain data as a group rather than by individual facility, and to not have to report certain financial data. *Chapter 247, Statutes of 2019.*

SB-363 (Pan) - Workplace safety.

Requires any facility operated by the Department of State Hospitals, the Department of Developmental Services, or the California Department of Corrections and Rehabilitation, to report, on a monthly basis, information on violent incidents to the bargaining unit of each employee affected by an incident, as well as to the relevant department. *Vetoed.*

SB-406 (Pan) - Health care omnibus bill.

Contains a number of changes to law related to health care coverage, vital records, food safety, adult health, and recovery facilities. Authorizes the Department of Health Care Services to obtain criminal record clearances for certain administrative personnel prior to issuing a new license for an Adult Day Health Center or Home Health Agency serving only Program for All-Inclusive Access to Care for the Elderly patients. *Chapter 302, Statutes of 2020.*

SB-464 (Mitchell) - California Dignity in Pregnancy and Childbirth Act.

Requires hospitals and alternative birth centers to implement an implicit bias program for all health care providers involved in the perinatal care of patients within those facilities, including requiring these healthcare providers to complete initial basic training through the implicit bias program and a refresher course every two years thereafter. Requires the Department of Public Health (DPH) to track and publish data on maternal death and severe morbidity. Adds, to the list of written information a hospital is required to provide to each patient upon admission, information on how to file a discrimination complaint with DPH or the Medical Board of California if the patient feels they were discriminated against. *Chapter 533, Statutes of 2019.*

SB-758 (Portantino) - Hospitals: seismic safety.

As passed by Senate Health Committee, required hospitals that have a building that is not in compliance with the January 1, 2030 seismic safety standard of being capable of continued operation, to report to the Office of Statewide Health Planning and Development what services are provided in each building of that hospital. Amended in the Assembly to instead delay the January 1, 2030 seismic safety standard until January 1, 2032. *No action taken on the Assembly Floor.*

SB-977 (Monning) - Health care system consolidation: Attorney General approval and enforcement.

Requires a health care system (which is an entity or entities that includes or owns two or more hospitals within multiple counties or three or more hospitals in one county), private equity groups and hedge funds to provide written notice and obtain consent of, the Attorney General (AG) prior to an affiliation or acquisition between the health care system, private equity group or hedge fund and a health care facility or provider. Makes it unlawful conduct for a health system with substantial market power to engage in specified anticompetitive activities. Establishes the Health Policy Advisory Board to evaluate and analyze health care markets, advise the AG, and produce an annual report. *No action taken on the Assembly Floor.*

SB-1207 (Jackson) - Skilled nursing facilities: backup power system.

Requires skilled nursing facilities to have an alternative source of power to protect resident health and safety for no less than 96 hours during any type of power outage that complies with specified federal requirements. *Vetoed.*

AB-174 (Wood) - Health care coverage: financial assistance.

Requires Covered California to develop and prepare biannual public reports to inform the California Health and Human Services Agency, the Legislature, and the public about state individual market financial assistance established in the 2019-2020 Budget Act. Corrects an incorrect cross reference contained in AB 651 (Muratsuchi, Chapter 782, Statutes of 2017) related to nonprofit health facilities. *Chapter 795, Statutes of 2019.*

AB-204 (Wood) - Hospitals: community benefits plan reporting.

Revises the not-for-profit hospital community benefit law reporting requirements by adding a definition of charity care, requiring small and rural hospitals (currently exempt from the community benefit reporting law) to comply with the law if they are part of a hospital system, and requiring the Office of Statewide Health Planning and Development to annually prepare a report on the amount each hospital spent on community benefits, including the amount attributable to charity care. *Chapter 535, Statutes of 2019.*

AB-290 (Wood) - Health care service plans and health insurance: third-party payments.

Establishes requirements on financially interested health care providers and entities that make third-party premium payments on behalf of health plan enrollees and insureds that includes a process by which a financially interested provider's payment rate may be reduced. Applies these requirements to financially interested entities covered by Advisory Opinion 97-1, upon a finding by the United States Department of Health and Human Services Office of Inspector General that compliance does not violate the federal laws addressed by Advisory Opinion 97-1 or a successor agreement, if an updated opinion is requested prior to July 1, 2020. *Chapter 862, Statutes of 2019.*

AB-451 (Arambula) - Health care facilities: treatment of psychiatric emergency medical conditions.

Requires a psychiatric unit of a general acute care hospital, a psychiatric health facility, and an acute psychiatric hospital, to comply with provisions of law requiring emergency services to be provided regardless of a patient's ability to pay in order to treat a psychiatric emergency medical condition, as defined, regardless of whether the facility operates an emergency department, if specified requirements are met, including the facility having an available bed and appropriate facilities and qualified personnel available to provide the services. *No action taken on the Senate Floor.*

AB-506 (Kalra) - Long-term health facilities.

Revises the criteria under which the Department of Public Health (DPH) issues civil penalties against long-term care (LTC) facilities that were found to have caused the death of a resident, so that instead of having to prove the death of a resident was the "direct proximate cause" of a violation by the facility, DPH would have to prove that the violation was a "substantial factor" in the death of a resident and that the death was a foreseeable result of the violation. Increases civil penalties assessed against LTC facilities. *Vetoed.*

AB-774 (Reyes) - Health facilities: reporting.

Adds additional data elements to reports that hospitals are required to file with the Office of Statewide Health Planning and Development for each patient encounter in a hospital emergency department by requiring the time of service to be reported and the date and time of release from emergency care. *Vetoed.*

AB-899 (Wood) - Clinic licensing.

Exempts buildings acquired by a licensed primary care clinic under either the affiliate licensure process or the consolidated licensure process from the requirement to meet minimum construction standards of adequacy and safety, known as OSHPD 3, if the building, prior to being acquired, was an outpatient setting or a previously licensed primary care clinic that was actively seeing patient within the previous 18 months. *Vetoed.*

AB-962 (Burke) - Hospitals: procurement contracts.

Requires hospitals with operating expenses of at least \$50 million or that are part of a system of hospitals to submit an annual report to the Office of Statewide Health Planning and Development (OSHPD) on its minority, women, LGBT, and disabled veteran business enterprise procurement efforts. Requires OSHPD to convene a hospital diversity commission to advise and provide recommendations on the best methods to increase procurement with diverse suppliers within the hospital industry. *Chapter 815, Statutes of 2019.*

AB-1014 (O'Donnell) - Health facilities: notices.

Increases the period of time when a hospital is required to provide public notice of a proposed closure or elimination of a supplemental service, currently 90 days for the closure or downgrading of emergency services and 30 days for all other closures or eliminations of supplemental services, to 180 days prior to the closure of a hospital or the elimination or downgrading of emergency services, and 90 days prior to the elimination of any other supplemental service. *Vetoed.*

AB-1037 (Gipson) - Martin Luther King, Jr. Community Hospital: clinics: licensure and regulation: exemption.

Permits Martin Luther King, Jr. Community Hospital to establish a medical foundation with 26 licensed physicians, instead of the 40 licensed physicians required under existing law, if it meets certain conditions. *Chapter 499, Statutes of 2019.*

AB-1128 (Petrie-Norris) - Program of All-Inclusive Care for the Elderly.

Transfers, from the Department of Public Health to the Department of Health Care Services, the oversight and regulation of a primary care clinic, adult day health center, and home health agency that exclusively serves patients of a Program for All-Inclusive Care for the Elderly center. *Chapter 821, Statutes of 2019.*

AB-1695 (Carrillo) - Health facilities.

Requires a skilled nursing facility to give a written notice to all residents of the facility 90 days prior to a transfer of management or a change of ownership, and requires all employees to be retained for a 60-day transition employment period. *Chapter 832, Statutes of 2019.*

AB-1709 (Jones-Sawyer) - Nursing homes: staff.

Revises the minimum qualifications for an applicant to take the nursing home administrator licensing exam, when the applicant has a current valid license as a nursing home administrator in another state, to allow the applicant to hold a certification from the American College of Health Care Administrators as an alternative to meeting minimum education requirements, eliminates the continuing education requirements for nursing home administrators for their initial licensure renewal, and makes other modifications to the laws governing nursing home administrators. *These provisions were amended out of the bill.*

AB-2037 (Wicks) - Health facilities: notices.

Increases the period of time when a hospital is required to provide public notice of a proposed closure or elimination of a supplemental service, currently 90 days for the closure or downgrading of emergency services and 30 days for all other closures or eliminations of supplemental services, to 180 days prior to the elimination or downgrading of emergency services, 120 days prior to the closure of a hospital, and 90 days prior to the elimination of any other supplemental service. *Chapter 95, Statutes of 2020.*

AB-2644 (Wood) - Skilled nursing facilities: deaths: reporting.

Requires a skilled nursing facility (SNF), during a declared emergency related to a communicable disease, to report each disease-related death within 24 hours, and requires SNFs to have a full-time Infection Preventionist. *Chapter 287, Statutes of 2020.*

Infant/Children's Health

SB-12 (Beall) - Mental health services: youth.

Establishes the Integrated Youth Mental Health Program (IYMHP). Requires, subject to an appropriation, the Mental Health Services Oversight and Accountability Commission to administer the IYMHP throughout the state made up of centers that provide integrated services, including for mental health and substance use disorders, to youth ages 12-25 and their families by providing funding to specified entities. *Held on the Assembly Appropriations Committee Suspense File.*

SB-582 (Beall) - Youth mental health and substance use disorder services.

Requires the Mental Health Services Oversight and Accountability Commission to allocate at least one-half of Investment in Mental Health Wellness Act of 2013 triage grant program funds to local educational agency and mental health partnerships, as specified, to support prevention, early intervention, and direct services to children and youth, as specified. *Held on the Assembly Appropriations Committee Suspense File.*

AB-1 (Cooper) - Youth athletics: California Youth Football Act.

