

Patient Protection and Affordable Care Act: California's ACA Bills

California Implementation Activities

- Creates the California Health Benefit Exchange:
 - *AB 1602 (John A. Pérez) and SB 900 (Alquist), Chapters 655 and 659, Statutes of 2010*
- Establishes health plan and health insurance premium rate reviews:
 - *SB 1163 (Leno), Chapter 661, Statutes of 2010*
- Extends health plan contract and insurance policies to dependents to age 26:
 - *SB 1088 (Price), Chapter 660, Statutes of 2010*
- Prohibits preexisting condition exclusions on children:
 - *AB 2244 (Feuer), Chapter 656, Statutes of 2010*
- Requires health plan contract and health insurance policy coverage of preventive services without cost sharing:
 - *AB 2345 (De La Torre), Chapter 657, Statutes of 2010*
- Prohibits health plan and health insurance cancellations unless there is fraud or intentional misrepresentation:
 - *AB 2570 (De La Torre), Chapter 658, Statutes of 2010*
- Establishes the federal Pre-existing Condition Insurance Plan in California:
 - *AB 1887 (Villines) and SB 227 (Alquist), Chapters 31 and 32 Statutes of 2010*
- Enhances the Office of Patient Advocate to serve as a consumer assistance portal for health reform:
 - *AB 922 (Monning), Chapter 522, Statutes of 2011*
- Provides enforcement authority for the California Department of Insurance and the Department of Managed Health Care related to the medical loss ratios, annual and lifetime limits associated with the Patient Protection and Affordable Care Act:
 - *SB 51 (Alquist), Chapter 644, Statutes of 2011*
- Implements a Medi-Cal waiver to establish early expansion of Medi-Cal through creation of the Low Income Health Program:
 - *2011 Budget and AB 342 (John A. Perez), Chapter 723, Statutes of 2010*
- Revises and simplifies applications for state health subsidy programs:
 - *AB 1296 (Bonilla), Chapter 641, Statutes of 2011*

2012

- Establishes Essential Health Benefits benchmark in California:
 - *AB 1453 (Monning) and SB 951 (Ed Hernandez), Chapters 854 and 866, Statutes of 2012*
- Implements small group health insurance market reforms:
 - *AB 1083 (Monning), Chapter 852, Statutes of 2012*
- Prohibits false representation of the California Health Benefit Exchange:
 - *AB 1761 (John A. Pérez), Chapter 876, Statutes of 2012*
- Establishes notification requirements about the availability of reduced-cost and no cost health care coverage options to certain individuals:
 - *AB 792 (Bonilla), Chapter 851, Statutes of 2012*

2013

- Implements provisions of the ACA regarding Medi-Cal eligibility and program simplification including the use of Modified Adjusted Gross Income and expansion of eligibility. AB 1X 1 implements most of the eligibility provisions and SB 1X 1 implements the benefits provisions and extends coverage to former foster care youth up to age 26:
 - *AB 1X 1 (John A. Perez), and SB 1X 1 (Ed Hernandez and Steinberg), Chapters 3 and 4, Statutes of 2013-14 First Extraordinary Session*
- Insurance market reform: Implements the ACA insurance provisions related to health insurance regulated under the Insurance Code and the Health and Safety Code, respectively:
 - *AB 1X 2 (Pan), and SB 1X 2 (Ed Hernandez), Chapters 1 and 2, Statutes of 2013-14 First Extraordinary Session*
- Low-cost health coverage option: Requires Covered California to establish a “bridge” plan product by contracting with Medi-Cal managed care plans for individuals losing Medi-Cal coverage, the parents of Medi-Cal children, and individuals with incomes below 200% of the federal poverty level:
 - *SB 1X 3 (Ed Hernandez), Chapter 5, Statutes of 2013-14 First Extraordinary Session*
- Medi-Cal clean up:
 - *AB 50 (Pan) and SB 28 (Ed Hernandez and Steinberg) – both Enrolled to the Governor*
- Exchange appeals:
 - *AB 617 (Nazarian) – pending hearing in the Senate Appropriations Committee*
- Insurance market clean up:
 - *AB 1180 (Pan) – Enrolled to the Governor*
- Exchange finger printing:
 - *SB 509 (DeSaulnier and Emmerson) and AB 1428 (Conway) – both Enrolled to the Governor*
- Health insurance cost sharing:
 - *SB 639 (Ed Hernandez) – Enrolled to the Governor*
- Requires the Department of Health Care Services to provide the Exchange, or its designee, information about parents or caretakers of children enrolled in Healthy Families or targeted low-income Medi-Cal program in order to conduct outreach to potentially eligible individuals:
 - *SB 800 (Lara) – Enrolled to the Governor*