



Assembly Committee on Health

2017

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01 Alcohol/Drug Programs

Chaptered

AB-395 (Bocanegra) Substance abuse treatment providers.

Modifies the specific controlled substances authorized for use in narcotic replacement therapy to include medication-assisted treatment and replaces references to controlled substances with references to medications; conforms the number of patients a physician can treat under office-based narcotic treatment program to federal law; and conforms billing requirements for Drug Medi-Cal substance use disorder services to current Medi-Cal billing requirements. Chapter 223, Statutes of 2017.

Vetoed

AB-532 (Waldron) Drug courts: drug and alcohol assistance.

Would have authorized a court to develop a program to offer mental health and addiction treatment services, as defined, to women charged with specified non-felony complaints and would have sunset the provisions of this bill on January 1, 2020. Vetoed

Veto Message: "This bill authorizes a court to collaborate with outside organizations to develop a program to offer mental health and addiction treatment services to women charged with specified nonfelony complaints. The programs to assist women in jail contemplated by this bill are laudatory, but the judicial branch already has full authority to develop collaborative courts which address these kinds of treatment services."

California Health Benefits Review Program: CHBRP

02

Chaptered

AB-1074 (Maienschein) Health care coverage: pervasive developmental disorder or autism.

Makes changes to the requirements for qualified autism service (QAS) providers and QAS paraprofessionals for purposes of behavioral health therapy coverage by health care service plans and health insurers. Chapter 385, Statutes of 2017.

AB-1316 (Quirk, Cristina Garcia) Public health: childhood lead poisoning: prevention.

Revises the existing standard of care for children determined to be at risk for lead poisoning and requires all children to be screened for blood lead levels. Chapter 507, Statutes of 2017.

Vetoed

AB-391 (Chiu, Gomez) Medi-Cal: asthma preventive services.

Would have established the Asthma Preventive Services Program Act of 2017 and provided coverage of asthma preventive services under the Medi-Cal program. Vetoed

Veto Message: "I am returning Assembly Bills 391 and 447 without my signature. These bills expand benefits in the Medi-Cal program, one for asthma preventative services and one for continuous glucose monitor medical devices. The Department of Health Care Services, however, has considerable administrative authority to make changes to benefits based upon new medical evidence and clinical guidelines. Therefore, these statutory changes are unnecessary."

AB-447 (Gray) Medi-Cal: covered benefits: continuous glucose monitors.

Would have provided Medi-Cal coverage for continuous glucose monitors when medically necessary for the management and treatment of diabetes mellitus, subject to utilization controls, and to the extent that federal financial participation is available and any necessary federal approvals have been obtained. Vetoed

Veto Message: "I am returning Assembly Bills 391 and 447 without my signature. These bills expand benefits in the Medi-Cal program, one for asthma preventative services and one for continuous glucose monitor medical devices. The Department of Health Care Services, however, has considerable administrative authority to make changes to benefits based upon new medical evidence and clinical guidelines. Therefore, these statutory changes are unnecessary."

Children's Health

03

Chaptered

AB-340 (Arambula) Early and Periodic Screening, Diagnosis, and Treatment Program: trauma screening.

Requires the Department of Health Care Services (DHCS), in consultation with the Department of Social Services, county mental health, managed care plan, behavioral health, and child welfare experts, and stakeholders, to convene an advisory working group (Workgroup) to update, amend, or develop tools and protocols for the screening of children for trauma, within the Early and Periodic Screening, Diagnosis, and Treatment benefit by May 1, 2018; requires the Workgroup to report its findings and recommendations to DHCS and to the Legislature no later than May 1, 2019; and disband the Workgroup on December 31, 2019. Chapter 700, Statutes of 2017.

ACR-8 (Jones-Sawyer) Adverse childhood experiences: post-traumatic "street" disorder.

Recognizes adverse childhood experiences, also known as post-traumatic "street" disorder in communities of color, having lasting negative outcomes to both physical and mental health with growing implications for our state. Resolution Chapter 139, Statutes of 2017.

ACR-108 (Bonta) "Food as Medicine" programs.

Encourages local jurisdictions across California to create Food as Medicine programs to address the obesity and diabetes epidemics. Includes findings related to the incidence and societal cost of diabetes and obesity and the value of healthy eating in preventing them. Resolution Chapter 166, Statutes of 2017.

ACR-113 (Rubio) Breastfeeding Awareness Month of 2017.

Recognizes August 2017 as the Breastfeeding Awareness Month of 2017 in California and encourages Californians to work together to support breastfeeding. Resolution Chapter 167, Statutes of 2017.

SB-220 (Pan) Medi-Cal Children's Health Advisory Panel.

Limits the terms of members of the Medi-Cal Children's Health Advisory Panel (MCHAP) in the Department of Health Care Services (DHCS), permits DHCS greater flexibility in appointing three parent positions to MCHAP, and permits a MCHAP member to be removed by DHCS, in consultation with the Chair, if the removal is determined to be necessary by the Director of DHCS. Chapter 280, Statutes of 2017.

SB-379 (Atkins) Pupil health: oral health assessment.

Modifies the current oral health assessment requirement for pupils in public school, including: 1) authorizing schools that offer schoolsite-based oral health assessments to use a passive consent process; 2) adding requirements to reports submitted by school districts; and, 3) encouraging all school districts to report to a system designated by the state Dental Director for collection of the required reports. Chapter 772, Statutes of 2017.

SB-557 (Hernandez) Food donations: schools.

Requires the California Department of Education to update itsguidance on the donation of leftover food to allow a public school cafeteria to donate food to a food bank or other nonprofit charitable organization for distribution to persons free of charge and permits local education agencies to include whole uncut produce, unopened bags of sliced fruit, and unopened containers of milk, as specified, to be made available to food service staff, pupils, and faculty to minimize waste. Chapter 285, Statutes of 2017.

04 Chronic Health / Cancer

Chaptered

AB-1386 (Waldron) Genomic cancer testing pilot program.

Requires the Department of Health Care Services to include information relating to breast cancer susceptibility gene mutations in the next revision of a brochure that is provided to cancer patients. Chapter 693, Statutes of 2017.

ACR-108 (Bonta) "Food as Medicine" programs.

Encourages local jurisdictions across California to create Food as Medicine programs to address the obesity and diabetes epidemics. Includes findings related to the incidence and societal cost of diabetes and obesity and the value of healthy eating in preventing them. Resolution Chapter 166, Statutes of 2017.

SB-239 (Wiener) Infectious and communicable diseases: HIV and AIDS: criminal penalties.

Modifies criminal penalties related to the intentional transmission of the human immunodeficiency virus to another person and specifies a higher punishment than which applies to other communicable diseases. Makes reckless exposure of another to a communicable disease punishable as a misdemeanor. Chapter 537, Statutes of 2017.

SB-294 (Hernandez) Hospices: palliative care.

Authorizes a licensed hospice, until January 1, 2022, to provide interdisciplinary hospice services to a patient with a serious illness authorized in the Hospice Licensure Act of 1990 as determined by the physician and surgeon in charge of the care of the patient, including if the patient is continuing to receive curative treatment from other licensed health care professionals. Chapter 515, Statutes of 2017.