Enacts the California Youth Football Act, which establishes certain requirements on youth football, including limiting full-contact practices to 30 minutes per day, and no more than two days per week, requires an emergency medical technician or higher-level medical professional to be present during all games, and one independent non-rostered individual to be present at all practice locations with the authority to evaluate and remove any youth tackle football participant from practice who exhibits an injury. *Chapter 158, Statutes of 2019.*

AB-379 (Maienschein) - Youth athletics: concussion and sudden cardiac arrest prevention protocols.

Adds “an athlete who has passed out or fainted” to existing law that prohibits an athlete from returning to athletic activity until being evaluated and cleared by a health care provider. Requires the athlete, if the health care provider suspects that the athlete has a cardiac condition that puts the athlete at risk for sudden cardiac arrest or other heart-related issues, to remain under the care of the healthcare provider to pursue follow up testing until the athlete is cleared to play. *Chapter 174, Statutes of 2019.*

AB-598 (Bloom) - Hearing aids: minors.

Requires a health plan contract or health insurance policy issued, amended, or renewed on or after July 1, 2020, to include coverage for hearing aids up to a maximum covered amount of \$3,000 per individual hearing aid, for all enrollees under 18 years of age when medically necessary. *Withdrawn from enrollment at the request of the Assembly.*

AB-763 (Gray) - Medi-Cal specialty mental health services.

Requires the Department of Health Care Services, on or before March 31, 2020, to convene a stakeholder workgroup to identify all forms currently used by county mental health plans (MHPs) to determine eligibility and reimbursement for specialty mental health services provided under Early and Periodic Screening, Diagnostic, and Treatment (EPSTD) and to develop standard forms. Requires county MHPs and their providers, no later than July 1, 2021, to use the standard forms developed for intake, assessment, and treatment planning of Medi-Cal beneficiaries receiving specialty mental health services provided under EPSTD. *Held on the Senate Appropriations Committee Suspense File.*

AB-898 (Wicks) - Early and Periodic Screening Diagnosis, and Treatment services: behavioral health.

Requires the California Health and Human Services Agency to convene the Children's Behavioral Health Action Team to maximize Medi-Cal's investment in the social, emotional, and developmental health and well-being of children on Medi-Cal. Requires the Action Team to develop an interim and final report of findings and recommendations, as specified, and a plan to implement the recommendations of the report. *Held on the Senate Appropriations Committee Suspense File.*

AB-1004 (McCarty) - Developmental screening services.

Requires early and periodic screening, diagnostic, and treatment screening services to include developmental screening services for Medi-Cal beneficiaries ages zero to three, inclusive. Requires Medi-Cal managed care plans to ensure contracted providers administering developmental screenings comply with the Bright Futures Guidelines and Recommendations for Preventive Pediatric Health Care established by the American Academy of Pediatrics. Requires the external quality review organization, beginning on July 1, 2020, to annually review and report on Medi-Cal managed care plans' compliance with providing enrollees access to developmental screenings. *Chapter 387, Statutes of 2019*

AB-1031 (Nazarian) - Youth Substance Use Disorder Treatment and Recovery Program Act of 2019.

Requires the Department of Health Care Services to establish regulations regarding community-based nonresidential and residential treatment and recovery programs to intervene and treat the problems of alcohol and drug use among youth under the age of 21, and to report annually to the Legislature utilization data relevant to services received by youth and their families. *Held on the Senate Appropriations Committee Suspense File.*

AB-1085 (McCarty) - After school programs: substance use prevention: funding: cannabis revenue.

Encourages the After School Education and Safety, the 21st Century Community Learning Centers, and the 21st Century High School After School Safety and Enrichment for Teens programs to establish programs that are designed to educate about and prevent substance use disorders or to prevent harm from substance abuse. Requires the State Department of Health Care Services (DHCS) to enter into interagency agreements with the California Department of Education to administer those programs and allocate their funding. Authorizes DHCS to consider selecting those programs for funding from the Control, Regulate and Tax Adult Use of Marijuana Act. *Vetoed.*

AB-1098 (O'Donnell) - Substance use disorders: youth programs.

Requires the Department of Health Care Services, in collaboration with specified state agencies, to convene a technical advisory committee to assist in establishing procedures for the implementation and administration of programs funded by cannabis tax funds aimed at providing substance abuse education and prevention programs targeted toward youth. Requires specified statewide assessments and reporting to the Legislature. Contains an urgency clause that would make this bill effective upon enactment. *Held on the Senate Appropriations Committee Suspense File.*

AB-1322 (Berman) - School-based health programs.

Establishes a School-Based Health Unit within the California Department of Education to administer and support school-based health programs operated by public schools. *Vetoed.*

AB-2276 (Reyes) - Childhood lead poisoning: screening and prevention.

Creates additional risk factors to be considered by health care providers evaluating children at risk of lead poisoning, and requires the Department of Public Health (DPH) to update its formula for allocating funds to local Childhood Lead Poisoning Prevention Programs. Requires Medi-Cal managed care plans (MCPs) to identify and provide a report to the Department of Health Care Services on all child enrollees six years of age and younger who have missed a required blood lead screening test and the age at which the required test was missed. Requires Medi-Cal MCPs to remind health care providers of children on Medi-Cal of the blood lead screening test and other requirements. *Chapter 216, Statutes of 2020.*

AB-2300 (Cooper) - California Youth Football Act.

Revises the California Youth Football Act to delete the ability of an emergency medical technician or paramedic to “evaluate” youth tackle football participants, and instead specifies that an emergency medical technician or paramedic has the authority to provide prehospital emergency medical care or rescue services consistent with their certification or license. *Chapter 49, Statutes of 2020.*

ACR-101 (Lackey) - Pediatric cancer.

Calls for increased research on the causes and cures for pediatric cancer and ways in which to detect the cancer early on. *Chapter 2, Statutes of 2020.*

Medi-Cal

SB-10 (Beall) - Mental health services: peer, parent, transition-age, and family support specialist certification.

Requires the Department of Health Care Services (DHCS) to establish a program for certifying peer support specialists. Requires DHCS to amend its Medicaid state plan and to seek any federal waivers or state plan amendments to implement the certification program. Permits DHCS to implement, interpret, and make specific the certification program through available means, as specified, until regulations are adopted. *Vetoed.*

SB-29 (Durazo) - Medi-Cal: eligibility.

Extends eligibility for full-scope Medi-Cal benefits, beginning January 1, 2020, to undocumented adults 65 years and older, who are otherwise eligible for those benefits but for their immigration status. Subjects expansion of eligibility to an appropriation of funds in the annual Budget Act or another statute. *No action taken on the Assembly Floor.*

SB-66 (Atkins) - Medi-Cal: federally qualified health center and rural health clinic services.

Requires Medi-Cal reimbursement to a federally qualified health center and a rural health center for two visits on the same day at the same location if after the first visit the patient suffers from illness or injury that requires additional treatment and diagnosis, or if the patient has a medical visit and a mental health or dental visit in the same day. *No action taken on the Assembly Floor.*

SB-154 (Pan) - Medi-Cal: restorative dental services.

Authorizes a Medi-Cal dental provider, who provides treatment of dental caries, to use and receive reimbursement for, silver diamine fluoride for the purposes of arresting dental caries, subject to specified conditions and benefit limitations. *Vetoed.*

SB-159 (Wiener) - HIV: preexposure and postexposure prophylaxis.

Authorizes a pharmacist to initiate and furnish HIV preexposure prophylaxis (PrEP) and postexposure prophylaxis (PEP), as specified. Prohibits health plans and insurers from requiring prior authorization or step therapy for PrEP or PEP, and requires coverage of pharmacist-prescribed PrEP and PEP. Prohibits health plans and health insurers from covering PrEP furnished by a pharmacist in excess of a 60-day supply to a single patient once every two years, unless the pharmacist has been directed otherwise by a prescriber. Allows Medi-Cal reimbursement for pharmacists prescribing PrEP and PEP. *Chapter 532, Statutes of 2019.*

SB-165 (Atkins) - Medical interpretation services.

Requires the Department of Health Care Services to establish a pilot project, as specified, to evaluate the provision of medical interpretation services for limited English proficient (LEP) beneficiaries concurrently with implementing a study that would identify requirements for medical interpretation services and recommend strategies for improving medical interpretation services for LEP beneficiaries. *Chapter 365, Statutes of 2019.*

SB-207 (Hurtado) - Medi-Cal: asthma preventive services.

Requires asthma preventive services to be a covered benefit, by July 1, 2020, for Medi-Cal beneficiaries with poorly controlled asthma. Requires an asthma preventive services provider to provide those services, as specified. Requires the Department of Health Care Services (DHCS) to develop and establish asthma preventive services. Establishes requirements for asthma preventive service providers, the curricula for these providers, and their supervising health care providers. Requires DHCS to approve at least two accrediting bodies with expertise in asthma to review and approve training curricula for asthma preventive service providers. *These provisions were amended out of the bill.*

SB-214 (Dodd) - Medi-Cal: California Community Transitions program.

Requires the Department of Health Care Services to provide services consistent with the Money Follows the Person Rebalancing Demonstration Program, until January 1, 2024, in order to facilitate transitioning individuals, who have resided less than 90 consecutive days in an inpatient facility, out of inpatient facilities. Contains an urgency clause that will make this bill effective upon enactment. *Chapter 300, Statutes of 2020.*

SB-289 (Archuleta) - Medi-Cal: home- and community-based services: military.

Requires an active duty military service member's dependent child or spouse on the waiting list for specified waiver programs to retain waiting list status when the military service member receives a military order to transfer to another state, as specified. Requires the dependent child or spouse, who was enrolled in a waiver program and returns to the state, to be reenrolled in the waiver program if there is an open slot or be placed first on the waiting list and if specified conditions are met. Authorizes a dependent child or spouse to apply for specified waiver programs when a military service member residing in another state receives a military order to move to this state. *Chapter 846, Statutes of 2019*

SB-361 (Mitchell) - Medi-Cal: Health Home Program.

