

## Health Care Legislation Affecting Low-Income Consumers as of May 8, 2014

Following is a summary of bills in the Legislature that affect the health of low-income Californians. Any bill with fiscal implications had to pass out of the policy committee by May 2. Those bills that passed out of their first house policy committees are now being heard by the Appropriations committees, which provide fiscal analysis. Any bill with significant costs is held in a Suspense file, and on May 23, both houses will announce which bills will come off that file and move to a vote of the full house. Bills must pass out of their house of origin by May 30. We have not included bills previously reported as chaptered.

### Access to Care

**[AB 1771](#) ([V. Manuel Pérez](#) D) **Telephonic and electronic patient management services.****

**Location:** Assembly Appropriations

**Summary:** This bill would require health plans or insurers to cover physician telephonic and electronic patient management services and to reimburse those services at the same level and amount as face-to-face patient encounters with similar complexity and time expenditure. This bill would not require those services be delivered electronically if the provider determines face-to-face contact is medically necessary.

**[SCA 5](#) ([Hernandez](#) D) **Public education: student recruitment and selection.****

**Location:** Senate Desk

**Summary:** This bill would allow educational institutions to consider race, sex, color, ethnicity, or national origin when making admissions decisions.

**WCLP Position:** Support

### Benefits

**[AB 1776](#) ([Nazarian](#) D) **Public social services: hearings.****

**Location:** Assembly Appropriations

**Summary:** Current law authorizes an applicant for, or recipient of, public social services who is dissatisfied with certain actions of the county welfare department to request a hearing from the state department administering the social services. This bill would authorize a recipient requesting a hearing to access communications and notices electronically, rather than receiving those communications by mail, in counties where that electronic communication is available.

## **Charity Care**

**[AB 1952](#) ([Pan D](#)) **Nonprofit hospitals: charity care.****

**Location:** Held on Assembly Appropriations Suspense file

**Summary:** This bill would require nonprofit hospitals to provide a level of charity care equal to at least 5 % of the nonprofit hospital's net patient revenue.

## **Dental**

**[AB 1174](#) ([Bocanegra D](#)) **Dental professionals: teledentistry under Medi-Cal.****

**Location:** Senate Business, Professions and Economic Development

**Summary:** This bill would authorize Medi-Cal payments for teledentistry services for Medi-Cal beneficiaries. Expands duties of registered dental assistants (RDAs), RDAs in extended functions (RDAEF), registered dental hygienists (RDH), and registered dental hygienists in alternative practice (RDHAP).

## **Exchange**

**[AB 1560](#) ([Gorell R](#)) **California Health Exchange: confidentiality of personal information.****

**Location:** Assembly Health

**Summary:** This bill would prohibit the Exchange from disclosing an individual's personal information to 3rd parties for determining eligibility for, or enrolling in health coverage unless the Exchange obtains prior written consent.

**WCLP Position:** Concerns

**[AB 1829](#) ([Conway R](#)) **California Health Benefit Exchange: employees and contractors.****

**Location:** Failed in Assembly Health

**Summary:** This bill would prohibit the Exchange from hiring or contracting with a person who has been convicted of certain crimes if the person's duties would involve facilitating enrollment in qualified health plans or would give the person access to the financial or medical information.

**WCLP Position:** Oppose

**[AB 1877](#) ([Cooley D](#)) **California Vision Care Access Council.****

**Location:** Held on Assembly Appropriations Suspense file

**Summary:** This bill would establish the California Vision Care Access Council - an Exchange marketplace for vision coverage plans governed by a 5-member Board. The Council would work with the Exchange to set up a direct link between the Web site of the Exchange and the Web site of the Council to connect consumers of the Exchange to the vision marketplace.

**[SB 972](#) ([Torres D](#)) **California Health Benefit Exchange: board: membership.****

**Location:** Senate Second Reading

**Summary:** This bill would add to the areas of required demonstrated and acknowledged expertise of Exchange board members.