SB-512 (Hernandez) Health care practitioners: stem cell therapy.

Requires health care practitioners who perform stem cell therapy that is not United States Food and Drug Administration (FDA)-approved to provide patients with a notice that the therapy is not FDA-approved. Requires the Medical Board of California to report complaints received and disciplinary actions taken against licensed physicians for administering non-FDA approved stem cell therapies. Chapter 428, Statutes of 2017.

Vetoed

AB-1279 (Salas) Valley fever.

Would have required the Department of Public Health to develop and implement public outreach programs to educate the public about coccidioidomycosis, commonly referred to as valley fever. Vetoed

Veto Message: "This bill requires the Department of Public Health to develop outreach programs to educate the public about Valley Fever. The department already provides fact sheets, brochures, posters and other educational materials to raise awareness of this disease.

Expanding this program would necessitate additional resources which should be considered along with other funding requests as part of the budget process."

SB-643 (Pan) The Holden-Moscone-Garamendi Genetically Handicapped Persons Program: Duchenne muscular dystrophy.

Would have added Duchenne muscular dystrophy to the list of medical conditions eligible for the Genetically Handicapped Persons Program. Vetoed

Veto Message: "This bill adds Duchenne muscular dystrophy to the list of medical conditions eligible for health care coverage under the Genetically Handicapped Persons Program. California's implementation of the Affordable Care Act has expanded subsidized health care coverage provided by Medi-Cal and Covered California so coverage is available to adults with serious genetic diseases such as Duchenne. As such, there is no longer a need to expand specialized coverage programs."

05 Covered CA (Exchange)

Chaptered

AB-156 (Wood) Individual market: single risk pool: index rate.

Deletes references to the federal transitional reinsurance program in the individual and small group market, and revises the enrollment periods for individual health benefit plans offered outside of the California Health Benefit Exchange (Exchange) and through the Exchange for policy years beginning on or after 2019. Chapter 468, Statutes of 2017.

06 Denti-Cal / Oral Health

Chaptered

SB-379 (Atkins) Pupil health: oral health assessment.

Modifies the current oral health assessment requirement for pupils in public school, including: 1) authorizing schools that offer schoolsite-based oral health assessments to use a passive consent process; 2) adding requirements to reports submitted by school districts; and, 3) encouraging all school districts to report to a system designated by the state Dental Director for collection of the required reports. Chapter 772, Statutes of 2017.

07 Emergency Medical Services

Chaptered

AB-545 (Bigelow) Joint powers agreements: County of El Dorado: nonprofit hospitals.

Authorizes a private, nonprofit hospital in the County of El Dorado to enter into a joint powers agreement with a public agency. Chapter 124, Statutes of 2017.

AB-1119 (Limón) Developmental and mental health services: information and records: confidentiality.

Authorizes the disclosure of patient information and records of individuals with developmental and mental health disabilities who are voluntarily or involuntarily detained, including those detained under the Lanterman-Petris-Short Act, during the provision of emergency services and care, as defined, including the communication of patient information between a physician and surgeon, licensed psychologist, social worker with a master's degree in social work, licensed marriage and family therapist, licensed professional clinical counselor, nurse, emergency medical personnel at the scene of an emergency or in an emergency medical transport vehicle, or other professional person or emergency medical personnel at a health facility, as specified. Makes other technical and non-substantive changes. Chapter 323, Statutes of 2017.

SB-432 (Pan) Emergency medical services.

Revises the required communicable disease exposure notification procedure for emergency medical care providers by requiring a health facility to immediately notify a prehospital emergency medical care provider upon determining that a person who received emergency medical services is diagnosed with a reportable communicable disease or condition, in addition to the existing requirement that provides notification to the county health officer, who in turn notifies the emergency medical care provider. Chapter 426, Statutes of 2017.

Vetoed

SB-687 (Skinner) Health facilities: emergency centers: Attorney General.

Would have required a nonprofit corporation that operates a health facility that includes a licensed emergency center, regardless of whether it is currently operating or providing health care services or has a suspended license, to obtain written consent from the Attorney General prior to a planned elimination or reduction in the level of emergency medical services provided. Vetoed

Veto Message: "This bill requires a nonprofit hospital to receive approval from the Attorney General prior to reducing or eliminating services in its emergency department. A hospital's decision to reduce or eliminate emergency services poses real challenges for a community. This is why current law requires public notice prior to a hospital taking such an action. Removing a hospital's authority to determine emergency service needs, however, will not solve the underlying financial issues that typically force these decisions. An Attorney General decision to prohibit a reduction or elimination of these services may hasten the reduction of other services or closure of the entire hospital."

Food Safety / Nutrition

08

Chaptered

AB-954 (Chiu) Food labeling: guidelines: quality and safety dates.

Requires the Department of Food and Agriculture, in consultation with the Department of Public Health, to publish information that encourages food manufacturers, processors, and retailers responsible for the labeling of food products to voluntarily use specified "best by" and "use by" labels that communicate quality and safety dates, respectively. Chapter 787, Statutes of 2017.

ACR-108 (Bonta) "Food as Medicine" programs.

Encourages local jurisdictions across California to create Food as Medicine programs to address the obesity and diabetes epidemics. Includes findings related to the incidence and societal cost of diabetes and obesity and the value of healthy eating in preventing them. Resolution Chapter 166, Statutes of 2017.

SB-557 (Hernandez) Food donations: schools.

Requires the California Department of Education to update its guidance on the donation of leftover food to allow a public school cafeteria to donate food to a food bank or other nonprofit charitable organization for distribution to persons free of charge and permits local education agencies to include whole uncut produce, unopened bags of sliced fruit, and unopened containers of milk, as specified, to be made available to food service staff, pupils, and faculty to minimize waste. Chapter 285, Statutes of 2017.

AB-836 (Chiu) Vending machines: bulk food.

Permits the Department of Public Health to issue a variance for dispensing bulk potentially hazardous food from vending machines. Chapter 259, Statutes of 2017.

Vetoed

AB-1461 (Thurmond) Food facility employee: food handler cards.

Would have required an employee of a food facility that offers meal subscription plans, who is a food handler and who also works in whole or in part with unpackaged food, to obtain a food handler card. Vetoed

Veto Message: "This bill requires employees of a food facility that offers a meal subscription plan to obtain food handler cards if they work with unpackaged food. This bill attempts to regulate a burgeoning new business model of home food delivery. I'm not convinced, however, that the existing regulatory scheme for food facilities is suitable for this new industry. I encourage the Legislature to continue to work on this issue with the Department of Public Health and interested stakeholders to ensure food safety is protected and innovation is encouraged."

Health Care Facilities

09

Chaptered

AB-275 (Wood) Long-term care facilities: requirements for changes resulting in the inability of the facility to care for its residents.

Extends the timeline and notice periods that long-term care (LTC) facilities are required to give residents, their families, the Department of Public Health, the Department of Health Care Services and the Office of the State LTC Ombudsman when they are planning to close. Clarifies and strengthens requirements to medically and socially assess residents in order to prevent and reduce transfer trauma. Requires LTC facilities, as part of their relocation plans, to provide specific information regarding the number of residents who do not have the capacity to make decisions for themselves, the availability of alternative LTC beds in the community, and the reason for the proposed closure, among other things. Chapter 185, Statutes of 2017.

