

# LEGISLATIVE UPDATE



Week of March 30, 2020

## State Issues

State Budget Update

This week, there was more action from Legislative leadership and the Administration regarding the state budget process. If the Legislature was not in a COVID-19 recess, lawmakers would continue to have budget Subcommittee hearings on key Administrative proposals included in the January Budget, and ongoing discussions about Legislator and stakeholder proposals – all leading to the May Revise budget from the Governor. Given the extraordinary times, and to state the obvious, the budget process will be different this year.

It is confirmed that the Legislature will not come back into session on April 13, as first scheduled. Governor Newsom has stated that there is no time certain to come back into session. However, it is expected they will come back into session before the June 15 constitutional deadline to pass a state budget. June 1 seems to be the new target for the Legislature to return.

The Department of Finance has issued a notice that they will not be undergoing the normal adjustments to the January Budget proposal that typically happens this time of year; basically, indicating that the Governor’s January Budget proposal is no longer the basis for our final budget deliberations. They will be working on a “workload” budget, which is a budget that funds the current functions of the government, as is, without making major adjustments. This Workload budget will be passed by the June 15 deadline, but more budget work will be needed when there is a better handle on the state’s revenues and extraordinary expenditures. Since the tax deadline for the state has been pushed back to July 15, and there is some hope that the peak of coronavirus outbreak will have passed, it is expected the Legislature will come back late July to work through a more comprehensive 2020-21 State Budget. How, exactly, that is done unclear, but we should expect them to throw out the rulebook and develop a creative process (to use a favorite phrase of the Governor’s) to meet the moment.

California Health Corps

On Monday, Governor Newsom announced a new state initiative to secure enough health care professionals expected to be needed to address the Coronavirus Pandemic. While he did not provide a specific number needed, he indicated the state needs “thousands and thousands” of additional providers to staff the bed capacity the state is building. He launched California Health Corps which links to the California Department of Public Health website that provides a tool to help recruit retired, inactive, and not yet active health care providers – see [www.healthcorps.ca.gov](http://www.healthcorps.ca.gov).

Subsequently, during his press conference on Thursday, the Governor noted they have received over 70,000 applications from health professionals, and now the challenge will be to triage all of these applications – sort by specialty and region, and verify the information provided.

*(more)*

<p>California Health Corps <i>(continued)</i></p>	<p>The goal is to get recently retired nurses, doctors, EMTs, pharmacists, etal, or those working part time, to come back into practice. The plan is also to assess those currently in school who are about to graduate to be screened and provided provisional licenses (through June 30 per the Governor’s press conference) and put into practice.</p> <p>The Executive Order is scant on some specifics and does not offer blanket waivers, but it does grant the various relevant state authorities the ability to waive some of the rules related to professional licensing requirements and amend scopes of practice. Departments engaged in the waivers will be: Department of Public Health, which oversees hospital licensing; Department of Consumer Affairs, which oversees the scopes of practice of health care professionals; and, California Emergency Medical Authority, which regulates EMS. The full Executive Order can be found at: <a href="https://www.gov.ca.gov/wp-content/uploads/2020/03/3.30.20-EO-N-39-20-text.pdf">https://www.gov.ca.gov/wp-content/uploads/2020/03/3.30.20-EO-N-39-20-text.pdf</a>.</p> <p>As you will recall, scope of practice issues, licensing requirements, and staffing ratios have been serious points of contention within health care policy debates for years – and have been renewed every year in some form for the last many years. And while the Executive Order is clear that any changes in policy are only for the duration of the declared emergency, what happens on these issues over the next few months will have a major impact on health care policy moving forward.</p>
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**COVID-19 Information and Resources**

*There is much information and many resources emerging on the coronavirus (COVID-19). This section will focus on the ethical issues and concerns in treating patients, as well as provide additional links to resources that may be helpful to those in our communities and parishes.*

<p>California Notice on Disabilities</p>	<p>This week, California Departments of Health Care Services (DHCS), Public Health (CDPH), and Managed Health Care (DMHC) issued a notice related to non-discrimination in medical treatment for the COVID-19 – see <a href="https://www.dhcs.ca.gov/Documents/COVID-19/Joint-Bulletin-Medical-Treatment-for-COVID-19-033020.pdf">https://www.dhcs.ca.gov/Documents/COVID-19/Joint-Bulletin-Medical-Treatment-for-COVID-19-033020.pdf</a>.</p> <p>The State wanted to make it exceptionally clear that medical providers should not consider an individual’s disability status when determining which patients to treat if hospitals or other health care facilities experience a surge of patients needing life-saving care. This joint bulletin reminds health care providers and payers that rationing care based on a person’s disability status is impermissible and unlawful under both federal and state law.</p>
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<p>CHA Webinar: Making Ethical Choices with Limited Resources</p>	<p>On Wednesday, the Catholic Health Association of the U.S. held a webinar, “Making Ethical Choices with Limited Resources: Lessons from Catholic Health Care.” As the rate of COVID-19 escalates across the country and concerns multiply about the scarcity of resources to diagnose and treat the virus, important questions are being asked about how decisions are made to use limited resources fairly. Kevin Murphy, PhD, senior vice president, mission innovation, ethics and theology at CommonSpirit Health, addressed the approach from a national system-wide perspective, and Leslie Kuhnel, DBE, MPA, HEC-C, division vice president, theology and ethics, CHI Health-Midwest discussed how policies and principles are applied within regions and facilities. Becket Gremmels, PhD, system director of ethics at CHRISTUS Health, provided practical insights about creating policies and procedures for CHRISTUS Health, which has facilities in the U.S., as well as in Central and South America. A recording of the webinar, and other key COVID-19 resources, can be found at <a href="http://www.chausa.org/coronavirus">www.chausa.org/coronavirus</a>. <span style="float: right;"><i>(more)</i></span></p>
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CCCC COVID Conversations	The Coalition for Compassionate Care of California has created a central place for tools and resources to support persons in having important conversations about medical care in the face of COVID. Their COVID Conversations effort includes an online toolbox of cultivated materials, news, and resources; opportunities to share best practices, policies, and other resources created by others; and a COVID Conversations webinar series. See <a href="https://coalitionccc.org/covid-conversations-toolbox/">https://coalitionccc.org/covid-conversations-toolbox/</a> .
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