Requires the Department of Health Care Services (DHCS), subject to an appropriation of funds in the annual Budget Act or other statute, to require Medi-Cal managed care plans administering the Health Homes Program (HHP) to take specific steps to increase program participation of individuals who are experiencing chronic homelessness, as specified. Deletes existing law that prohibits using General Fund money to fund implementation of HHP. Deletes DHCS's existing authority to terminate or revise HHP after the first eight quarters. *No action taken in the Assembly Appropriations Committee.*

SB-382 (Nielsen) - Health care coverage: state of emergency.

Requires a Medi-Cal managed care plan to ensure that an enrollee who remains in a general acute care hospital continues to receive medically necessary postacute care services at the general acute care hospital in a Governor declared state of emergency, when, as a result of the state of emergency, the plan is unable to locate a post-acute care facility within the plan's network for purposes of transferring the enrollee to the post-acute care facility, subject to specified conditions. Requires daily reimbursement until the transfer occurs to be at a minimum, the administrative day rate established by the Department of Health Care Services. *Vetoed.*

SB-406 (Pan) - Health care omnibus bill.

Contains a number of changes to law related to health care coverage, vital records, food safety, adult health, and recovery facilities. Authorizes the Department of Health Care Services to obtain criminal record clearances for certain administrative personnel prior to issuing a new license for an Adult Day Health Center or Home Health Agency serving only Program for All-Inclusive Access to Care for the Elderly patients. **Chapter 302, Statutes of 2020.**

SB-446 (Stone) - Medi-Cal: hypertension medication management services.

Requires hypertension medication management services provided by a pharmacist or an advanced practice pharmacist, as specified, to be a covered benefit under the Medi-Cal program. *Held on the Senate Appropriations Committee Suspense File.*

SB-503 (Pan) - Medi-Cal: managed care plan: subcontracts.

Requires Medi-Cal managed care plans (MCPs) to conduct, beginning January 1, 2022, annual medical audits of its subcontractors that perform medical review and decisionmaking functions, as specified, and to report the findings to the Department of Health Care Services (DHCS). Requires Medi-Cal MCPs to include in its grievances and appeals reports if a subcontractor is responsible for making a determination of medical necessity or delivering the services at issue. Requires Medi-Cal MCPs to bear ultimate responsibility for adherence and compliance with existing law and the DHCS contract, regardless if the Medi-Cal MCP subcontracts or delegates any of its duties. *Vetoed.*

SB-803 (Beall) - Mental health services: peer support specialist certification.

Requires the Department of Health Care Services (DHCS) to establish statewide requirements for a program for certifying peer support specialists in opt-in counties. Requires DHCS to seek any federal waivers to implement the certification program. Permits DHCS to implement, interpret, and make specific the certification program through available means, as specified.

Chapter 150, Statutes of 2020.

SB-1029 (Pan) - Medi-Cal: County of Sacramento.

Authorizes the Board of Supervisors of Sacramento County, by ordinance, to establish a health authority, a separate public entity. Authorizes the health authority, commencing January 1, 2024, to designate a number of Knox-Keene Health Care Service Plan Act of 1975 (Knox-Keene) licensed health plans for purposes of Medi-Cal managed care plan (MCP) procurement for Geographic Managed Care (GMC) as the only Medi-Cal MCPs authorized to operate within the county. Authorizes the county to seek and obtain Knox-Keene health plan licensure in order to serve as the county-sponsored local initiative (LI) contracted with DHCS, or to negotiate and enter into a contract with a Knox-Keene licensed plan to be the designated LI Medi-Cal MCP for the purpose of contracting with DHCS. Requires the Sacramento County enabling ordinance to specify the membership of the 20-member governing commission of the health authority, the qualifications for commission members, and the manner of appointment. *No action taken on the Assembly Floor.*

AB-50 (Kalra) - Medi-Cal: Assisted Living Waiver program.

Requires the Department of Health Care Services (DHCS) to submit a request for an amendment to the Assisted Living Waiver (ALW) program to increase the total number of participants to 18,500 by March 1, 2023, and to expand participation beyond the 15 existing counties. Requires the waiver amendment to reserve 60% of new enrollment for participants who have resided in an institutional setting for 20 consecutive days. Requires DHCS to establish a process so that any person on the ALW program waiting list each month is able to know their position on the waiting list and when they are likely to reach the top of the waiting list. *Held on the Senate Appropriations Committee Suspense File.*

AB-166 (Gabriel) - Medi-Cal: violence preventive services.

Requires the Department of Health Care Services (DHCS) to establish a violence intervention pilot program that is hospital-based or hospital-linked, by January 1, 2021. Requires the pilot program to provide violence preventive services that are rendered by a qualified violence prevention professional at a minimum of nine sites, as specified. Establishes requirements for qualified violence prevention professionals, the training for the professionals, and the entities contracting with or employing the professionals. Requires DHCS to issue a report to the Legislature on the implementation of the pilot program and demonstrated impact of services provided. *Vetoed.*

AB-318 (Chu) - Medi-Cal materials: readability.

Requires the Department of Health Care Services (DHCS) to field test all beneficiary materials that have been translated into threshold languages and Medi-Cal managed care plans to field test certain informing materials that have been translated into threshold languages. Defines field testing to mean conducting a focus group, or another form of review, involving native speakers of the applicable language or community-based organizations with an understanding of the linguistic needs of the targeted population. Requires DHCS to consult with stakeholders to identify at least ten beneficiary documents to be reviewed and revised for readability. *Vetoed.*

AB-512 (Ting) - Medi-Cal: specialty mental health services.

Codifies the requirement that county mental health plans prepare a cultural competence plan (CCP); expands the required elements to be included in the CCP; and requires counties to convene a committee to review and approve the CCP. Places requirements on the Department of Health Care Services and the external quality review organization to develop a protocol for monitoring performance on established disparities reduction targets and to include a report on statewide disparities reduction targets, as specified. *Vetoed.*

AB-515 (Mathis) - Medi-Cal: unrecovered payments: interest rate.

Authorizes the Department of Health Care Services (DHCS) to reduce the interest rate assessed against any unrecovered provider overpayment, as part of a repayment agreement between the provider and DHCS, as specified. *Vetoed.*

AB-526 (Petrie-Norris) - Medi-Cal: California Special Supplemental Nutrition Program for Women, Infants, and Children.

Requires the Department of Health Care Services, in collaboration with the California Special Supplemental Nutrition Program for Women, Infants, and Children (WIC Program), local WIC agencies, and other stakeholder to design, promulgate, and implement policies and procedures for an automated enrollment pathway. Requires the automated enrollment pathway to designate WIC and local WIC agencies as Express Lane agencies. Requires the automated enrollment pathway to provide a streamlined process to allow Medi-Cal eligible children and pregnant women enrolled in WIC to apply for Medi-Cal, and, for the contact information of WIC eligible Medi-Cal enrollees to be sent to WIC for purposes of WIC enrollment. *Held on the Senate Appropriations Committee Suspense File.*

AB-651 (Grayson) - Air ambulance services.

Limits a health plan enrollee or insured's payment for covered services provided by an air ambulance service provider that does not have a contract with the health plan or health insurer to no more than the same cost sharing that the enrollee or insured would pay for the same covered services received from a contracted air ambulance provider. Sunsets the supplemental Emergency Medical Air Transportation Act on July 1, 2022. *Chapter 537, Statutes of 2019.*

AB-678 (Flora) - Medi-Cal: podiatric services.

Aligns prior authorization and visit limitations for podiatric services provided by podiatrists in the Medi-Cal program with those that apply to physicians providing the same services. *Chapter 433, Statutes of 2019.*

AB-763 (Gray) - Medi-Cal specialty mental health services.

Requires the Department of Health Care Services, on or before March 31, 2020, to convene a stakeholder workgroup to identify all forms currently used by county mental health plans (MHPs) to determine eligibility and reimbursement for specialty mental health services provided under Early and Periodic Screening, Diagnostic, and Treatment (EPSTD) and to develop standard forms. Requires county MHPs and their providers, no later than July 1, 2021, to use the standard forms developed for intake, assessment, and treatment planning of Medi-Cal beneficiaries receiving specialty mental health services provided under EPSDT. *Held on the Senate Appropriations Committee Suspense File.*

AB-769 (Smith) - Federally qualified health centers and rural health clinics: licensed professional clinical counselor.

Requires licensed professional clinical counselors to be added to the list of health care 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 payment under the prospective payment system. *Held on the Senate Appropriations Committee Suspense File.*

AB-781 (Maienschein) - Medi-Cal: family respite care.

Authorizes pediatric day health care services, for purposes of Medi-Cal coverage, to be provided at any time of the day and on any day of week, so long as the total number of authorized hours is not exceeded. Authorizes pediatric day health services to be covered for up to 23 hours per calendar day. *Chapter 64, Statutes of 2019.*

AB-848 (Gray) - Medi-Cal: covered benefits: continuous glucose monitors.

Requires Medi-Cal to provide coverage for continuous glucose monitors and related supplies for use with those monitors for the treatment of diabetes mellitus when medically necessary, subject to utilization control. *Vetoed.*

AB-898 (Wicks) - Early and Periodic Screening Diagnosis, and Treatment services: behavioral health.

Requires the California Health and Human Services Agency to convene the Children's Behavioral Health Action Team to maximize Medi-Cal's investment in the social, emotional, and developmental health and well-being of children on Medi-Cal. Requires the Action Team to develop an interim and final report of findings and recommendations, as specified, and a plan to implement the recommendations of the report. *Held on the Senate Appropriations Committee Suspense File.*

AB-914 (Holden) - Medi-Cal: inmates: eligibility.

Requires, beginning October 1, 2020, Medi-Cal benefits for beneficiaries under 26 years of age who become inmates of a public institution to be suspended until the beneficiary is no longer an inmate or no longer otherwise eligible for Medi-Cal. Requires the Department of Health Care Services, in consultation with stakeholders, to develop and implement a simplified annual eligibility redetermination for those individuals. *Vetoed.*

AB-1004 (McCarty) - Developmental screening services.