AB-545 (Bigelow) Joint powers agreements: County of El Dorado: nonprofit hospitals.

Authorizes a private, nonprofit hospital in the County of El Dorado to enter into a joint powers agreement with a public agency. Chapter 124, Statutes of 2017.

AB-651 (Muratsuchi) Nonprofit health facilities: sale of assets: Attorney General approval.

Extends the time frame the Attorney General (AG) has to approve or reject the proposed sale of a nonprofit health facility from 60 to 90 days, requires the public notice of a hearing regarding the proposed sale be provided in English, the primary languages spoken at the facility, and the threshold languages for Medi-Cal as determined by the Department of Health Care Services for the county in which the facility is located. Requires the AG to consider whether the sale will have a significant effect on the availability and accessibility of cultural interests provided by the facility in the affected community. Chapter 782, Statutes of 2017.

AB-908 (Dababneh) Hospitals: seismic safety.

Authorizes Providence Tarzana Medical Center in Los Angeles to request an additional extension, until October 1, 2022, of the seismic safety requirement that hospital buildings must be rebuilt or retrofitted in order to be capable of withstanding an earthquake. Chapter 350, Statutes of 2017.

AB-1014 (Cooper) Diesel backup generators: health facility.

Requires a health facility to test and maintain each of its diesel backup generators and standby systems in conformance with the edition of the National Fire Protection Association 110: Standard for Emergency and Standby Power Systems adopted by the Life Safety Code and the Centers for Medicare and Medicaid Services. Applies the provisions of this bill to: general acute care hospitals; acute psychiatric hospitals; skilled nursing facilities; intermediate care facilities; intermediate care facilities/Developmentally Disabled; special hospitals; and, nursing facilities. Chapter 145, Statutes of 2017.

AB-1048 (Arambula) Health care: pain management and Schedule II drug prescriptions.

Allows a pharmacist to dispense a partial fill of a prescription for a Schedule II controlled substance, prohibits a pharmacy from charging any additional fees for prescriptions dispensed as partial fills, and removes the requirement that health facilities assess pain at the same time as vital signs. Chapter 615, Statutes of 2017.

AB-1102 (Rodriguez) Health facilities: whistleblower protections.

Increases the maximum criminal fine, from \$20,000 to \$75,000, for violations of whistleblower protection laws that apply to patients, employees and other health care workers of hospitals. Chapter 275, Statutes of 2017.

AB-1411 (Cristina Garcia) Health care facilities: rehabilitation innovation centers.

Establishes the Preserving Rehabilitation Innovation Centers Act of 2017 which defines a "rehabilitation innovation center" as a not-for-profit or government-owned rehabilitation facility that meets specified requirements, and makes various findings and declarations regarding the importance of supporting these institutions so they can continue to lead the nation's efforts to provide cutting-edge medical care to the most complex rehabilitation patients. Chapter 386, Statutes of 2017.

SB-323 (Mitchell) Medi-Cal: federally qualified health centers and rural health centers: Drug Medi-Cal and specialty mental health services.

Permits a federally qualified health center or rural health clinic to be reimbursed directly from a county or the Department of Health Care Services for providing Drug Medi-Cal or specialty mental health services to Medi-Cal beneficiaries. Specifies the methodology for billing and receiving reimbursements for these services. Chapter 540, Statutes of 2017.

SB-449 (Monning) Skilled nursing and intermediate care facilities: training programs.

Requires at least two of the 60 hours of classroom training required as part of certified nurse assistant training programs to address the special needs of persons with Alzheimer's disease and related dementias, and restores the Department of Public Health's ability to include training regarding Alzheimer's in clinical training sections. Chapter 282, Statutes of 2017.

SB-512 (Hernandez) Health care practitioners: stem cell therapy.

Requires health care practitioners who perform stem cell therapy that is not United States Food and Drug Administration (FDA)-approved to provide patients with a notice that the therapy is not FDA-approved. Requires the Medical Board of California to report complaints received and disciplinary actions taken against licensed physicians for administering non-FDA approved stem cell therapies. Chapter 428, Statutes of 2017.

Vetoed

AB-1591 (Berman) Medi-Cal: federally qualified health centers and rural health centers: licensed professional clinical counselor.

Would have added, no later than July 1, 2018, licensed professional clinical counselors to the list of healthcare professionals that qualify for a face-to-face encounter with a patient at Federally Qualified Health Centers or Rural Health Clinics for purposes of a per-visit Medi-Cal payment under the prospective payment system. Vetoed

Veto Message: "This bill adds Licensed Professional Clinical Counselors to the list of health care professionals whose services are reimbursable by Medi-Cal on a per visit basis at Federally Qualified Health Centers and Rural Health Clinics. The Department of Health Care Services is developing a new payment model for these health clinics that will eliminate the need to add specific providers to an approved list. Consequently, this bill is unnecessary."

SB-687 (Skinner) Health facilities: emergency centers: Attorney General.

Would have required a nonprofit corporation that operates a health facility that includes a licensed emergency center, regardless of whether it is currently operating or providing health care services or has a suspended license, to obtain written consent from the Attorney General prior to a planned elimination or reduction in the level of emergency medical services provided. Vetoed

Veto Message: "This bill requires a nonprofit hospital to receive approval from the Attorney General prior to reducing or eliminating services in its emergency department. A hospital's decision to reduce or eliminate emergency services poses real challenges for a community. This is why current law requires public notice prior to a hospital taking such an action. Removing a hospital's authority to determine emergency service needs, however, will not solve the underlying financial issues that typically force these decisions. An Attorney General decision to prohibit a reduction or elimination of these services may hasten the reduction of other services or closure of the entire hospital."

Health Information / Health Insurance Portability and Accountability Act: HIPAA

Chaptered

AB-1119 (Limón) Developmental and mental health services: information and records: confidentiality.

Authorizes the disclosure of patient information and records of individuals with developmental and mental health disabilities who are voluntarily or involuntarily detained, including those detained under the Lanterman-Petris-Short Act, during the provision of emergency services and care, as defined, including the communication of patient information between a physician and surgeon, licensed psychologist, social worker with a master's degree in social work, licensed marriage and family therapist, licensed professional clinical counselor, nurse, emergency medical personnel at the scene of an emergency or in an emergency medical transport vehicle, or other professional person or emergency medical personnel at a health facility, as specified. Makes other technical and non-substantive changes. Chapter 323, Statutes of 2017.

SB-241 (Monning) Medical records: access.

10

Entitles a patient or patient's personal representative to a paper or electronic copy of all or any portion of the patient records; and imposes a reasonable, cost-based fee for providing a paper or electronic copy or summary of patient records, as specified. Authorizes the disclosure of patient information and records of individuals with developmental and mental health disabilities who are voluntarily or involuntarily detained, including those detained under the Lanterman-Petris-Short Act, to a business associate or for health care operations purposes, in accordance with specified federal law. Chapter 513, Statutes of 2017.