**WCLP Position:** Neutral

**[SB 974](#) ([Anderson R](#)) **California Health Benefit Exchange.****

**Location:** Senate Appropriations

**Summary:** This bill would prohibit the Exchange, or any of its employees, agents, subcontractors, representatives, or partners from disclosing an individual's personal information to any other person or entity without explicit permission from the individual. The bill would also require the

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Exchange to report a disclosure of personal information to the individuals affected and the Legislature within 5 business days of the date the disclosure is discovered.

**WCLP Position:** Oppose Unless Amended

### **SB 1052 (Torres D) Health care coverage.**

**Location:** Senate Appropriations

**Summary:** This bill would require Exchange health plans to post their formularies online and would require the Exchange to create a search tool on its web site that allows potential enrollees to search for qualified health plans by a particular drug and by a therapeutic condition.

## **Health Care Reform**

### **AB 617 (Nazarian D) California Health Benefit Exchange: appeals.**

**Location:** 2 Year Bill

**Summary:** This will would establish a notice and appeals process for eligibility determinations related to the Exchange, MAGI Medi-Cal and AIM.

**WCLP Position:** Sponsor

### **AB 2088 (Hernández, Roger D) Health insurance: minimum value: large group market**

**Location:** Assembly Appropriations

**Summary:** This bill would require that health insurance with less than 60% minimum value or policies for specific diseases or hospital indemnity coverage only be sold to large employers as supplemental coverage and not as a substitute for coverage providing minimum essential coverage.

### **AB 2706 (Hernández, Roger D) Schools: health care coverage: enrollment assistance.**

**Location:** Assembly Appropriations

**Summary:** This bill would require public schools to include on enrollment forms include a section offering the option of being referred for information regarding health coverage options and enrollment assistance.

### **SB 1005 (Lara D) Health care coverage: immigration status.**

**Location:** Senate Appropriations

**Summary:** This is the Health4All bill which would give undocumented immigrants the same access they would have with satisfactory immigration status – Medi-Cal or a parallel Exchange

**WCLP Position:** Support

### **SB 1053 (Mitchell D) Health care coverage: contraceptives.**

**Location:** Senate Appropriations

**Summary:** This bill would require health plans and insurers to provide coverage for all FDA approved contraceptive drugs, devices, and products in each contraceptive category outlined by the FDA, as well as sterilization procedures and contraceptive education and counseling, and would prohibit a plan or insurer from engaging in unreasonable medical management, as defined, in providing that coverage.

## **Insurance Market Reforms**

### **AB 1507 (Logue R) Health care coverage.**

**Location:** Assembly Health

**Summary:** This bill would allow a nongrandfathered individual or small employer health benefit plan in effect on October 1, 2013 to be renewed until October 1, 2014, and to continue to be in force

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until December 31, 2014. The bill would exempt a nongrandfathered individual or small employer health benefit plan in effect on October 1, 2013, and that is renewed between January 1, 2014, and October, 1, 2014.

### **AB 2015 (Chau D) Health care coverage: discrimination.**

**Location:** Held on Assembly Appropriations Suspense file

**Summary:** This bill would prohibit a health care plan or insurer from discriminating against any health care provider who is acting within the scope of that provider's license or certification.

### **AB 2367 (Donnelly R) Personal income taxes: credits: health care coverage.**

**Location:** Assembly Revenue and Taxation

**Summary:** For people whose individual insurance was cancelled, this bill would allow a tax credit equal to the difference between the cost of the annual premium in an individual health care plan or insurance policy they are paying now and the premium the person would have paid for their cancelled individual policy.

**WCLP Position:** Oppose

### **AB 2400 (Ridley-Thomas D) Health care coverage: provider contracts.**

**Location:** Assembly Appropriations

**Summary:** This bill would prohibit a provider contract from containing a provision that would terminate the contract if the provider refuses to agree to a material change or any provision that requires a provider to accept or participate in any additional products or networks unless the health plan or insurer makes specified disclosures and gives the provider the right to negotiate, accept, or refuse participation in each product or product network

**WCLP Position:** Neutral

### **AB 2433 (Mansoor R) Health care coverage: catastrophic plans.**

**Location:** Assembly Health

**Summary:** This bill would deem people whose individual coverage was cancelled between December 2013 and March 2014 to have faced a hardship allowing them to buy a catastrophic plan.

