LEGISLATIVE UPDATE of Catholic Health Care

Week of February 17, 2020

State Issues	
State of the State Address	Governor Newsom presented his State of the State address this week and focused on the issue of homelessness. The Governor sees a close tie between our homeless crisis and health and behavioral health and referenced some needed changes, in both, as a means to address systemic homelessness. Of note, he strongly urged county behavioral health departments to spend down their Proposition 63 resources on community-based care before the end of the state's fiscal year on June 30, 2020. He also indicated a plan to more fundamentally reform Proposition 63 and use those funds in a more targeted way. Advocates are hopeful that it will encourage counties to partner with community providers to access that funding and provide more care. The Governor also touted his Cal-AIM Medi-Cal proposal and his proposed investment of \$695 million to "leveraging Medi-Cal as a tool to help California's most vulnerable residents: the homeless, our children, and people cycling in and out of the criminal justice system."
New Bill Introductions	Today, Friday, February 21, is the last day for Legislators to submit new bills to be considered for this legislative session. Many bills will show up in print over the weekend but included below are some of the newly introduced health care-related measures that will garner our attention this year. AB 2781 (Wicks) would mandate health plans cover infertility treatment, and it explicitly eliminates the religious exemption for employers and plans.
	AB 2817 (Wood) creates the Office of Health Care Affordability – as proposed in the Governor's January Budget Proposal. In addition to creating the office, the bill would require the office to, among other things, create strategies to address cost trends by region and develop measures of affordability for consumers and other purchasers of private health care coverage.
	SB 1216 (Hueso) would require a hospital to "not interfere" with a patient's use of medicinal cannabis, but can prohibit smoking or vaping as a means to access the drug. AB 2747 (Santiago) would mandate that OSHPD release to any labor union and nonprofit health policy organization
	the following data sets: "Hospital Discharge Abstract Data Record, an Emergency Care Data Record, and an Ambulatory Surgery Center Data Record" which includes the date of birth, race, date of services, and principal diagnosis of patients. We also expect a bill to be introduced that would mandate hospitals provide any and all services to transgender patients. It is as yet unclear what will be the full scope of the bill. The sponsors are expected to be Equality California,
	the California Medical Association, and Planned Parenthood. More information will be forthcoming when the bill is introduced. (more)

New Bills (continued)	There also are dozens of bills related to behavioral health treatment, homeless services, and Medi-Cal that will require our review in the coming days.
EOLOA Informational Hearing	Next Tuesday, February 25, the Select Committee on End of Life Health Care will hold an informational hearing on the "Implementation of the End of Life Act Policy." No agenda or list of speakers has been made available. The 10-member, all Democrat, Select Committee is chaired by Assemblymember Susan Eggman, coauthor of the California End of Life Option Act (EOLOA). There have been rumblings that assisted suicide advocates have an interest in changing the 15-day waiting period required in the law – similar to a change made in Oregon and currently proposed to be studied in Washington state. Similar to Oregon, California law requires a qualified individual wishing to receive the lethal prescription for assisted suicide to submit two oral requests, a minimum of 15 days apart, and then a written request to his or her attending physician. Oregon reduced the waiting period to 48 hours for those persons who are expected to live less than 15 days.

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