SB-575 (Leyva) Patient access to health records.

Entitles a patient to a copy, at no charge, of the relevant portion of the patient's records that are needed to support a claim regarding eligibility for specified public benefit programs. Adds to the list of public benefit programs the In-Home Supportive Services program, the California Work Opportunity and Responsibility to Kids program, federal veterans' service-connected compensation and nonservice connected pension disability benefits, and CalFRESH. Makes other clarifying, technical and non-substantive changes. Chapter 626, Statutes of 2017.

11 Health Insurance / Health Plans

Chaptered

AB-156 (Wood) Individual market: single risk pool: index rate.

Deletes references to the federal transitional reinsurance program in the individual and small group market, and revises the enrollment periods for individual health benefit plans offered outside of the California Health Benefit Exchange (Exchange) and through the Exchange for policy years beginning on or after 2019. Chapter 468, Statutes of 2017.

AB-1074 (Maienschein) Health care coverage: pervasive developmental disorder or autism.

Makes changes to the requirements for qualified autism service (QAS) providers and QAS paraprofessionals for purposes of behavioral health therapy coverage by health care service plans and health insurers. Chapter 385, Statutes of 2017.

AB-1315 (Mullin) Mental health: early psychosis detection and intervention.

Establishes the Early Psychosis Intervention Competitive Selection Process Plus Program and an advisory committee to the Mental Health Services Oversight and Accountability Commission to encompass early psychosis and mood disorder detection and intervention. Provides that the implementation of the grant program and adoption of regulations be contingent upon the deposit into the Early Psychosis Detection and Intervention Fund of at least \$500,000 in nonstate funds for the purpose of funding grants. Chapter 414, Statutes of 2017.

AB-1316 (Quirk, Cristina Garcia) Public health: childhood lead poisoning: prevention.

Revises the existing standard of care for children determined to be at risk for lead poisoning and requires all children to be screened for blood lead levels. Chapter 507, Statutes of 2017.

SB-17 (Hernandez) Health care: prescription drug costs.

Requires health care service plans (health plans) and health insurers that report rate information through the existing rate review process to also report information related to covered prescription drugs, as specified, to the Department of Managed Health Care (DMHC) or California Department of Insurance (CDI), respectively. Requires DMHC and CDI to compile the data reported by health plans and insurers into a report that demonstrates the overall impact of drug costs on health care premiums. Requires drug manufacturers to notify specified state purchasers, health plans, and health insurers, in writing at least 60 days prior to the planned effective date, if it is increasing the wholesale acquisition cost (WAC) of a prescription drug by specified amounts. Requires drug manufacturers to notify the Office of Statewide Health Planning and Development (OSHPD) within three days of commercial availability if it is introducing a new prescription drug to market at a WAC that exceeds the Medicare Part D specialty drug threshold. Requires drug manufacturers to provide specified information to OSHPD related to the drug's price. Chapter 603, Statutes of 2017.

SB-133 (Hernandez) Health care coverage: continuity of care.

Expands existing law relating to completion of covered services to newly covered enrollees under individual health care service plan contracts or insurance policies. Chapter 481, Statutes of 2017.

SB-223 (Atkins) Health care language assistance services.

Requires health care service plans (health plans), including Medi-Cal managed care plans, and health insurers to include a written notice of availability of interpretation services in the top 15 languages spoken by limited English-proficient individuals in California, as specified. Requires interpreters to meet specified requirements, requires specified disclosures to enrollees, insureds, Medi-Cal beneficiaries, and the public. Applies specified provisions and existing Medi-Cal provisions on language assistance to Medi-Cal mental health plans. Chapter 771, Statutes of 2017.

SB-374 (Newman) Health insurance: discriminatory practices: mental health.

Requires large group, small group, and individual health insurance policies regulated by the California Department of Insurance to provide all covered mental health and substance use disorder benefits in compliance with the federal Paul Wellstone and Pete Dominici Mental Health Parity and Addiction Equity Act of 2008 (Act) and all rules, regulations, and guidance issued pursuant to the Act. Chapter 162, Statutes of 2017.

AB-1102 (Rodriguez) Health facilities: whistleblower protections.

Increases the maximum criminal fine, from \$20,000 to \$75,000, for violations of whistleblower protection laws that apply to patients, employees and other health care workers of hospitals. Chapter 275, Statutes of 2017.

Vetoed

AB-391 (Chiu, Gomez) Medi-Cal: asthma preventive services.

Would have established the Asthma Preventive Services Program Act of 2017 and provided coverage of asthma preventive services under the Medi-Cal program. Vetoed

Veto Message: "I am returning Assembly Bills 391 and 447 without my signature. These bills expand benefits in the Medi-Cal program, one for asthma preventative services and one for continuous glucose monitor medical devices. The Department of Health Care Services, however, has considerable administrative authority to make changes to benefits based upon new medical evidence and clinical guidelines. Therefore, these statutory changes are unnecessary."

AB-447 (Gray) Medi-Cal: covered benefits: continuous glucose monitors.

Would have provided Medi-Cal coverage for continuous glucose monitors when medically necessary for the management and treatment of diabetes mellitus, subject to utilization controls, and to the extent that federal financial participation is available and any necessary federal approvals have been obtained. Vetoed

Veto Message: "I am returning Assembly Bills 391 and 447 without my signature. These bills expand benefits in the Medi-Cal program, one for asthma preventative services and one for continuous glucose monitor medical devices. The Department of Health Care Services, however, has considerable administrative authority to make changes to benefits based upon new medical evidence and clinical guidelines. Therefore, these statutory changes are unnecessary."

12 Health Workforce

Chaptered

AB-1188 (Nazarian) Health professions development: loan repayment.

Adds licensed professional clinical counselors (LPCCs), and LPCC interns to the types of mental health providers eligible to participate in the Licensed Mental Health Service Provider Education Program (Loan Program) within the Health Professions Education Foundation; increases the license renewal fees paid by the mental health providers eligible to participate in the Loan Program; and, contains an urgency clause to ensure that the provisions of this bill go into immediate effect upon enactment. Chapter 557, Statutes of 2017.

SB-449 (Monning) Skilled nursing and intermediate care facilities: training programs.

Requires at least two of the 60 hours of classroom training required as part of certified nurse assistant training programs to address the special needs of persons with Alzheimer's disease and related dementias, and restores the Department of Public Health's ability to include training regarding Alzheimer's in clinical training sections. Chapter 282, Statutes of 2017.

13 Labs / Clinical Labs

Chaptered

AB-658 (Waldron) Clinical laboratories.

Suspends the annual renewal fee for clinical laboratory licenses for years 2018 and 2019. Sunsets this provision on January 1, 2020. Chapter 345, Statutes of 2017.

14 Marijuana / Medical Marijuana

Vetoed

AB-350 (Salas) Marijuana edibles: appealing to children.

Would have prohibited making a cannabis product in the shape of a person, animal, insect or fruit. Would have deleted references to marijuana and replaces them with cannabis. Vetoed

Veto Message: "This bill prohibits cannabis products to be made in the shape of a person, animal, insect, or fruit. In mid-September the Legislature passed Assembly Bill 133, which made clarifying changes necessary to implement a single cannabis state regulatory framework. As currently drafted, this bill would chapter out specific provisions in the recently enacted trailer bill. Therefore, I cannot sign it at this time."