Requires early and periodic screening, diagnostic, and treatment screening services to include developmental screening services for Medi-Cal beneficiaries ages zero to three, inclusive. Requires Medi-Cal managed care plans to ensure contracted providers administering developmental screenings comply with the Bright Futures Guidelines and Recommendations for Preventive Pediatric Health Care established by the American Academy of Pediatrics. Requires the external quality review organization, beginning on July 1, 2020, to annually review and report on Medi-Cal managed care plans' compliance with providing enrollees access to developmental screenings. *Chapter 387, Statutes of 2019.*

AB-1042 (Wood) - Medi-Cal: beneficiary maintenance needs: home upkeep allowances: transitional needs funds.

Expands the home upkeep allowance that is available to a Medi-Cal beneficiary residing in a long-term care (LTC) facility, who intends to leave the facility to return to their existing home. Establishes a transitional needs fund, for the purposes of meeting the transitional costs of establishing a home, to be available to a Medi-Cal beneficiary who is residing in an LTC, and does not have a home in the community, but intends to leave the facility to establish a home in the community. Requires the Department of Health Care Services, in implementing this bill, to conduct information and outreach activities, as specified. *Held on the Senate Appropriations Committee Suspense File.*

AB-1058 (Salas) - Medi-Cal: specialty mental health services and substance use disorder treatment.

Requires the Department of Health Care Services to engage in a stakeholder process to develop recommendations for addressing legal and administrative barriers to the delivery of integrated behavioral health services for Medi-Cal beneficiaries with co-occurring substance use disorders and mental health conditions who access services through the various Medi-Cal programs, and to report to the Legislature, as specified. *Held on the Senate Appropriations Committee Suspense File.*

AB-1088 (Wood) - Medi-Cal: eligibility.

Requires the Department of Health Care Services to seek a Medicaid state plan amendment or waiver to implement an income disregard to allow an individual, who is enrolled under the Medi-Cal aged & disabled program and becomes ineligible for Medi-Cal benefits because of the state's payment of the individual's Medicare Part B Premium, to remain eligible for Medi-Cal benefits if their income and resources otherwise meet all eligibility requirements. *Chapter 450, Statutes of 2019.*

AB-1122 (Irwin) - Health data: County of Ventura: super user pilot project.

Authorizes Ventura County to conduct a three-year "super user" pilot project, to predict which Medi-Cal beneficiaries are likely to become "super users." Requires specified state and county entities to report data to the county, upon request, for purposes of the pilot project. Requires the county to report results of the pilot project to the Legislature by July 1, 2023. Sunsets the provisions of this bill on July 1, 2023. *Held on the Senate Appropriations Committee Suspense File.*

AB-1128 (Petrie-Norris) - Program of All-Inclusive Care for the Elderly.

Transfers, from the Department of Public Health to the Department of Health Care Services, the oversight and regulation of a primary care clinic, adult day health center, and home health agency that exclusively serves patients of a Program for All-Inclusive Care for the Elderly center. *Chapter 821, Statutes of 2019.*

AB-1131 (Gloria) - Medi-Cal: comprehensive medication management.

Requires comprehensive medication management, as defined, to be a covered Medi-Cal benefit and to be offered to a beneficiary who is referred by a physician and meets certain conditions, as specified. *Held on the Senate Appropriations Committee Suspense File.*

AB-1175 (Wood) - Medi-Cal: mental health services.

Places various requirements on the Department of Health Care Services, county mental health plans, and Medi-Cal managed care health plans related to mental health (MH) services provided to Medi-Cal enrollees and information sharing between plans to improve Medi-Cal MH service delivery, and to provide additional information for service delivery improvements. *Vetoed.*

AB-1322 (Berman) - School-based health programs.

Establishes a School-Based Health Unit within the California Department of Education to administer and support school-based health programs, including school-based Medi-Cal services, operated by public schools. *Vetoed.*

AB-1327 (Petrie-Norris) - Medi-Cal: reimbursement rates.

Deletes the requirement for Medi-Cal fee-for-service clinical laboratory or laboratory services reimbursement not to exceed 80% of the lowest maximum allowance established by the federal Medicare Program for the same or similar services. *Vetoed.*

AB-1494 (Aguiar-Curry) - Medi-Cal: telehealth: state of emergency.

Prohibits face-to-face contact or a patient's physical presence on the premises of an enrolled community clinic, as specified, to be required for services provided to a Medi-Cal beneficiary during or immediately following a state of emergency. Requires the Department of Health Care Services, on or before July 1, 2020, to issue and publish on its website guidance to facilitate reimbursement for services provided by enrolled community clinics to a Medi-Cal beneficiary during or immediately following a state of emergency. *Chapter 829, Statutes of 2019.*

AB-1642 (Wood) - Medi-Cal: managed care plans.

Makes a number of changes to the Medi-Cal managed care time and distance standards and related reporting in order to improve the delivery and utilization of services in the Medi-Cal program. Deletes the Department of Health Care Services' (DHCS) existing administrative and financial sanction and contract termination authority of prepaid health plans; and instead, requires those authorities, as specified, to apply to any entity that contracts with DHCS for the delivery of health care services, including Medi-Cal managed care plans, mental health plans, Drug Medi-Cal services providers, and others. *Chapter 465, Statutes of 2019.*

AB-1705 (Bonta) - Medi-Cal: emergency medical transportation services.

Requires Department of Health Care Services, no sooner than July 1, 2021, to implement the Public Provider Intergovernmental Transfer Program (IGT program) for an eligible provider of emergency medical transport services to receive a supplemental Medi-Cal reimbursement in addition to the Medi-Cal rate of payment the provider would otherwise receive for those services. Requires the IGT program to replace the ground emergency medical transportation supplemental payment program, as specified. Exempts public ambulance providers from the quality assurance fee (QAF), data reporting, and the resulting Medi-Cal add on payments resulting from revenue from the QAF, if the IGT program is implemented. *Chapter 544, Statutes of 2019.*

AB-2100 (Wood) - Medi-Cal: pharmacy benefits.

Requires the Department of Health Care Services (DHCS), by January 1, 2021, to establish the Independent Prescription Drug Medical Review (IPDMR) System. Requires the director to adopt the determinations of the IPDMR and to issue a binding written decision to be implemented. Authorizes DHCS to provide a disease management payment to a pharmacy for costs and activities associated with dispensing specialty drugs. Requires DHCS to include specified pharmacy and outpatient prescription drug information in the Medi-Cal program assumptions and estimates. Requires DHCS to permit a beneficiary to continue a drug that is part of a prescribed therapy in effect for the beneficiary immediately before the date of receipt of coverage through DHCS for a minimum of 180 days, or until the prescribed therapy is no longer prescribed by the contracting prescriber. *Vetoed.*

AB-2164 (Robert Rivas) - Telehealth.

Allows Federally Qualified Health Centers (FQHC) and Rural Health Centers (RHC) to establish a patient who is located within the federal designated service area of the FQHC and RHC through synchronous interaction or asynchronous store and forward as of the date of service, under specified conditions. *Vetoed.*

AB-2276 (Reyes) - Childhood lead poisoning: screening and prevention.

Creates additional risk factors to be considered by health care providers evaluating children at risk of lead poisoning, and requires the Department of Public Health (DPH) to update its formula for allocating funds to local Childhood Lead Poisoning Prevention Programs. Requires Medi-Cal managed care plans (MCPs) to identify and provide a report to the Department of Health Care Services on all child enrollees six years of age and younger who have missed a required blood lead screening test and the age at which the required test was missed. Requires Medi-Cal MCPs to remind health care providers of children on Medi-Cal of the blood lead screening test and other requirements. *Chapter 216, Statutes of 2020.*

AB-2450 (Grayson) - Air ambulance services.

Extends the assessment of penalties of the Emergency Medical Air Transportation Act to July 1, 2021 and the sunset of its provisions to July 1, 2024; and contains an urgency clause that will make this bill effective upon enactment. *Chapter 52, Statutes of 2020*

Mental Health

SB-10 (Beall) - Mental health services: peer, parent, transition-age, and family support specialist certification.

Requires the Department of Health Care Services (DHCS) to establish a program for certifying peer support specialists. Requires DHCS to amend its Medicaid state plan and to seek any federal waivers or state plan amendments to implement the certification program. Permits DHCS to implement, interpret, and make specific the certification program through available means, as specified, until regulations are adopted. *Vetoed.*

SB-11 (Beall) - Health care coverage: mental health parity.

Requires the Department of Managed Health Care and the California Department of Insurance to report annually on all actions taken to enforce state and federal mental health parity laws, and prohibits prior authorization or step therapy requirements on any prescription medication approved by the federal Food and Drug Administration for the treatment of substance use disorders. *Held on the Senate Appropriations Committee Suspense File.*

SB-12 (Beall) - Mental health services: youth.

Establishes the Integrated Youth Mental Health Program (IYMHP). Requires, subject to an appropriation, the Mental Health Services Oversight and Accountability Commission to administer the IYMHP throughout the state made up of centers that provide integrated services, including for mental health and substance use disorders, to youth ages 12-25 and their families by providing funding to specified entities. *Held on the Assembly Appropriations Committee Suspense File.*

SB-163 (Portantino) – Health care coverage: pervasive developmental disorder or autism.

Revises and expands the definition of behavioral health treatment (BHT) and expands the provider qualifications to include more provider types that can provide BHT under the mandate that health plans and insurers cover BHT for pervasive developmental disorder or autism. Prohibits the setting, location, or time of treatment recommended by a qualified autism services provider from being used as the only reason to deny or reduce coverage for medically necessary services. Requires the setting to be consistent with the standard of care for BHT. *Vetoed.*

SB-331 (Hurtado) - Suicide-prevention: strategic plans.

Requires each county to create and implement a suicide prevention strategic plan with particular emphasis on youth, and specifies items that must be addressed in planning and implementation. Authorizes the use of Mental Health Services Act (MHSA) funds for the purpose and makes implementation contingent on an appropriation, or the county's use of MHSA funds. *Held on the Assembly Appropriations Committee Suspense File.*

SB-389 (Hertzberg) - Mental Health Services Act.