**WCLP Position:** Oppose

### **SB 20 (Hernandez D) Individual health care coverage: enrollment periods.**

**Location:** Assembly Second Reading

**Summary:** This bill would change the 2015 open enrollment period for individual market health plans and Exchange policies to November 15, 2014, through February 15, 2015.

**WCLP Position:** Support

### **SB 959 (Hernandez D) Health care coverage.**

**Location:** Held on Senate Appropriations Suspense file

**Summary:** This bill would require a health plan or insurer to use a single risk pool that includes all enrollees, rather than segmenting a risk pool between policies regulated by the Department of Insurance and the Department of Managed Health Care. The bill would also make a variety of clarifying changes to the laws governing individual and small group health coverage.

### **SB 1182 (Leno D) Health care coverage: rate review.**

**Location:** Held on Senate Appropriations Suspense file

**Summary:** This bill would require large group health coverage purchasers to report to DMHC rate increases that are more than 5% of current rates 60 days prior to that rate increase going into effect.

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This bill would also require that plans annually disclose rate filings and specify claims in reporting categories and to provide those claims data to large group purchasers upon request.

### **[SB 1376](#) ([Gaines R](#)) Personal income taxes: credit: health care coverage.**

**Location:** Senate Governance and Finance

**Summary:** This bill would, for taxable years 2014 and 2015, allow a credit equal to 50% of the annual premium amount for an individual health plan or insurance policy if their policy was canceled between December 31, 2013, and December 31, 2014 and the individual was not eligible for tax credits in the Exchange.

**WCLP Position:** Oppose

### **[SB 1446](#) ([DeSaulnier D](#)) Health care coverage: small employer market.**

**Location:** Senate Appropriations

**Summary:** This bill would authorize a small employer health plan or insurer in effect on October 1, 2013, and renewed by December 31, 2013, that does not qualify as a grandfathered plan, to avoid compliance with specified provisions of the Affordable Care Act (ACA) and related state law, and, be renewed until October 2016, at which time compliance with the ACA and state law is required.

## **Language Access**

### **[AB 505](#) ([Nazarian D](#)) Medi-Cal: managed care: language assistance services.**

**Location:** 2 Year Bill

**Summary:** This bill would codify the Medi-Cal managed care thresholds for translated documents.

**WCLP Position:** Support

### **[AB 2325](#) ([John A. Pérez D](#)) Medi-Cal: CommuniCal.**

**Location:** Held on Assembly Appropriations Suspense file

**Summary:** This bill would require DHCS to establish the Medi-Cal Patient-Centered Communication program (CommuniCal), to be administered by a 3rd-party administrator, to provide and reimburse for certified medical interpretation services to Medi-Cal beneficiaries who are limited English proficient (LEP).

**WCLP Position:** Support

### **[SB 204](#) ([Corbett D](#)) Prescription drugs: labeling.**

**Location:** 2 Year Bill

**Summary:** This bill would require pharmacies to use translated instructions in non-English languages published on the Board of Pharmacy website.

**WCLP Position:** Support

## **Managed Care**

### **[AB 889](#) ([Frazier D](#)) Health care coverage: prescription drugs.**

**Location:** 2 Year Bill

**Summary:** This bill would impose specified requirements on health plans that restrict medications pursuant to step therapy or fail first protocol.

**WCLP Position:** Support

**[SB 1100](#) ([Hernandez D](#)) Continuity of care.**

**Location:** Held on Assembly Appropriations Suspense file

**Summary:** The bill would allow new enrollees in an individual market health plan or health insurance policy to continue to receive treatment for certain conditions from their existing provider if the existing provider is not in the new health plan or health insurance policy network.

**WCLP Position:** Support

**Medi-Cal**

**[AB 1792](#) ([Gomez D](#)) Public benefits: reports on employers.**

**Location:** Assembly Appropriations

**Summary:** This bill would require the Employment Development Department to compile a list of employers with employees who are enrolled in Medi-Cal, CalWORKs, CalFresh and WIC.