SB-663 (Nielsen) Packages and labels of marijuana or marijuana products: children.

Would have specified that a package or label of cannabis or cannabis products shall be deemed appealing to children if it has any of a number of characteristics, including: showing the content of the package through a transparent material, resembles any commercially available candy, snack or beverage, displays cartoons, logos, or colors that appeal children, or includes designs that could reasonably mislead a person under 21 that the package contains anything other than cannabis or cannabis products. Vetoed

Veto Message: "This bill outlines standards that will determine if cannabis packages or labels are attractive to children. Current law already prohibits cannabis and cannabis products from being designed to be attractive to children. State licensing authorities are currently drafting emergency regulations on packaging and labeling for the cannabis industry, which must take effect before January 1, 2018. This process is more nimble than statute and allows the licensing authorities to respond to the changing industry. Rather than creating new statutory restrictions, it would be prudent to allow licensing authorities to finish drafting the regulations."

Mental / Behavioral Health

15

Chaptered

AB-191 (Wood) Mental health: involuntary treatment.

Authorizes a licensed marriage and family therapist or a licensed professional clinical counselor to be the second person to sign a notice of certification to hold a person involuntarily for an extended 14 days or 30 days, after an initial 72 hour hold, as specified. Chapter 184, Statutes of 2017.

AB-462 (Thurmond) Mental Health Services Oversight and Accountability Commission: wage information data access.

Authorizes the Director of Employment Development Department (EDD) to share information with the Mental Health Services Oversight and Accountability Commission (Commission) related to quarterly wage data to assist the Commission in fulfilling its duties under the Mental Health Services Act, for the purpose of monitoring and evaluating employment outcomes to determine the effectiveness of those services, to the extent permitted under applicable federal statute and regulation. Permits EDD to require reimbursement for all direct costs incurred in providing any and all information. Chapter 403, Statutes of 2017.

AB-470 (Arambula) Medi-Cal: specialty mental health services: performance outcome dashboard.

Requires the Department of Health Care Services to consult with specified stakeholders to inform the updates to the performance outcomes system for specialty mental health services (SMHS) developed for Early and Periodic Screening, Diagnosis, and Treatment and under the Special Terms and Conditions of the Medi-Cal SMHS Waiver. Chapter 550, Statutes of 2017.

AB-501 (Ridley-Thomas) Mental health: community care facilities.

Expands the definition of a short-term residential treatment center to include a children's crisis residential center (CCRC) to be used as a diversion from psychiatric hospitalization and creates a new facility licensure category for CCRCs, and makes related changes. Chapter 704, Statutes of 2017.

AB-727 (Nazarian) Mental Health Services Act: housing assistance.

Clarifies that counties may spend funds on housing assistance for people in the target population for programs funded by the Mental Health Services Act, including programs that serve seriously emotionally disturbed children or adolescents and adults or older adults who have a serious mental disorder. Chapter 410, Statutes of 2017.

AB-974 (Quirk-Silva) Mental Health Services Act: reporting veterans spending.

Requires counties to report their Mental Health Services Act expenditures spent on mental health services for veterans to the Department of Health Care Services and the Mental Health Services Oversight and Accountability Commission. Chapter 411, Statutes of 2017.

AB-1074 (Maienschein) Health care coverage: pervasive developmental disorder or autism.

Makes changes to the requirements for qualified autism service (QAS) providers and QAS paraprofessionals for purposes of behavioral health therapy coverage by health care service plans and health insurers. Chapter 385, Statutes of 2017.

AB-1119 (Limón) Developmental and mental health services: information and records: confidentiality.

Authorizes the disclosure of patient information and records of individuals with developmental and mental health disabilities who are voluntarily or involuntarily detained, including those detained under the Lanterman-Petris-Short Act, during the provision of emergency services and care, as defined, including the communication of patient information between a physician and surgeon, licensed psychologist, social worker with a master's degree in social work, licensed marriage and family therapist, licensed professional clinical counselor, nurse, emergency medical personnel at the scene of an emergency or in an emergency medical transport vehicle, or other professional person or emergency medical personnel at a health facility, as specified. Makes other technical and non-substantive changes. Chapter 323, Statutes of 2017.

AB-1134 (Gloria) Mental Health Services Oversight and Accountability Commission: fellowship program.

Authorizes the Mental Health Services Oversight and Accountability Commission to establish a fellowship program for the purpose of providing an experiential learning opportunity for a mental health consumer and a mental health professional. Chapter 412, Statutes of 2017.

AB-1188 (Nazarian) Health professions development: loan repayment.

Adds licensed professional clinical counselors (LPCCs), and LPCC interns to the types of mental health providers eligible to participate in the Licensed Mental Health Service Provider Education Program (Loan Program) within the Health Professions Education Foundation; increases the license renewal fees paid by the mental health providers eligible to participate in the Loan Program; and, contains an urgency clause to ensure that the provisions of this bill go into immediate effect upon enactment. Chapter 557, Statutes of 2017.

AB-1315 (Mullin) Mental health: early psychosis detection and intervention.

Establishes the Early Psychosis Intervention Competitive Selection Process Plus Program and an advisory committee to the Mental Health Services Oversight and Accountability Commission to encompass early psychosis and mood disorder detection and intervention. Provides that the implementation of the grant program and adoption of regulations be contingent upon the deposit into the Early Psychosis Detection and Intervention Fund of at least \$500,000 in nonstate funds for the purpose of funding grants. Chapter 414, Statutes of 2017.

AB-1456 (Low) Professional licensure.

Extends from three years to five years the ability of the Department of Health Care Services and the Department of Public Health to waive the licensure requirements for psychologists who are gaining qualifying experience for licensure in this state and are working in settings defined as "exempt" (state settings) and makes conforming licensure provisions for psychologists and clinical social workers working in the state correctional system. Chapter 151, Statutes of 2017.

ACR-8 (Jones-Sawyer) Adverse childhood experiences: post-traumatic "street" disorder.

Recognizes adverse childhood experiences, also known as post-traumatic "street" disorder in communities of color, having lasting negative outcomes to both physical and mental health with growing implications for our state. Resolution Chapter 139, Statutes of 2017.

SB-374 (Newman) Health insurance: discriminatory practices: mental health.

Requires large group, small group, and individual health insurance policies regulated by the California Department of Insurance to provide all covered mental health and substance use disorder benefits in compliance with the federal Paul Wellstone and Pete Dominici Mental Health Parity and Addiction Equity Act of 2008 (Act) and all rules, regulations, and guidance issued pursuant to the Act. Chapter 162, Statutes of 2017.

SB-565 (Portantino) Mental health: involuntary commitment.

Requires a mental health facility, prior to a certification review hearing to extend intensive mental health treatment services to 30-days, to make reasonable attempts to notify family members or any other person designated by the patient at least 36 hours prior to the certification review hearing. Requires the notice to include the time and place of the certification review hearing, unless the patient requests that this information not be provided, and requires the facility to advise the patient that he or she has the right to request that this information not be provided. Chapter 218, Statutes of 2017.