Permits Mental Health Services Act funds to be used to provide services to persons who are participating in a presentencing or postsentencing diversion program or who are on parole, probation, postrelease community supervision, or mandatory supervision. *Chapter 209, Statutes of 2019.*

SB-539 (Caballero) - Mental Health Services Act: workforce education and training funds.

Creates the Mental Health Services Workforce Education and Training Account, as specified, to be continuously appropriated to the Office of Statewide Health Planning and Development for the purpose of funding the five-year education and training development plan. *Held on the Senate Appropriations Committee Suspense File.*

SB-582 (Beall) - Youth mental health and substance use disorder services.

Requires the Mental Health Services Oversight and Accountability Commission to allocate at least one-half of Investment in Mental Health Wellness Act of 2013 triage grant program funds to local educational agency and mental health partnerships, as specified, to support prevention, early intervention, and direct services to children and youth, as specified. *Held on the Assembly Appropriations Committee Suspense File.*

SB-590 (Stone) - Mental health evaluations: gravely disabled due to impairment by chronic alcoholism.

Adds a person who is impaired by chronic alcoholism to the existing prepetition screening process in the Lanterman-Petris-Short Act, which permits any individual to request a county-designated entity to provide a comprehensive screening to determine if the person impaired by chronic alcoholism is a danger to self or others, or gravely disabled. *Held on the Assembly Appropriations Committee Suspense File.*

SB-604 (Bates) - Mental Health Services Act: centers of excellence.

Requires the Mental Health Services Oversight and Accountability Commission to establish, on or before January 1, 2021, with specified funding, an indeterminate number of centers of excellence to provide counties with technical assistance to implement best practices related to elements of the Mental Health Services Act, as specified. *Held on the Senate Appropriations Committee Suspense File.*

SB-640 (Moorlach) - Mental health services: gravely disabled persons.

Adds to the definition of “gravely disabled” for those who are being detained in a hospital that is not a county-designated facility, as specified, a condition in which the person is incapable of making informed decisions about, or providing for, one’s own basic personal needs, as specified. *Failed passage in the Senate Health Committee.*

SB-665 (Umberg) - Mental Health Services Fund: county jails.

Permits Mental Health Services Act funds to be used to provide services to persons incarcerated in county jails or subject to mandatory supervision, except for those convicted of a felony, as specified. Contains an urgency clause that would make this bill effective upon enactment. *Held on the Assembly Appropriations Committee Suspense File.*

SB-803 (Beall) - Mental health services: peer support specialist certification.

Requires the Department of Health Care Services (DHCS) to establish statewide requirements for a program for certifying peer support specialists in opt-in counties. Requires DHCS to seek any federal waivers to implement the certification program. Permits DHCS to implement, interpret, and make specific the certification program through available means, as specified. *Chapter 150, Statutes of 2020.*

SB-855 (Wiener) - Health coverage: mental health or substance abuse disorders.

Repeals California's mental health parity law and replaces it with a broader requirement on health plans and disability insurers to cover medically necessary treatment of mental health and substance use disorders under the same terms and conditions applied to other medical conditions; establishes new requirements for medically necessary care determinations and utilization review; and bans discretionary clauses in health plan contracts. *Chapter 151, Statutes of 2020.*

AB-43 (Gloria) - Mental health.

Requires the Mental Health Services Oversight and Accountability Commission, in consultation with specified entities, to develop a strategy for the collection, organization, and public reporting of information on mental health funding and services to support public understanding and awareness of the fiscal and mental health resources available, and outcomes achieved. Clarifies existing law related to Mental Health Services Act fund expenditure planning processes to ensure meaningful stakeholder involvement. *Held on the Senate Appropriations Committee Suspense File.*

AB-451 (Arambula) - Health care facilities: treatment of psychiatric emergency medical conditions.

Requires a psychiatric unit of a general acute care hospital, a psychiatric health facility, and an acute psychiatric hospital, to comply with provisions of law requiring emergency services to be provided regardless of a patient's ability to pay in order to treat a psychiatric emergency medical condition, as defined, regardless of whether the facility operates an emergency department, if specified requirements are met, including the facility having an available bed and appropriate facilities and qualified personnel available to provide the services. *No action taken on the Senate Floor.*

AB-480 (Salas) - Mental health: older adults.

Creates an Older Adult Mental Health (MH) Services Administrator (Administrator) within the Department of Health Care Services who is required to oversee MH services for older adults. Sets forth various responsibilities for the Administrator, including working in close coordination and collaboration with various state and local entities, as specified. *Held on the Senate Appropriations Committee Suspense File.*

AB-512 (Ting) - Medi-Cal: specialty mental health services.

Codifies the requirement that county mental health plans prepare a cultural competence plan (CCP); expands the required elements to be included in the CCP; and requires counties to convene a committee to review and approve the CCP. Places requirements on the Department of Health Care Services and the external quality review organization to develop a protocol for monitoring performance on established disparities reduction targets and to include a report on statewide disparities reduction targets, as specified. *Vetoed.*

AB-565 (Maienschein) - Public health workforce planning: loan forgiveness, loan repayment, and scholarship programs.

Expands the definition of “practice setting” for purposes of the Steven M. Thompson Physician Corps Loan Repayment Program (STLRP) to include a program or facility operated by, or contracted to, a county mental health plan. Requires 20% of the available STLRP scholarships to be awarded to applicants in certain practice specialties, as specified. *Held on the Senate Appropriations Committee Suspense File.*

AB-577 (Eggman) - Health care coverage: maternal mental health.

Permits completion of covered services, for up to 12 months from diagnosis or from the end of the pregnancy, whichever occurs later, for an individual who presents written documentation of being diagnosed with a maternal mental health condition to her health plan or health insurer when her provider is terminated, or when she is newly covered, if the provider agrees to the rate and terms and conditions of the health plan or policy. *Chapter 776, Statutes of 2019.*

AB-763 (Gray) - Medi-Cal specialty mental health services.

Requires the Department of Health Care Services, on or before March 31, 2020, to convene a stakeholder workgroup to identify all forms currently used by county mental health plans (MHPs) to determine eligibility and reimbursement for specialty mental health services provided under Early and Periodic Screening, Diagnostic, and Treatment (EPSTD) and to develop standard forms. Requires county MHPs and their providers, no later than July 1, 2021, to use the standard forms developed for intake, assessment, and treatment planning of Medi-Cal beneficiaries receiving specialty mental health services provided under EPSDT. *Held on the Senate Appropriations Committee Suspense File.*

AB-798 (Cervantes) - Maternal mental health.

Creates a pilot program, to be privately funded, in counties that elect to participate, including the County of Riverside, to increase the capacity of health care providers that serve pregnant and postpartum women up to one year after delivery to effectively prevent, identify, and manage postpartum depression and other mental health conditions. *Held on the Senate Appropriations Committee Suspense File.*

AB-826 (Reves) - Medi-Cal: specialty mental health services: foster youth.

Prohibits foster youth placed in congregate care settings outside of their county of original jurisdiction from being subject to presumptive transfer, unless a specified exception is invoked. Requires the Department of Health Care Services (DHCS) and Department of Social Services to collect specified data for inclusion in DHCS’s specialty mental health services performance dashboard, and to create standardized forms, as specified. *These provisions were amended out of the bill.*

AB-898 (Wicks) - Early and Periodic Screening Diagnosis, and Treatment services: behavioral health.

Requires the California Health and Human Services Agency to convene the Children's Behavioral Health Action Team to maximize Medi-Cal's investment in the social, emotional, and developmental health and well-being of children on Medi-Cal. Requires the Action Team to develop an interim and final report of findings and recommendations, as specified, and a plan to implement the recommendations of the report. *Held on the Senate Appropriations Committee Suspense File.*

AB-1058 (Salas) - Medi-Cal: specialty mental health services and substance use disorder treatment.

Requires the Department of Health Care Services to engage in a stakeholder process to develop recommendations for addressing legal and administrative barriers to the delivery of integrated behavioral health services for Medi-Cal beneficiaries with co-occurring substance use disorders and mental health conditions who access services through the various Medi-Cal programs, and to report to the Legislature, as specified. *Held on the Senate Appropriations Committee Suspense File.*

AB-1175 (Wood) - Medi-Cal: mental health services.

Places various requirements on the Department of Health Care Services, county mental health plans, and Medi-Cal managed care health plans related to mental health (MH) services provided to Medi-Cal enrollees and information sharing between plans to improve Medi-Cal MH service delivery, and to provide additional information for service delivery improvements. *Vetoed.*

AB-1275 (Santiago) - Mental health services: county pilot program.

Requires the Department of Health Care Services to establish a three-year pilot project whereby specified counties create outreach teams to provide services to those with a history of mental illness or substance use disorders who are unable to provide for needed medical care and who are homeless or at risk of experiencing homelessness. *No action taken on the Senate Floor.*

AB-1352 (Waldron) - Community mental health services: mental health boards.

Makes various clarifications in existing law regarding the role, make-up, and administration of local mental health (MH) boards. Requires a local mental or behavioral health agency to provide an annual report of written explanations to specified entities for any substantive recommendations made by a MH board that are not adopted, as specified. *Chapter 460, Statutes of 2019.*

AB-1443 (Maienschein) - Mental health: technical assistance centers.

Requires the Mental Health Services Oversight and Accountability Commission, subject to available funding, to establish one or more technical assistance centers to support counties in addressing mental health issues that are of statewide concern, and reducing specified negative outcomes of untreated mental illness. *Held on the Senate Appropriations Committee Suspense File.*

AB-1550 (Bonta) - Crisis stabilization units: psychiatric patients.

Permits a certified crisis stabilization unit designated by a county mental health plan to provide medically necessary crisis stabilization services to individuals beyond 24 hours if the individual needs inpatient psychiatric care or outpatient care and those services are not reasonably available, when certain requirements are met. *These provisions were amended out of the bill.*

AB-1976 (Eggman) - Mental health services: assisted outpatient treatment.

