LEGISLATIVE UPDATE

## Week of February 10, 2020

of Catholic Health Care

State Issues		
New Bill Introduction	It is six weeks in to the 2020 Legislative Session and bills of interest are beginning to be introduced. While there will not be a complete list of newly-introduced bills until after the February 21 deadline, following are a few early arrivals of interest:	
	<ul> <li>AB 2037 (Wicks) would require a hospital to provide public notice 180 days prior to closing an emergency department.</li> <li>AB 2036 (Muratsuchi) would specify that if the Attorney General imposes a condition on an agreement or transaction, that condition is effective for the entire period of time specified by the Attorney General, regardless of whether the health facility is subsequently sold, leased, etc.</li> <li>AB 1938 (Eggman) would allow Mental Health Services Act funds (Prop 63) to be used for inpatient mental health treatment, including involuntary treatment in certain circumstances, and in certain settings, including acute care hospitals.</li> <li>SB 803 (Beall) states the intent of the Legislature is to create a peer support specialist certification program (as a provider type for purposes of the Medi-Cal program) and requires the State Department of Health Care Services to work with the federal government to ensure Medicaid reimbursement is possible.</li> <li>SB 798 (Hill) seeks to ban the sale of all flavored tobacco products in California, including e-cigarettes.</li> </ul>	
Support for ED Care of Patients with Substance Use Disorders	Last year, the state Legislature appropriated funds for the Department of Health Care Services (DHCS) to establish the Behavioral Health Pilot Project (BHPP). The BHPP provides funding for behavioral health counselors (otherwise known as substance use navigators or "SUNs" in the California Bridge Program) in hospital emergency departments (ED). If a person is currently receiving funding from California Bridge, this is an opportunity to secure funding to sustain the SUN. If a hospital does not currently have a program through California Bridge, this funding will provide a foundation for the program by placing a counselor (SUN) in the ED to work with individuals with substance use disorder. <i>Every hospital is highly encouraged to apply because there is adequate funding for each hospital in California</i> . Applications are due on March 20, 2020. The amount available for each grant is \$50,000, with the potential for future funding. You can access the request for applications at: https://www.bridgetotreatment.org/bhpp-2020	
	(more)	

New Poll on Health	This week, the California Health Care Foundation released a poll that is intended to provide insights into Californians'
Care Policy Released	experiences with a variety of health care policy issues: coverage, costs, access, mental health and substance use disorder treatment, workforce, and homelessness issues. Included below are a few of their key findings:
	<b>1. People find it more difficult to pay for health care.</b> Compared to last year, more Californians say they are worried about paying for all kinds of health care costs, including unexpected medical bills, out-of-pocket expenses, prescription drugs, and health insurance premiums. Half of Californians, including 49% of those with health insurance, say they delay or skip care because of the cost. About one-fifth of Californians say their condition got worse because they had to delay or skip care they couldn't afford. These worries and experiences help explain why more than 80% of Californians say they want the Governor and the state Legislature to prioritize making health care more affordable this year.
	<b>2. Ensuring access to mental health is still Californians' number one health policy priority.</b> For the second consecutive year, California residents say ensuring that people with mental health problems can get treatment is the most important health care issue for state officials to tackle in 2020. This is "extremely important" or "very important" to 90% of state residents, including majorities of Republicans, Democrats, and Independents. Among those with insurance who tried to make an appointment for mental health care in the past 12 months, nearly half say they found it "very difficult" or "somewhat difficult" to find a provider who accepted their insurance. About half of those who tried to make an appointment (with or without insurance) believe they waited an unreasonable period to get one.
	<b>3. Californians see a link between mental health and homelessness.</b> This poll found addressing homelessness to be a top priority among Californians. Addressing homelessness is an "extremely important" or "very important" issue for more than 8 out of 10 Californians (83%). More than 80% of Californians say they believe there is a relationship between homelessness and mental health, although opinions differ on whether mental health problems are more likely to cause a person to become homeless or more likely to be a consequence of homelessness. There is strong bipartisan support in California for giving communities more tools to connect people experiencing homelessness to mental health care and other social services. This idea is favored by more than 90% of Californians, including strong majorities of Republicans, Democrats, and Independents.
	<b>4. Medi-Cal remains extremely popular, but it needs improvement.</b> Consistent with findings from last year's poll, Californians give very strong, bipartisan support for Medi-Cal. Ninety-one percent say the program is important to the state, and 60% view it as personally important for themselves and their families. Backing for the program remains strong across income levels, party affiliations, insurance types, and racial and ethnic groups. This study reveals several improvements that Californians want Medi-Cal to pursue. One problem is wait times: 42% of respondents with Medi-Cal report what they think of as unreasonably long waits to get an appointment with a health care provider. And 72% or respondents support changing the way doctors and hospitals are paid by basing payments on health outcomes instead of the volume of services.
	<b>5. Uninsured Californians worry about whether health care coverage will hurt their immigration status.</b> More than 80% consider universal access to coverage an "extremely important" or "very important" policy priority in 2020.

New Poll on Health Care Policy Released (continued)	<ul> <li>While support was strongest among Democratic and Independent respondents, more than half of Republicans also said universal coverage was an important priority. One barrier to achieving universal coverage may be a climate of fear. Over one-third of uninsured adults in California worry that signing up for health insurance will draw attention to their or a family member's immigration status. This finding suggests that policies — like the Trump administration's new federal public charge rule — may be discouraging Californians from signing up for coverage.</li> <li>You can access the full report, along with accompanying graphs, via this <u>link</u>.</li> </ul>	
Federal Issues		
Ways and Means Advances 'Surprise' Billing Legislation	On Wednesday, the House Ways and Means Committee advanced its version of legislation to end "surprise" medical bills. Passed by a voice vote, and supported by the American Hospital Association and other provider organizations, HR 5826, the Consumer Protections Against Surprise Medical Bills Act of 2020, prohibits providers from balance billing patients for emergency services or medical care the patient reasonably could have expected to be in-network, and does not allow patients to be charged more than the in-network cost-sharing amount. The proposal does not rely on a benchmark payment rate to determine out-of-network reimbursement, but instead includes a period for health plans and providers to negotiate reimbursement, to be followed by a mediated dispute resolution process should it be necessary.	
	The approach is viewed as more favorable than HR 5800, approved on Tuesday by the House Education and Labor Committee that would establish a federal benchmark payment to settle disputes and offer the option to go to arbitration for bills over \$750. The Education and Labor billing proposal is similar to a bipartisan December agreement struck by House Energy and Commerce leaders and Senate HELP Chairman Lamar Alexander (R-TN). It has been reported that House Democratic leaders want to pass a billing fix by the end of May as part of a package reauthorizing funding for a set of federal health programs. The White House weighed in this week appearing to express concerns with the Ways and Means approach.	

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