Vetoed

AB-850 (Chau) Mental Health Services Oversight and Accountability Commission.

Would have increased the membership of the Mental Health Services Oversight and Accountability Commission to include an individual with knowledge and experience in reducing mental health disparities, especially for racial and ethnic communities, to be appointed by the Governor. Vetoed

Veto Message: "This bill adds a member to the Mental Health Services Oversight and Accountability Commission who has experience in reducing mental health disparities. I believe the Commission as currently constituted is up to the task entrusted to it."

Pharmaceuticals / Pharmacy / Biotech

16

Chaptered

AB-265 (Wood) Prescription drugs: prohibition on price discount.

Prohibits prescription drug manufacturers from offering discounts or other reduction in an individual's out-of-pocket expenses associated with his or her insurance coverage, if a lower cost therapeutically equivalent generic drug is available. Specifies a number of exceptions that allow discounts even if a lower cost therapeutically equivalent generic drug is available. Chapter 611, Statutes of 2017.

AB-1048 (Arambula) Health care: pain management and Schedule II drug prescriptions.

Allows a pharmacist to dispense a partial fill of a prescription for a Schedule II controlled substance, prohibits a pharmacy from charging any additional fees for prescriptions dispensed as partial fills, and removes the requirement that health facilities assess pain at the same time as vital signs. Chapter 615, Statutes of 2017.

AJR-19 (Arambula) Opioid awareness and dependency prevention.

Resolves that the Legislature urges the use of non-opioid alternatives for pain management and supports physician choice of treatment to prevent opioid dependency. Resolution Chapter 96, Statutes of 2017.

SB-17 (Hernandez) Health care: prescription drug costs.

Requires health care service plans (health plans) and health insurers that report rate information through the existing rate review process to also report information related to covered prescription drugs, as specified, to the Department of Managed Health Care (DMHC) or California Department of Insurance (CDI), respectively. Requires DMHC and CDI to compile the data reported by health plans and insurers into a report that demonstrates the overall impact of drug costs on health care premiums. Requires drug manufacturers to notify specified state purchasers, health plans, and health insurers, in writing at least 60 days prior to the planned effective date, if it is increasing the wholesale acquisition cost (WAC) of a prescription drug by specified amounts. Requires drug manufacturers to notify the Office of Statewide Health Planning and Development (OSHPD) within three days of commercial availability if it is introducing a new prescription drug to market at a WAC that exceeds the Medicare Part D specialty drug threshold. Requires drug manufacturers to provide specified information to OSHPD related to the drug's price. Chapter 603, Statutes of 2017.

Vetoed

AB-715 (Wood) Workgroup review of opioid pain reliever use and abuse.

Would have made various findings and recommendations regarding opioid abuse. Would have required the Department of Public Health to convene a workgroup to review existing prescription guidelines and develop a recommended statewide guideline addressing best practices for prescribing opioid pain relievers. Vetoed

Veto Message: "This bill requires the Department of Public Health to convene a workgroup to develop a statewide guideline for prescribing opioids for acute, short term pain. Opioid misuse and addiction is a national epidemic that has been devastating for many California communities. Since 2014, the Department of Public Health has lead the Prescription Opioid Misuse and Overdose Prevention Workgroup which is comprised of state and local agencies as well as medical and patient organizations committed to reducing opioid overdose rates in California. Furthermore, both the California Medical Board and the federal Centers for Disease Control have published updated guidelines for prescribing controlled substances for pain including opioids. For these reasons, this bill is unnecessary."

17 Public Health

Chaptered

AB-658 (Waldron) Clinical laboratories.

Suspends the annual renewal fee for clinical laboratory licenses for years 2018 and 2019. Sunsets this provision on January 1, 2020. Chapter 345, Statutes of 2017.

AB-836 (Chiu) Vending machines: bulk food.

Permits the Department of Public Health to issue a variance for dispensing bulk potentially hazardous food from vending machines. Chapter 259, Statutes of 2017.

AB-911 (Wood, Quirk) Radioactive materials: licensing and registration: exemption.

Exempts certified bomb technicians employed by local governments and the State of California, including the University of California, from specified requirements related to radioactive materials. Chapter 128, Statutes of 2017.

AB-954 (Chiu) Food labeling: guidelines: quality and safety dates.

Requires the Department of Food and Agriculture, in consultation with the Department of Public Health, to publish information that encourages food manufacturers, processors, and retailers responsible for the labeling of food products to voluntarily use specified "best by" and "use by" labels that communicate quality and safety dates, respectively. Chapter 787, Statutes of 2017.

AB-1316 (Quirk, Cristina Garcia) Public health: childhood lead poisoning: prevention.

Revises the existing standard of care for children determined to be at risk for lead poisoning and requires all children to be screened for blood lead levels. Chapter 507, Statutes of 2017.

AB-1386 (Waldron) Genomic cancer testing pilot program.

Requires the Department of Health Care Services to include information relating to breast cancer susceptibility gene mutations in the next revision of a brochure that is provided to cancer patients. Chapter 693, Statutes of 2017.

AB-1387 (Arambula) Home medical device retail facility business: licensing: inspections.

Modifies the inspection requirements for home medical device retail (HMDR) facilities by requiring that HDMR providers, which have been accredited by an accreditation organization approved by the federal Centers for Medicare and Medicaid Services, be inspected only in response to a complaint made to the Department of Public Health regarding that provider. Continues to require at least annual inspections for those HDMR providers that are not accredited. Chapter 213, Statutes of 2017.

AB-1726 (Health) Vital records: confidentiality.

Authorizes the Department of Public Health to release confidential birth and fetal death vital record data to government entities and birth hospitals. Chapter 215, Statutes of 2017.

ACR-108 (Bonta) "Food as Medicine" programs.

Encourages local jurisdictions across California to create Food as Medicine programs to address the obesity and diabetes epidemics. Includes findings related to the incidence and societal cost of diabetes and obesity and the value of healthy eating in preventing them. Resolution Chapter 166, Statutes of 2017.

ACR-113 (Rubio) Breastfeeding Awareness Month of 2017.

Recognizes August 2017 as the Breastfeeding Awareness Month of 2017 in California and encourages Californians to work together to support breastfeeding. Resolution Chapter 167, Statutes of 2017.

AJR-19 (Arambula) Opioid awareness and dependency prevention.

Resolves that the Legislature urges the use of non-opioid alternatives for pain management and supports physician choice of treatment to prevent opioid dependency. Resolution Chapter 96, Statutes of 2017.

SB-239 (Wiener) Infectious and communicable diseases: HIV and AIDS: criminal penalties.

Modifies criminal penalties related to the intentional transmission of the human immunodeficiency virus to another that specify higher punishment than that which applies to other communicable diseases. Makes reckless exposure of another to a communicable disease punishable as a misdemeanor. Chapter 537, Statutes of 2017.

SB-432 (Pan) Emergency medical services.

Revises the required communicable disease exposure notification procedure for emergency medical care providers by requiring a health facility to immediately notify a prehospital emergency medical care provider upon determining that a person who received emergency medical services is diagnosed with a reportable communicable disease or condition, in addition to the existing requirement that provides notification to the county health officer, who in turn notifies the emergency medical care provider. Chapter 426, Statutes of 2017.