Implements the Assisted Outpatient Treatment (AOT) Demonstration Project Act of 2002, or “Laura’s Law,” statewide and permits a county or a group of counties to opt-out of implementing Laura’s Law, rather than permitting a county to opt-in to provide AOT services. Permits a group of counties to implement Laura’s Law in combination under specified circumstances. Repeals the existing sunset date for Laura’s Law. *Chapter 140, Statutes of 2020.*

AB-2112 (Ramos) - Suicide prevention.

Permits the Department of Public Health to establish an Office of Suicide Prevention with specified duties and responsibilities to address the increasing suicide rates in the state. *Chapter 142, Statutes of 2020.*

AB-2253 (Low) - Professional licensure.

Specifies that the five-year maximum limit on licensure waivers for persons practicing as a mental health professional in governmental settings while obtaining supervised experience begins from the start of employment in a position that includes qualifying experience towards licensure. *Chapter 279, Statutes of 2020.*

AB-2265 (Quirk-Silva) - Mental Health Services Act: use of funds for substance use disorder treatment.

Clarifies that specified Mental Health Services Act funds are permitted to be used to fund treatment for individuals with co-occurring mental health and substance use disorders. Requires counties to report information about the individuals treated pursuant to the provisions of this bill, as specified. *Chapter 144, Statutes of 2020.*

AB-2360 (Maienschein) - Telehealth: mental health.

Requires a health plan or health insurer to provide access to a telehealth consultation program by July 1, 2021 that provides providers who treat children and pregnant and postpartum persons with access to a mental health consultation during standard provider hours, which may include evenings and weekends. *Vetoed.*

AB-3242 (Irwin) - Mental health: involuntary commitment.

Authorizes the use of telehealth to examine, assess, or evaluate individuals for the purposes of involuntarily detention by specified entities. *Chapter 149, Statutes of 2020.*

Prescription Drugs

SB-852 (Pan) - Health care: prescription drugs.

Requires the California Health and Human Services Agency (CHHSA) to enter into partnerships resulting in the production or distribution of generic prescription drugs, with the intent that these drugs be made widely available to public and private purchasers, providers and suppliers, and pharmacies, as appropriate. Requires CHHSA to prioritize the selection of generic drugs that have the greatest impact on lowering drug costs to patients, increasing competition and addressing shortages in the prescription drug market, improving public health, or reducing the cost of prescription drugs to public and private purchasers. Requires the production of at least one form of insulin, provided that a viable pathway for manufacturing a more affordable form of insulin exists. Requires CHHSA to prioritize drugs for chronic and high-cost conditions, and to consider prioritizing those that can be delivered through mail order. *Chapter 207, Statutes of 2020.*

AB-824 (Wood) - Business: preserving access to affordable drugs.

Presumes a patent infringement claim settlement between a brand drug maker and a generic or biosimilar biologic drug maker to be anticompetitive and subject to a civil penalty, as specified, if the generic or biosimilar drug maker receives anything of value from the brand drug maker in exchange for limiting or foregoing entry into the market unless that presumption can be rebutted with specified evidence. *Chapter 531, Statutes of 2019.*

AB-1803 (Committee on Health) - Pharmacy: health care coverage: claims for prescription drugs sold for retail price.

Delays for one year a provision in existing pharmacy law that requires a pharmacy claim to be submitted to a health plan or health insurer in the same manner as if a customer purchased the prescription drug by paying the cost-sharing instead of the retail price of the prescription drug. *Chapter 114, Statutes of 2019.*

Public Health

SB-275 (Pan) - Health Care and Essential Workers: personal protective equipment.

Requires the Department of Public Health and the Office of Emergency Services to establish a personal protective equipment (PPE) stockpile, and requires certain health care employers, including hospitals and skilled nursing facilities, to maintain an inventory of PPE at least sufficient for 45 days of surge consumption, effective on January 1, 2023, or one year after regulations are adopted defining 45 days of surge consumption, whichever is later. *Note: these provisions were added in the Assembly, replacing the prior content, which was heard in the Senate Business and Professions Committee. Normally, this bill would have been referred to the Senate Health Committee when it was returned to the Senate for concurrence in Assembly amendments. However, due to the time limitations imposed on the Legislature as a result of the COVID-19 pandemic, a referral was not possible, so it was never heard in the Senate Health Committee. Chapter 301, Statutes of 2020.*

SB-312 (Leyva) - Toxic Fragrance Chemicals Right to Know Act of 2020.

Requires cosmetic manufacturers, commencing July 1, 2022, to disclose to the Department of Public Health Division of Environmental and Occupational Disease Control information related to cosmetic products that contain a fragrance ingredient or flavor ingredient that is included on a “designated list,” as defined, and a list of each fragrance ingredient and flavor ingredient in the cosmetic product. *Chapter 315, Statutes of 2020.*

SB-458 (Durazo) - Public health: pesticide: chlorpyrifos.

Makes it unlawful for a person to use a pesticide that contains the active ingredient chlorpyrifos in California. *Held on the Senate Appropriations Committee Suspense File.*

SB-574 (Leyva) - Toxic Fragrance Chemicals Right to Know Act of 2019.

Requires cosmetic manufacturers, commencing July 1, 2020, to disclose to the Department of Public Health Division of Environmental and Occupational Disease Control information related to cosmetic products that contain a fragrance ingredient or flavor ingredient that is included on a “designated list,” as defined, and a list of each fragrance ingredient and flavor ingredient in the cosmetic product. *Held on the Assembly Appropriations Committee Suspense File.*

SB-932 (Wiener) - Communicable diseases: COVID-19: data collection.

Requires any electronic tool used by local health officers for the purpose of reporting cases of communicable disease to the Department of Public Health to include the capacity to collect and report data relating to the sexual orientation and gender identity of individuals who are diagnosed with a reportable disease, and requires health care providers who are in attendance on a case of a reportable disease to report the patient’s sexual orientation and gender identity, if known. *Chapter 183, Statutes of 2020.*

SB-1285 (Nielsen) - Local health emergencies: navigable waters.

Permits a local health officer to declare a local health emergency in the jurisdiction whenever he or she determines that there is an immediate threat to the public health due to the presence of waste within the navigable waters of the state. *Hearing cancelled at the request of the author in the Assembly Health Committee.*

AB-35 (Kalra) - Worker safety: blood lead levels: reporting.

Requires the Department of Public Health to report to the Department of Industrial Relations' Division of Occupational Safety and Health (CalOSHA) any instance in which a worker's blood lead level is at or above 20 micrograms per deciliter ($\mu\text{g/dL}$). Requires Cal/OSHA to consider this report an allegation of a serious violation, subject to investigation requirements under specified existing law. *Chapter 710, Statutes of 2019.*

AB-262 (Gloria) - Local health officers: communicable diseases.

Requires local health officers (LHOs), during an outbreak of a communicable disease, or upon the imminent and proximate threat of a communicable disease outbreak or epidemic that threatens the public's health, to notify and update governmental entities within the LHO's jurisdiction, as specified, and make relevant information available to governmental entities, as specified. *Chapter 798, Statutes of 2019.*

AB-320 (Quirk) - Pest control: mosquito abatement.

Establishes the California Mosquito Surveillance and Research Program, administered by the University of California, Davis, and outlines the duties of the program. *Chapter 422, Statutes of 2019.*

AB-656 (Eduardo Garcia) - Office of Healthy and Safe Communities.

Creates the Office of Healthy and Safe Communities in the Department of Public Health to develop, implement, and monitor a California vision and plan for violence prevention, safety, and healing with goals aligned with funding to drive population-level results for decreasing exposure to violence among California's most vulnerable people and places. *Held on the Senate Appropriations Committee Suspense File.*

AB-762 (Quirk) - Public health: fish and shellfish: health advisories.

Requires a local health officer, upon issuance of a site-specific fish or shellfish health advisory by Office of Environmental Health Hazard Assessment, to conspicuously post health warnings at public access points to locations where contaminated fish or shellfish may be caught. *Chapter 538, Statutes of 2019.*

AB-3224 (Rodriguez) - Local health department workforce assessment.

Requires the Department of Public Health to contract with an appropriate and qualified entity to conduct an evaluation of the adequacy of local health department infrastructure, and to make recommendations for future staffing, workforce needs, and resources, in order to accurately and adequately fund local public health. *Held on the Senate Appropriations Committee Suspense File.*

Substance Use Disorders

SB-10 (Beall) - Mental health services: peer, parent, transition-age, and family support specialist certification.

Requires the Department of Health Care Services (DHCS) to establish a program for certifying peer support specialists. Requires DHCS to amend its Medicaid state plan and to seek any federal waivers or state plan amendments to implement the certification program. Permits DHCS to implement, interpret, and make specific the certification program through available means, as specified, until regulations are adopted. *Vetoed.*

SB-12 (Beall) - Mental health services: youth.

Establishes the Integrated Youth Mental Health Program (IYMHP). Requires, subject to an appropriation, the Mental Health Services Oversight and Accountability Commission to administer the IYMHP throughout the state made up of centers that provide integrated services, including for mental health and substance use disorders, to youth ages 12-25 and their families by providing funding to specified entities. *Held on the Assembly Appropriations Committee Suspense File.*

SB-325 (Hill) - Substance abuse recovery and treatment providers.

Requires the Department of Health Care Services, beginning January 1, 2021, to license an outpatient alcohol or other substance use disorder recovery or treatment services program or an individual practitioner that provides those services to the public, as specified. *Hearing cancelled at the request of the author in the Assembly Business and Professions Committee.*

SB-406 (Pan) - Health care omnibus bill.

Contains a number of changes to law related to health care coverage, vital records, food safety, adult health, and recovery facilities. Authorizes the Department of Health Care Services (DHCS) to suspend or revoke the certification of a residential treatment facility program or license of a facility for failing to disclose specified information related to recovery residences, requires DHCS take action against an unlicensed facility that is disclosed as a recovery residence, and authorizes DHCS to refer a substantiated complaint against a recovery residence to other enforcement entities as appropriate under state or federal law, as specified. *Chapter 302, Statutes of 2020.*

SB-445 (Portantino) - Alcohol and drug treatment: youth.