**WCLP Position:** Amendments

**[AB 1868](#) ([Gomez D](#)) Medi-Cal: optional benefits: podiatric medicine.**

**Location:** Held on Assembly Appropriations Suspense file

**Summary:** This bill would cover medical and surgical services provided by a doctor of podiatric medicine in Medi-Cal.

**[AB 1955](#) ([Pan D](#)) Pupil health: Healthy Kids, Healthy Minds Demonstration.**

**Location:** Assembly Appropriations

**Summary:** This bill would require the Superintendent Public Instruction to establish and implement the Healthy Kids, Healthy Minds Demonstration under which participating school sites would employ a school nurse and a mental health professional, and extend library hours.

**[AB 2025](#) ([Dickinson D](#)) Medi-Cal: program for aged and disabled persons.**

**Location:** Held on Assembly Appropriations Suspense file

**Summary:** Would increase the Medi-Cal Aged and Disabled program income threshold to 138% of the Federal Poverty Level by increasing the income disregards.

**WCLP Position:** Sponsor

**[AB 2051](#) ([Gonzalez D](#)) Medi-Cal: providers: affiliate primary care clinics.**

**Location:** Assembly Second Reading

**Summary:** This bill would require DHCS to process applications within 15 days of receiving an application from an affiliate primary care clinic applying to be a Medi-Cal provider, and deem applications approved on the 16th day after receiving the application.

**[SB 508](#) ([Hernandez D](#)) Medi-Cal: eligibility.**

**Location:** Assembly Health

**Summary:** This bill would codify the MAGI Medi-Cal income eligibility thresholds for parents and caretaker relatives, children, and pregnant women, eliminate the deprivation requirement for the Medically Needy Medi-Cal program, and make some technical changes to the Medi-program for former foster youth up to age 26.

**WCLP Position:** Support

**[SB 1002](#) ([De León D](#)) Medi-Cal: redetermination.**

**Location:** Held on Senate Appropriations Suspense file

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**Summary:** This bill would align Medi-Cal redetermination with the CalFresh certification period when a CalFresh application or recertification application is submitted.

**WCLP Position:** Sponsor

### **SB 1089 (Mitchell D) Medi-Cal: juvenile inmates.**

**Location:** Assembly Desk

**Summary:** Current law requires DHCS to develop a process to allow counties to receive available federal financial participation for acute inpatient hospital services and inpatient psychiatric services provided to juvenile inmates who are admitted as inpatients in a medical institution. This bill would provide that the process developed be implemented in only those counties that elect to provide the county's pro rata portion of the nonfederal share of the state's administrative costs.

### **SB 1124 (Hernandez D) Medi-Cal: estate recovery.**

**Location:** Held on Senate Appropriations Suspense file

**Summary:** This bill would limit recovery from the estate of a deceased Medi-Cal beneficiary, to only those costs that the state is required to recover under federal law.

**WCLP Position:** Sponsor

### **SB 1150 (Hueso D) Medi-Cal: federally qualified health centers and rural health clinics.**

**Location:** Held on Senate Appropriations Suspense file

**Summary:** This bill would allow Federally Qualified Health Centers and Rural Health Centers to bill for 2 visits in one day at a single location when either after the first visit the patient suffers illness or injury requiring additional diagnosis or treatment or the patient has a medical visit and another health visit or both.

**WCLP Position:** Support

### **SB 1212 (Walters R) Medi-Cal: moratoria on enrollment of providers.**

**Location:** Senate Appropriations

**Summary:** This bill would requires DHCS to exempt a clinical laboratory provider that has an existing relationship as a provider of benefits through a contract with a Medi-Cal managed care plan, if DHCS has a moratorium on the enrollment of clinical laboratories in Medi-Cal.