SB-442 (Newman) Public health: pools: drownings.

Requires a newly constructed or remodeled swimming pool or spa at a private single-family home to be equipped with at least two of seven drowning prevention safety features and requires home inspection reports to identify which two drowning prevention safety features are equipped in the pool or spa. Chapter 670, Statutes of 2017.

Vetoed

AB-715 (Wood) Workgroup review of opioid pain reliever use and abuse.

Would have made various findings and recommendations regarding opioid abuse. Would have required the Department of Public Health to convene a workgroup to review existing prescription guidelines and develop a recommended statewide guideline addressing best practices for prescribing opioid pain relievers. Vetoed

Veto Message: "This bill requires the Department of Public Health to convene a workgroup to develop a statewide guideline for prescribing opioids for acute, short term pain. Opioid misuse and addiction is a national epidemic that has been devastating for many California communities. Since 2014, the Department of Public Health has lead the Prescription Opioid Misuse and Overdose Prevention Workgroup which is comprised of state and local agencies as well as medical and patient organizations committed to reducing opioid overdose rates in California. Furthermore, both the California Medical Board and the federal Centers for Disease Control have published updated guidelines for prescribing controlled substances for pain including opioids. For these reasons, this bill is unnecessary."

AB-1279 (Salas) Valley fever.

Would have required the Department of Public Health to develop and implement public outreach programs to educate the public about coccidioidomycosis, commonly referred to as valley fever. Vetoed

Veto Message: "This bill requires the Department of Public Health to develop outreach programs to educate the public about Valley Fever. The department already provides fact sheets, brochures, posters and other educational materials to raise awareness of this disease.

Expanding this program would necessitate additional resources which should be considered along with other funding requests as part of the budget process."

AB-1461 (Thurmond) Food facility employee: food handler cards.

Would have required an employee of a food facility that offers meal subscription plans, who is a food handler and who also works in whole or in part with unpackaged food, to obtain a food handler card. Vetoed

Veto Message: "This bill requires employees of a food facility that offers a meal subscription plan to obtain food handler cards if they work with unpackaged food. This bill attempts to regulate a burgeoning new business model of home food delivery. I'm not convinced, however, that the existing regulatory scheme for food facilities is suitable for this new industry. I encourage the Legislature to continue to work on this issue with the Department of Public Health and interested stakeholders to ensure food safety is protected and innovation is encouraged."

Public Insurance / Medi-Cal / Medi-Cal Managed Care

Chaptered

AB-74 (Chiu, Bonta, Santiago) Housing.

18

Creates the Housing for a Healthy California Program to provide rental assistance to individuals who are homeless and receive services from the Whole Person Care pilot program, Health Homes, or another locally controlled funding source. Chapter 777, Statutes of 2017.

AB-205 (Wood) Medi-Cal: Medi-Cal managed care plans.

Requires Medi-Cal managed care (MCMC) plans, including county mental health plans (MHPs) and Drug Medi-Cal Organized Delivery Systems (DMC-ODS) to maintain a network of providers within specified time and distance standards, with differing requirements by provider type and county. Requires, if a MCMC plan cannot meet the time and distance standards, the MCMC plan to submit a request for alternative access standards. Requires MCMC plans, MHPs, and DMC-ODS to comply with the appointment time standards in existing Knox-Keene Health Care Service Plan Act of 1975 regulation standards. Sunsets these requirements on January 1, 2022. Implements changes required by the federal Medicaid managed care rule for state fair hearings involving MCMC beneficiaries, and appeals to MCMC plans. Chapter 738, Statutes of 2017.

AB-470 (Arambula) Medi-Cal: specialty mental health services: performance outcome dashboard.

Requires the Department of Health Care Services to consult with specified stakeholders to inform the updates to the performance outcomes system for specialty mental health services (SMHS) developed for Early and Periodic Screening, Diagnosis, and Treatment and under the Special Terms and Conditions of the Medi-Cal SMHS Waiver. Chapter 550, Statutes of 2017.

AB-659 (Ridley-Thomas) Medi-Cal: reimbursement rates.

Changes from annually to every three years, beginning in 2019, the frequency by which clinical laboratory or laboratory service providers are required to submit data reports to the Department of Health Care Services for purposes of developing reimbursement rates. Requires the reimbursement rates developed under this bill to become effective July 1, 2020, and July 1 of every third year thereafter. Chapter 346, Statutes of 2017.

AB-1688 (Health) Medi-Cal: Alameda County pilot program.

Repeals an Alameda County program that did not require Medi-Cal utilization controls when a county hospital based utilization review committee has been established to determine the level of authorization for payment. Makes various changes to implement provisions of the federal Medicaid managed care rules related to record retention, health plan penalties, external quality review programs and health plan accreditation. Renames the California Mental Health Planning Council as the California Behavioral Health Planning Council, and makes conforming changes to broaden the duties of the renamed Council to incorporate substance use disorders. Chapter 511, Statutes of 2017.

AJR-8 (Kalra) Public social services: Social Security, Medicare, and Medicaid.

Calls on California's representatives in the United States Congress to vote against cuts to and proposals to privatize Social Security, Medicare, and Medicaid and to support legislation to improve and expand these programs. Calls on the President of the United States to honor his campaign promise not to cut these programs, to veto any legislation to do so, and to work with Congress to expand and improve these programs. Resolution Chapter 139, Statutes of 2017.

SB-4 (Mendoza) Medi-Cal: county organized health system: County of Orange.

Codifies the enabling ordinance adopted by the Board of Supervisors of the County of Orange that prescribes the composition of the governing body of the Orange County Health Authority, a county organized health system, known as CalOptima. Contains an urgency clause to ensure that the provisions of this bill go into immediate effect upon enactment. Chapter 479, Statutes of 2017.

SB-171 (Hernandez) Medi-Cal: Medi-Cal managed care plans.

Implements a federal option to require Medi-Cal managed care (MCMC) plans to provide a remittance if the MCMC plan fails to meet an 85% medical loss ratio. Requires the Department of Health Care Services (DHCS) to ensure that all covered mental health and substance use disorder benefits are provided in compliance with federal mental health parity regulations. Requires DHCS to require MCMC plans to increase contract services payments to designated public hospitals (DPHs) by amounts determined under a directed payment methodology. Requires DHCS to establish a program under which DPHs may earn performance-based quality incentive payments from MCMC plans. Chapter 768, Statutes of 2017.

SB-220 (Pan) Medi-Cal Children's Health Advisory Panel.

Limits the terms of members of the Medi-Cal Children's Health Advisory Panel (MCHAP) in the Department of Health Care Services (DHCS), permits DHCS greater flexibility in appointing three parent positions to MCHAP, and permits a MCHAP member to be removed by DHCS, in consultation with the Chair, if the removal is determined to be necessary by the Director of DHCS. Chapter 280, Statutes of 2017.

SB-223 (Atkins) Health care language assistance services.