Requires the Department of Health Care Services (DHCS) to convene an expert panel to advise DHCS solely on the development of youth substance use disorder (SUD) treatment quality standards, as specified. Permits DHCS to adopt regulations to establish quality youth SUD treatment standards, as specified. *Vetoed.*

SB-486 (Bates) - Recovery residences.

Prohibits a commercially operated recovery residence from giving or receiving remuneration or anything of value for the referral of a person who is seeking alcoholism or drug abuse recovery and treatment services. Requires the Department of Health Care Services to impose a fine of \$50,000 for each violation. *Failed passage in the Senate Health Committee.*

SB-582 (Beall) - Youth mental health and substance use disorder services.

Requires the Mental Health Services Oversight and Accountability Commission to allocate at least one-half of Investment in Mental Health Wellness Act of 2013 triage grant program funds to local educational agency and mental health partnerships, as specified, to support prevention, early intervention, and direct services to children and youth, as specified. *Held on the Assembly Appropriations Committee Suspense File.*

SB-589 (Bates) - Alcohol and other drug abuse recovery services: advertising and marketing.

Prohibits specified entities in the alcohol and other drug abuse recovery services-related industry from making false or misleading statements, as specified, and from engaging in conduct involving the unlawful giving or receiving remuneration or anything of value for referring a person to recovery or treatment services, as specified. *Vetoed.*

SB-590 (Stone) - Mental health evaluations: gravely disabled due to impairment by chronic alcoholism.

Adds a person who is impaired by chronic alcoholism to the existing prepetition screening process in the Lanterman-Petris-Short Act, which permits any individual to request a county-designated entity to provide a comprehensive screening to determine if the person impaired by chronic alcoholism is a danger to self or others, or gravely disabled. *Held on the Assembly Appropriations Committee Suspense File.*

SB-803 (Beall) - Mental health services: peer support specialist certification.

Requires the Department of Health Care Services (DHCS) to establish statewide requirements for a program for certifying peer support specialists in opt-in counties. Requires DHCS to seek any federal waivers to implement the certification program. Permits DHCS to implement, interpret, and make specific the certification program through available means, as specified. *Chapter 150, Statutes of 2020.*

SB-855 (Wiener) - Health coverage: mental health or substance abuse disorders.

Repeals California's mental health parity law and replaces it with a broader requirement on health plans and disability insurers to cover medically necessary treatment of mental health and substance use disorders under the same terms and conditions applied to other medical conditions; establishes new requirements for medically necessary care determinations and utilization review; and bans discretionary clauses in health plan contracts. *Chapter 151, Statutes of 2020.*

AB-919 (Petrie-Norris) - Alcoholism and drug abuse recovery and treatment programs.

Adds various provisions to existing law that prohibits specified entities from giving or receiving remuneration or anything of value for the referral of a person who is seeking recovery or treatment services in order to prevent those specified entities from inducing an individual to receive recovery or treatment services by providing free housing, transportation, and other related services. Requires the establishment of an enforcement program, as specified. *Chapter 811, Statutes of 2019.*

AB-920 (Petrie-Norris) - Substance abuse recovery or treatment providers.

Requires the Department of Health Care Services, beginning January 1, 2021, to license an outpatient alcohol or other substance use disorder recovery or treatment services program that provides those services to the public, as specified. Makes other technical, nonsubstantive changes. *Vetoed.*

AB-1031 (Nazarian) - Youth Substance Use Disorder Treatment and Recovery Program Act of 2019.

Requires the Department of Health Care Services to establish regulations regarding community-based nonresidential and residential treatment and recovery programs to intervene and treat the problems of alcohol and drug use among youth under the age of 21, and to report annually to the Legislature utilization data relevant to services received by youth and their families. *Held on the Senate Appropriations Committee Suspense File.*

AB-1058 (Salas) - Medi-Cal: specialty mental health services and substance use disorder treatment.

Requires the Department of Health Care Services to engage in a stakeholder process to develop recommendations for addressing legal and administrative barriers to the delivery of integrated behavioral health services for Medi-Cal beneficiaries with co-occurring substance use disorders and mental health conditions who access services through the various Medi-Cal programs, and to report to the Legislature, as specified. *Held on the Senate Appropriations Committee Suspense File.*

AB-1085 (McCarty) - After school programs: substance use prevention: funding: cannabis revenue.

Encourages the After School Education and Safety, the 21st Century Community Learning Centers, and the 21st Century High School After School Safety and Enrichment for Teens programs to establish programs that are designed to educate about and prevent substance use disorders or to prevent harm from substance abuse. Requires the State Department of Health Care Services (DHCS) to enter into interagency agreements with the California Department of Education to administer those programs and allocate their funding. Specifically authorizes DHCS to consider selecting those programs for funding from the Control, Regulate and Tax Adult Use of Marijuana Act. *Vetoed.*

AB-1098 (O'Donnell) - Substance use disorders: youth programs.

Requires the Department of Health Care Services, in collaboration with specified state agencies, to convene a technical advisory committee to assist in establishing procedures for the implementation and administration of programs funded by cannabis tax funds aimed at providing substance abuse education and prevention programs targeted toward youth. Requires specified statewide assessments and reporting to the Legislature. Contains an urgency clause that would make this bill effective upon enactment. *Held on the Senate Appropriations Committee Suspense File.*

AB-1275 (Santiago) - Mental health services: county pilot program.

Requires the Department of Health Care Services to establish a three-year pilot project whereby specified counties create outreach teams to provide services to those with a history of mental illness or substance use disorders who are unable to provide for needed medical care and who are homeless or at risk of experiencing homelessness. *No action taken on the Senate Floor.*

AB-1779 (Daly) - Recovery residences.

Requires the Department of Health Care Services (DHCS) to adopt specified standards for recovery residences that receive state funding. Permits specified entities to report suspected activity to DHCS and to take specified action. *Held on the Senate Appropriations Committee Suspense File.*

AB-2265 (Quirk-Silva) - Mental Health Services Act: use of funds for substance use disorder treatment.

Clarifies that specified Mental Health Services Act funds are permitted to be used to fund treatment for individuals with co-occurring mental health and substance use disorders. Requires counties to report information about the individuals treated pursuant to the provisions of this bill, as specified. *Chapter 144, Statutes of 2020.*

Telehealth

AB-744 (Aguiar-Curry) - Health care coverage: telehealth.

Requires health coverage contracts after January 1, 2021, to specify that the health plan or insurer is required to cover and reimburse diagnosis, consultation, or treatment delivered through telehealth on the same basis and to the same extent that the plan or insurer is responsible for coverage and reimbursement for the same service provided through in-person diagnosis, consultation, or treatment. Updates other telehealth provisions in existing law. *Chapter 867, Statutes of 2019.*

AB-798 (Cervantes) - Maternal mental health.

Creates a pilot program, to be privately funded, in counties that elect to participate, including the County of Riverside, to increase the capacity of health care providers that serve pregnant and postpartum women up to one year after delivery to effectively prevent, identify, and manage postpartum depression and other mental health conditions. Permits the pilot program to include a provider-to-provider or patient-to-provider consultation program, to utilize telehealth or e-consult technologies, and to include specified elements. *Held on the Senate Appropriations Committee Suspense File.*

AB-1494 (Aguiar-Curry) - Medi-Cal: telehealth: state of emergency.

Prohibits face-to-face contact or a patient's physical presence on the premises of an enrolled community clinic, as specified, to be required for services provided to a Medi-Cal beneficiary during or immediately following a state of emergency. Requires the Department of Health Care Services, on or before July 1, 2020, to issue and publish on its website guidance to facilitate reimbursement for services provided by enrolled community clinics to a Medi-Cal beneficiary during or immediately following a state of emergency. *Chapter 829, Statutes of 2019.*

AB-2164 (Robert Rivas) - Telehealth.

Allows Federally Qualified Health Centers (FQHC) and Rural Health Centers (RHC) to establish a patient who is located within the federal designated service area of the FQHC and RHC through synchronous interaction or asynchronous store and forward as of the date of service, under specified conditions. *Vetoed.*

AB-2360 (Maienschein) - Telehealth: mental health.

Requires a health plan or health insurer to provide access to a telehealth consultation program by July 1, 2021 that provides providers who treat children and pregnant and postpartum persons with access to a mental health consultation during standard provider hours, which may include evenings and weekends. *Vetoed.*

AB-3242 (Irwin) - Mental health: involuntary commitment.

Authorizes the use of telehealth to examine, assess, or evaluate individuals for the purposes of involuntarily detention by specified entities. *Chapter 149, Statutes of 2020.*

Tobacco

SB-38 (Hill) - Flavored tobacco products.

Prohibits a tobacco retailer, or any of the tobacco retailer's agents or employees, from selling, offering for sale, or possessing with the intent to sell or offer for sale a flavored tobacco product.

These provisions were amended out of the bill.

SB-39 (Hill) - Tobacco products.

Requires a tobacco product to be delivered only in a container that is conspicuously labeled as being a tobacco product that requires the signature of a person 21 years of age or older. Requires, before completing a delivery, a specified entity to obtain the signature of a person 21 years of age or older upon delivering the product to the recipient's or purchaser's address, as specified.

Chapter 295, Statutes of 2019.

SB-424 (Jackson) - Tobacco products: single-use and multiuse components.

Prohibits a person or entity from selling, giving, or in any way furnishing to another person of any age in the state any single-use filters, plastic devices, electronic cigarettes, and vaporizer devices, as specified. Requires the manufacturer of these components to use materials eligible for recycling under state or local recycling programs to make any multiuse, reusable component, and to offer methods for recycling those components, as specified. *No action taken in the Assembly Governmental Organization Committee.*

SB-538 (Rubio) - Electronic cigarettes.