### **SB 1341 (Mitchell D) Medi-Cal: Statewide Automated Welfare System.**

**Location:** Senate Appropriations

**Summary:** This bill would require the county Statewide Automated Welfare System (SAWS) to be the system of record for Medi-Cal and to contain all Medi-Cal eligibility rules and case management functionality. The bill would also house the functionality for notices of action for Medi-Cal in SAWS.

**WCLP Position:** Support w Amends

### **SB 1457 (Evans D) Medical care: electronic treatment authorization requests.**

**Location:** Assembly Desk

**Summary:** This bill would require that Treatment Authorization Requests and Service Authorization Requests be submitted electronically to DHCS by July 1, 2015, or a subsequent date determined by DHCS and would also apply to California Children's Services and the Genetically Handicapped Persons Program. This bill would exempt dental TARs from adhering to this submission requirement.

## **Medi-Cal Managed Care**

**[AB 209](#) ([Pan D](#)) **Medi-Cal: managed care: quality, accessibility, and utilization.****

**Location:** 2 Year Bill

**Summary:** This bill would require DHCS to develop and implement a plan to monitor, evaluate, and improve the quality and accessibility of health care and dental services provided through Medi-Cal managed care, including holding quarterly public meetings and appointing an advisory committee to make recommendations to the department and the Legislature.

**WCLP Position:** Support

**[SB 964](#) ([Hernandez D](#)) **Health care service plans: timeliness standards: medical surveys.****

**Location:** Senate Appropriations

**Summary:** This bill would specify that a plan that provides services solely to Medi-Cal beneficiaries is not exempt from the DMHC medical survey with respect to quality management, utilization review, timely access, network adequacy, and any other requirements related to access and availability, except as specified. The bill would require a plan that provides services to Medi-Cal beneficiaries and a plan that provides services to enrollees in the Exchange be surveyed separately for those products.

**WCLP Position:** Support

**[SB 986](#) ([Hernandez D](#)) **Medi-Cal: managed care: exemption from plan enrollment.****

**Location:** Senate Appropriations

**Summary:** This bill would require that a Medi-Cal beneficiary who has received a medical exemption from enrollment in a Medi-Cal managed care plan and who is to receive or has received specified transplantations, including allogeneic bone marrow transplantation, receive an extension of the medical exemption for up to 12 months if the treating physician who provided or oversaw the transplantation or who is providing the follow-up care determines that it is medically necessary for the beneficiary to remain under the care of the treating physician.

## **Medical Debt**

**[AB 1558](#) ([Hernández, Roger D](#)) **California Health Data Organization.****

**Location:** Held on Assembly Appropriations Suspense file

**Summary:** This bill would create an All Payer Claims Database, requiring health plans and insurers to provide claims data to UC to explanations of benefits or explanations of review to that organization to the extent permitted by organize the data and design and a Web site that allows consumers to compare the prices paid by carriers for procedures.

**[AB 1917](#) ([Gordon D](#)) **Outpatient prescription drugs: cost sharing.****

**Location:** Assembly Appropriations

**Summary:** For health plans and insurers in the individual or small group markets, this bill would require that the cost sharing for a covered outpatient prescription drug for a supply of up to 30 days not exceed 1/24 of the annual out-of-pocket limit.

**WCLP Position:** Support

**[AB 2576](#) ([Harkey R](#)) **Income tax: health savings accounts.****

**Location:** Held on Assembly Revenue and Taxation Suspense file

**Summary:** This bill would allow a deduction in connection with health savings accounts in conformity with federal law.

**WCLP Position:** Oppose

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### [SB 1176](#) ([Steinberg D](#)) Health care coverage: cost sharing: tracking.

**Location:** Senate Appropriations

**Summary:** This bill would require health plans and insurers to notify a consumer when they have reached their maximum out-of-pocket limit.

**WCLP Position:** Support

### [SB 1256](#) ([Mitchell D](#)) Medical services: credit.

**Location:** Senate Appropriations

**Summary:** This bill would prohibit a healing arts licensee, or an employee or agent of that licensee, from arranging for or establishing credit extended by a 3rd party for a patient without first providing a written notice and a written treatment plan, and would prohibit that arrangement or establishment of credit with regard to a patient who has been administered or is under the influence of general anesthesia, conscious sedation, or nitrous oxide.