Requires health care service plans (health plans), including Medi-Cal managed care plans, and health insurers to include a written notice of availability of interpretation services in the top 15 languages spoken by limited English-proficient individuals in California, as specified. Requires interpreters to meet specified requirements, requires specified disclosures to enrollees, insureds, Medi-Cal beneficiaries, and the public. Applies specified provisions and existing Medi-Cal provisions on language assistance to Medi-Cal mental health plans. Chapter 771, Statutes of 2017.

SB-323 (Mitchell) Medi-Cal: federally qualified health centers and rural health centers: Drug Medi-Cal and specialty mental health services.

Permits a federally qualified health center or rural health clinic to be reimbursed directly from a county or the Department of Health Care Services for providing Drug Medi-Cal or specialty mental health services to Medi-Cal beneficiaries. Specifies the methodology for billing and receiving reimbursements for these services. Chapter 540, Statutes of 2017.

SB-523 (Hernandez) Medi-Cal: emergency medical transport providers: quality assurance fee.

Imposes a quality assurance fee for each emergency medical transport provided by an emergency medical transport provider, pursuant to a prescribed methodology. Chapter 773, Statutes of 2017.

SB-743 (Hernandez, Leyva) Medi-Cal: family planning providers.

Establishes the Protection of Choice for Family Planning Act and prohibits Medi-Cal managed care plans (MCPs) from restricting the choice of a qualified provider, as defined, from whom a beneficiary enrolled in the MCP may receive family planning services covered by Medi-Cal. Chapter 572, Statutes of 2017.

Vetoed

AB-391 (Chiu, Gomez) Medi-Cal: asthma preventive services.

Would have established the Asthma Preventive Services Program Act of 2017 and provided coverage of asthma preventive services under the Medi-Cal program. Vetoed

Veto Message: "I am returning Assembly Bills 391 and 447 without my signature. These bills expand benefits in the Medi-Cal program, one for asthma preventative services and one for continuous glucose monitor medical devices. The Department of Health Care Services, however, has considerable administrative authority to make changes to benefits based upon new medical evidence and clinical guidelines. Therefore, these statutory changes are unnecessary."

AB-447 (Gray) Medi-Cal: covered benefits: continuous glucose monitors.

Would have provided Medi-Cal coverage for continuous glucose monitors when medically necessary for the management and treatment of diabetes mellitus, subject to utilization controls, and to the extent that federal financial participation is available and any necessary federal approvals have been obtained. Vetoed

Veto Message: "I am returning Assembly Bills 391 and 447 without my signature. These bills expand benefits in the Medi-Cal program, one for asthma preventative services and one for continuous glucose monitor medical devices. The Department of Health Care Services, however, has considerable administrative authority to make changes to benefits based upon new medical evidence and clinical guidelines. Therefore, these statutory changes are unnecessary."

AB-1591 (Berman) Medi-Cal: federally qualified health centers and rural health centers: licensed professional clinical counselor.

Would have added, no later than July 1, 2018, licensed professional clinical counselors to the list of healthcare professionals that qualify for a face-to-face encounter with a patient at Federally Qualified Health Centers or Rural Health Clinics for purposes of a per-visit Medi-Cal payment under the prospective payment system. Vetoed

Veto Message: "This bill adds Licensed Professional Clinical Counselors to the list of health care professionals whose services are reimbursable by Medi-Cal on a per visit basis at Federally Qualified Health Centers and Rural Health Clinics. The Department of Health Care Services is developing a new payment model for these health clinics that will eliminate the need to add specific providers to an approved list. Consequently, this bill is unnecessary."

19 Reproductive Health

Chaptered

SB-743 (Hernandez, Leyva) Medi-Cal: family planning providers.

Establishes the Protection of Choice for Family Planning Act and prohibits Medi-Cal managed care plans (MCPs) from restricting the choice of a qualified provider, as defined, from whom a beneficiary enrolled in the MCP may receive family planning services covered by Medi-Cal. Chapter 572, Statutes of 2017.

Senior Health / End-of-life

20

Chaptered

AB-275 (Wood) Long-term care facilities: requirements for changes resulting in the inability of the facility to care for its residents.

Extends the timeline and notice periods that long-term care (LTC) facilities are required to give residents, their families, the Department of Public Health, the Department of Health Care Services and the Office of the State LTC Ombudsman when they are planning to close. Clarifies and strengthens requirements to medically and socially assess residents in order to prevent and reduce transfer trauma. Requires LTC facilities, as part of their relocation plans, to provide specific information regarding the number of residents who do not have the capacity to make decisions for themselves, the availability of alternative LTC beds in the community, and the reason for the proposed closure, among other things. Chapter 185, Statutes of 2017.

AB-575 (Jones-Sawyer) Elder and dependent adult abuse: mandated reporters: substance use disorder counselors.

Expands the definition of health practitioner, for purposes of the mandated elder and dependent adult abuse reporter law, to include substance use disorder counselor. Defines "substance use disorder counselor" as a person providing counseling services in an alcoholism or drug abuse recovery and treatment program, as specified. Chapter 407, Statutes of 2017.

AB-1387 (Arambula) Home medical device retail facility business: licensing: inspections.

Modifies the inspection requirements for home medical device retail (HMDR) facilities by requiring that HDMR providers, which have been accredited by an accreditation organization approved by the federal Centers for Medicare and Medicaid Services, be inspected only in response to a complaint made to the Department of Public Health regarding that provider. Continues to require at least annual inspections for those HDMR providers that are not accredited. Chapter 213, Statutes of 2017.

SB-294 (Hernandez) Hospices: palliative care.

Authorizes a licensed hospice, until January 1, 2022, to provide interdisciplinary hospice services to a patient with a serious illness authorized in the Hospice Licensure Act of 1990 as determined by the physician and surgeon in charge of the care of the patient, including if the patient is continuing to receive curative treatment from other licensed health care professionals. Chapter 515, Statutes of 2017.

21 Vital Statistics

Chaptered

AB-1726 (HEALTH) Vital records: confidentiality.

Authorizes the Department of Public Health to release confidential birth and fetal death vital record data to government entities and birth hospitals. Chapter 215, Statutes of 2017.

Vetoed

AB-82 (Medina) Vital records: diacritical marks.

Would have required the State Registrar of Vital Statistics (State Registrar) to require the use of a diacritical mark on an English letter to be properly recorded, when applicable, on a certificate of live birth, fetal death, or death, and a marriage license, and deems the use of diacritical marks as an acceptable entry on these certificates and licenses. Would have permitted a person to submit a written request to the State Registrar for the issuance of a new certificate of birth, fetal death, death, or marriage stating the changes necessary to make the name correct if a name is not accurately recorded because of the absence of a diacritical mark, and requires the State Registrar to issue a new certificate of live birth, fetal death, death, or marriage with the accurate name if the request is accompanied with the payment of the required fee. Vetoed

Veto Message: "This bill mandates the State Registrar to require the use of diacritical marks on names to be recorded on birth, death, and marriage certificates. Mandating the use of diacritical marks on certain state and local vital records without a corresponding requirement for all state and federal government records is a difficult and expensive proposition. This bill would create inconsistencies in vital records and require significant state funds to replace or modify existing registration systems."