Requires a manufacturer of electronic cigarettes to submit specified information to the Department of Public Health (DPH) about electronic cigarettes sold in the state. Requires DPH to post the information on its website and to conduct a public outreach campaign to notify specified entities about the information on electronic cigarettes to address the increase in youth usage. Contains an urgency clause that would make this bill effective upon enactment. *Vetoed.*

SB-793 (Hill) - Flavored tobacco products.

Prohibits a tobacco retailer, or any of the tobacco retailer's agents or employees, from selling, offering for sale, or possessing with the intent to sell or offer for sale a flavored tobacco product or a tobacco product flavor enhancer, as specified. Exempts from this prohibition hookah, shisha tobacco, sales of premium cigars sold in cigar lounges where products are purchased and consumed only on the premises, and loose leaf tobacco or premium cigars, as specified. *Chapter 34, Statutes of 2020.*

Vital Records

SB-373 (Hertzberg) - County recorder: vital records: blockchain technology.

Permits a county recorder, until January 1, 2022, to issue a certified copy of a marriage record by means of blockchain technology, as defined. *No action taken in the Assembly Privacy and Consumer Protection Committee.*

SB-406 (Pan) - Health care omnibus bill.

Contains a number of changes to law related to health care coverage, vital records, food safety, adult health, and recovery facilities. Extends the authorization that allows the State Registrar, or local registrars and county recorders to accept electronic acknowledgement, as specified, until January 1, 2022. *Chapter 302, Statutes of 2020.*

SB-741 (Galgiani) - Change of gender.

Provides processes for petitioners changing their names and/or genders to update their marriage certificates and the birth certificates of their children within the framework under existing law for petitioners to update their own birth certificates. *Vetoed.*

AB-1152 (Holden) - Vital records.

Permits local registrars that exclusively serve cities to issue vital recorders older than two years if the record issued is the most accurate record on file with the State Registrar. *Chapter 188, Statutes of 2019.*

Women's Health/Reproductive Health

SB-24 (Leyva) - Public health: public university student health centers: abortion by medication techniques.

Requires student health centers (SHC) located on a campus within the University of California or California State University that provide primary health care services to students, after January 1, 2023, to offer abortion by medication techniques onsite. Requires the California Commission on the Status of Women and Girls to administer the College Student Health Center Sexual and Reproductive Health Preparation Fund, which is established by this bill for the purposes of providing private moneys to public university SHCs for medication abortion readiness. *Chapter 740, Statutes of 2019.*

SB-301 (Leyva) - Family planning services.

Requires the Department of Health Care Services, if there are any reductions in federal financial participation for services under the Family PACT program, to submit a plan to the Legislature to ensure the sustainability of those services. *Held on the Assembly Appropriations Committee Suspense File.*

SB-464 (Mitchell) - California Dignity in Pregnancy and Childbirth Act.

Requires hospitals and alternative birth centers to implement an implicit bias program for all health care providers involved in the perinatal care of patients within those facilities, including requiring these healthcare providers to complete initial basic training through the implicit bias program and a refresher course every two years thereafter. Requires the Department of Public Health (DPH) to track and publish data on maternal death and severe morbidity. Adds, to the list of written information a hospital is required to provide to each patient upon admission, information on how to file a discrimination complaint with DPH or the Medical Board of California if the patient feels they were discriminated against. *Chapter 533, Statutes of 2019.*

SB-600 (Portantino) – Health care coverage: fertility preservation.

States that standard fertility preservation services are covered as basic health services when a covered treatment may directly or indirectly cause iatrogenic infertility. *Chapter 853, Statutes of 2019.*

SJR-4 (Leyva) - Title X.

Urges the United States Department of Health and Human Services to rescind the new Title X regulations. *Chapter 115, Statutes of 2019.*

AB-577 (Eggman) - Health care coverage: maternal mental health.

Permits completion of covered services, for up to 12 months from diagnosis or from the end of the pregnancy, whichever occurs later, for an individual who presents written documentation of being diagnosed with a maternal mental health condition to her health plan or health insurer when her provider is terminated, or when she is newly covered, if the provider agrees to the rate and terms and conditions of the health plan or policy. *Chapter 776, Statutes of 2019.*

AB-767 (Wicks) – Health care coverage: in vitro fertilization.

Requires Covered California, in consultation with stakeholders, to develop options for the inclusion of in vitro fertilization coverage as part of, or as supplementary to, coverage currently offered through Covered California, and report the options to the Legislature on or before July 1, 2020. *These provisions were amended out of the bill.*

AB-798 (Cervantes) - Maternal mental health.

Creates a pilot program, to be privately funded, in counties that elect to participate, including the County of Riverside, to increase the capacity of health care providers that serve pregnant and postpartum women up to one year after delivery to effectively prevent, identify, and manage postpartum depression and other mental health conditions. *Held on the Senate Appropriations Committee Suspense File.*

AB-922 (Burke) - Reproductive health and research: oocyte procurement.

Repeals, until January 1, 2024, the prohibition on any payment in excess of the amount of reimbursement of direct expenses incurred as a result of an assisted oocyte production procedure to be made to any subject to encourage her to produce human eggs for purposes of medical research. Requires an individual providing human oocytes for research, until January 1, 2024, to be compensated for her time, discomfort, and inconvenience in the same manner as other research participants, as specified. *Chapter 864, Statutes of 2019.*

AB-1989 (Cristina Garcia) - Menstrual Products Right to Know Act of 2020.

Requires a package or box containing menstrual products manufactured on or after January 1, 2023, for sale or distribution in this state, to have printed on the label a plain and conspicuous list of all ingredients in the product. Prohibits menstrual products from being sold in the state unless the product and its manufacturer comply with this bill. **Chapter 272, Statutes of 2020.**

Workforce

SB-539 (Caballero) - Mental Health Services Act: workforce education and training funds.

Creates the Mental Health Services Workforce Education and Training Account, as specified, to be continuously appropriated to the Office of Statewide Health Planning and Development for the purpose of funding the five-year education and training development plan. *Held on the Senate Appropriations Committee Suspense File.*

SB-1110 (Hurtado) - Health care workforce development: California Medicine Scholars Program.

Requires the Office of Statewide Health Planning and Development (OSHPD) to establish the California Medicine Scholars Program, a five-year pilot program for a regional pipeline for community college students and medical schools. Requires a Regional Hub of Healthcare Opportunity, as defined, to select 200 students for the initial cohort, and requires OSHPD to contract with an outside entity for program management. *Held on the Senate Appropriations Committee Suspense File.*

AB-565 (Maienschein) - Public health workforce planning: loan forgiveness, loan repayment, and scholarship programs.

Expands the definition of “practice setting” for purposes of the Steven M. Thompson Physician Corps Loan Repayment Program (STLRP) to include a program or facility operated by, or contracted to, a county mental health plan. Requires 20% of the available STLRP scholarships to be awarded to applicants in certain practice specialties, as specified. *Held on the Senate Appropriations Committee Suspense File.*

AB-2253 (Low) - Professional licensure.

Specifies that the five-year maximum limit on licensure waivers for persons practicing as a mental health professional in governmental settings while obtaining supervised experience begins from the start of employment in a position that includes qualifying experience towards licensure. *Chapter 279, Statutes of 2020.*

AB-3224 (Rodriguez) - Local health department workforce assessment.

Requires the Department of Public Health to contract with an appropriate and qualified entity to conduct an evaluation of the adequacy of local health department infrastructure, and to make recommendations for future staffing, workforce needs, and resources, in order to accurately and adequately fund local public health. *Held on the Senate Appropriations Committee Suspense File.*

AB-3242 (Irwin) - Mental health: involuntary commitment.

Authorizes the use of telehealth to examine, assess, or evaluate individuals for the purposes of involuntarily detention by specified entities. *Chapter 149, Statutes of 2020.*

Miscellaneous

AB-384 (Chau) - Information privacy: digital health feedback systems.

Subjects individually identifiable health information, collected by an FDA-approved internet website, online service, or product that is used by an individual at the direction of a health care provider, to the protections of the Confidentiality of Medical Information Act. *Held on the Senate Appropriations Committee Suspense File.*

AB-713 (Mullin) - California Consumer Privacy Act of 2018.

Establishes new exemptions from the California Consumer Privacy Act regarding certain types of medical information, including exemptions for information that has been deidentified under specified federal requirements, and medical information collected as part of regulated research activities. *Chapter 172, Statutes of 2020.*

AB-785 (Bloom) - Gamete banks: donor information.

Makes clarifying and technical changes to existing law governing gamete banks relating to the collection and disclosure of donor identifying and medical information. *Chapter 539, Statutes of 2019.*

AB-851 (Cooper) - Drug masking products.

Prohibits a person from distributing, delivering, or selling or possessing with intent to distribute, deliver, or sell, a drug masking product, as defined. *Chapter 45, Statutes of 2019.*

AB-1161 (Calderon) - Recreational water use: wave basins.

States that specified regulations governing public swimming pools do not apply to wave basins, and instead establishes standards for the operation and maintenance of wave basins. Defines “wave basin” as an artificially constructed body of water within an impervious water containment structure incorporating the use of a mechanical device for generating waves with suitable characteristics for surfing. *Vetoed.*

AB-2218 (Santiago) - Transgender Wellness and Equity Fund.

Establishes Transgender Wellness and Equity Fund (Fund) in the State Treasury. Requires the Office of Health Equity in the Department of Public Health to administer the Fund for grants to create new or existing programs focused on coordinating trans-inclusive health care for individuals who identify as transgender, gender nonconforming, or intersex. *Chapter 181, Statutes of 2020.*

AB-2520 (Chiu) - Access to medical records.

Expands the ability of a patient or a patient’s representative to obtain a copy, at no charge, of the relevant portions of the patient’s medical records that are needed to support a claim or appeal regarding eligibility for certain benefit programs by permitting an employee of a nonprofit legal services entity representing the patient to have access to the patient’s records, adding additional benefit programs, and prohibiting a health care provider from charging a fee to a patient for filling out forms or providing information responsive to forms that support a claim or appeal for a public benefit program. *Chapter 101, Statutes of 2020.*

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