### [SB 1276](#) ([Hernandez D](#)) Health care: fair billing policies.

**Location:** Senate Third Reading

**Summary:** This bill would require hospitals to collect no more than 5% of a billed patients monthly income if that patient is below 350% FPL. This bill would allow consumers with high out of pocket costs to qualify for discount billing if their health plan or insurer negotiates a high bill on their behalf.

**WCLP Position:** Sponsor

## Mental Health

### [AB 2212](#) ([Gray D](#)) Medi-Cal: Early and Periodic Screening, Diagnosis, and Treatment (EPSDT).

**Location:** Held on Assembly Appropriations Suspense file

**Summary:** This bill would require DHCS to permit county mental health plans to contract with local educational agencies (LEAs) to provide services for Medi-Cal eligible pupils under EPSDT. The bill would also require the department to permit a county mental health plan to obtain FFP on behalf of nonpublic agencies that contract with an LEA to provide EPSDT services if the LEA does not have a contract with the county mental health plan. The bill would also require the department to examine methodologies for increasing LEA participation in the Medi-Cal program so that schools can meet the educationally related health care needs of their pupils.

## Prescription Drugs

### [AB 1814](#) ([Waldron R](#)) Prescriber Prevails Act.

**Location:** Assembly Appropriations

**Summary:** This bill would establish that a prescriber's reasonable professional judgment prevails over the policies and utilization controls of Medi-Cal, including the utilization controls of a Medi-Cal managed care plan, in prescribing a pharmaceutical from specified therapeutic drug classes.

### [AB 2418](#) ([Bonilla D](#)) Health care coverage: prescription drugs: refills.

**Location:** Assembly Appropriations

**Summary:** This bill would require a health care plan contract or health insurance policy issued, amended, or renewed on or after January 1, 2015, that provides prescription drug benefits and

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imposes a mandatory mail order restriction for all or some covered prescription drugs to establish a process allowing enrollees and insureds to opt out of the restriction.

### Provider Reimbursement

#### [AB 900](#) ([Alejo](#) D) **Medi-Cal: reimbursement: distinct part nursing facilities.**

**Location:** On Senate Appropriations Suspense file

**Summary:** This bill would require that the 10% Medi-Cal rate reduction established per AB 97 not apply to skilled nursing facilities that are a distinct part of a general acute care hospital, for dates of service on or after July 1, 2013 , subject to necessary federal approvals.

**WCLP Position:** Support

#### [AB 1124](#) ([Muratsuchi](#) D) **Medi-Cal: reimbursement rates.**

**Location:** Chaptered

**Summary:** This bill would exempt laboratory providers from certain payment reductions until July 1, 2015, and would require DHCS to adopt emergency regulations by January 1, 2015.

#### [AB 1805](#) ([Skinner](#) D) **Medi-Cal: reimbursement: provider payments.**

**Location:** Assembly Appropriations

**Summary:** This bill would prohibit the application Medi-Cal provider rate reductions for dates of service on or after June 1, 2011.

**WCLP Position:** Support

### Providers

#### [SB 1315](#) ([Monning](#) D) **Medi-Cal: providers.**

**Location:** Senate Appropriations

**Summary:** This bill would provide DHCS a better way to enforce a corrective action plan to deactivate a provider's number against a Medi-Cal FFS provider who fails to remediate deficiencies and is subject to existing temporary suspension and deactivation authority.

#### [SB 1340](#) ([Hernandez](#) D) **Health care coverage: provider contracts.**

**Location:** Assembly Desk

**Summary:** This bill would prohibit a contract between a plan or insurer and a provider or supplier from containing a provision that restricts the ability of the plan or insurer to furnish information to consumers or purchasers concerning the cost range of a procedure or full course of treatment or the quality of services performed by the provider or supplier. The bill would require a plan or insurer to provide a provider or supplier with at least 30 days to review the methodology and data used and would make related, conforming changes.

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