

# LEGISLATIVE UPDATE



Week of April 20, 2020

## State Issues

Governor Announces Plan to Resume Delayed Health Care

On Tuesday during Governor Newsom’s daily COVID-19 press conference, he announced that the State “plans to allow hospitals and health systems to resume delayed medical care for Californians – such as heart valve replacements, angioplasty and tumor removals, and key preventive care services, such as colonoscopies – which were deferred as the state’s health care delivery systems prepared for a surge of COVID-19 patients” – see <https://www.gov.ca.gov/2020/04/22/governor-newsom-announces-plan-to-resume-delayed-health-care-that-was-deferred-as-hospitals-prepared-for-covid-19-surge/>.

While there was some initial confusion, it was clarified that this is not an immediate move to restart; rather, guidelines are being developed that may be finalized within the next week or so. We expect the guidelines to allow “time sensitive” surgeries – a category of surgery between elective and urgent. We are also expecting parameters by region – hospitals in hotspots or expected hotspots may have this order delayed.

The Governor indicated that “it’s in the best interest of the overall health of our state to allow these procedures to resume **when they can be done safely.**” *[emphasis added]*. On a related note, last week the Governor announced six indicators that would drive California’s decision to gradually modify portions of the state’s stay-at-home order. They include:

- Expanding testing and contact tracing to be able to identify and isolate those with the virus;
- Preventing infection in people who are most at risk;
- Being able to handle surges in hospitals and the health care delivery system;
- Developing therapeutics to meet demand;
- Ensuring businesses, schools and childcare facilities can support physical distancing; and
- Determining when to reinstate certain measures like the stay-at-home order if need be.

However, a persistent shortfall in personal protective equipment also stands in the way of reopening, California Health and Human Services Secretary Mark Ghaly warned. “We need to have significant amounts before we can move ahead with any plans to modify our stay at home orders,” Ghaly said.

Update on Legislative Process

**Assembly.** It is getting clearer that the Assembly is planning to return on Monday, May 4. While it appears that some members still are not on board with that decision, all signs are pointing to the lower housing getting back to business in the next ten days. As expected, it will not be business as usual. We are hearing each committee will be able to have only one hearing and only hear 25-35 bills, at the discretion of the committee chair. Only two witnesses will be allowed to give substantive testimony, that has to be arranged in advance of the hearing.

*(more)*

<p>Update on Legislative Process <i>(continued)</i></p>	<p>In person lobbying will not be allowed and no large groups can be brought in to testify. One important piece, yet to be determined, is exactly how that testimony will be given – audio, video, or in person. It is possible that testimony will be provided in another room of the Capitol and streamed into the hearing room. How the Assembly will handle votes on the Assembly floor is still being discussed. One scenario being discussed is that they will allow half of the Assembly Members to vote on bills; let them leave the floor; and then, let the other half of the members vote. That means no bills will be on call, and no vote wrangling on the floor will be able to be done.</p> <p>Despite having this new information on the potential Assembly process, it remains unclear which health care bills will be heard. Many bills of interest are likely to proceed, but with substantive amendments. More information should be known by early next week.</p> <p><b>Senate.</b> The Senate is not yet committing to coming back on May 4. We continue to hear June 1 may be the start date for the upper house. Perhaps the Senate will host more budget hearings during the month of May – including some that will focus on the Governor’s May Revise Budget expected May 14 – but delay policy bills for June. The two houses are not on the same page and there is growing tension. When this has been the case in “normal” years, it has had a direct impact on what policy bills and budget items are approved – something we will be keeping top of mind as the new Legislative process moves forward.</p> <p><b>Budget.</b> We continue to understand that the Legislature will pass a status quo “workload” budget by the June 15 deadline, and then revisit the budget after the July 15 tax deadline.</p> <p>More issues related to the new Legislative process will become clear in the coming days and weeks.</p>
<p><b>Federal Issues</b></p>	
<p>Federal Actions on COVID-19 Relief</p>	<p>As reported by the Catholic Health Association, following is the latest actions from Congress and the federal government:</p> <p><b>Interim Aid for Provider Relief Fund Approved.</b> Congress has approved a \$484 billion "interim" pandemic relief package in between the recently-passed CARES Act and an expected fourth supplemental. The package includes \$75 billion in additional funding for the Provider Relief Fund and \$25 billion to increase testing capabilities.</p> <p><b>HHS Provides Information on Provider Relief Disbursements.</b> The Department of Health and Human Services this week provided additional information on disbursements from the relief fund. Some of the allocations from the \$175 billion fund include:</p> <ul style="list-style-type: none"> <li>▪ \$30 billion for hospitals</li> <li>▪ \$10 billion for current hotspots area — Top 100 counties based on COVID cases, and \$10 billion for future hotspots</li> <li>▪ \$10 billion for rural health care</li> <li>▪ \$400 million Native American health care</li> </ul> <p style="text-align: right;"><i>(more)</i></p>

<p>Federal Actions on COVID-19 Relief <i>(continued)</i></p>	<ul style="list-style-type: none"> <li>▪ \$20 billion to "reconcile" initial fund distribution (\$9.3 billion for heavy Medicare / Medicaid providers, children hospitals, and other providers and \$10.7 billion for providers with extreme loss through a provider certification form)</li> <li>▪ \$10 billion for the uninsured — the application portal will be established in the next 10 days with 30 days for reimbursement</li> <li>▪ Balance of \$85 billion yet to be distributed</li> </ul> <p><b>Fourth Supplemental Expected Next Month.</b> A fourth supplemental bill for COVID-19 treatment and economic stimulus is still expected to be unveiled early next month. The Catholic Health Association has joined with our partner organizations to emphasize priorities for the Medicaid program such as preventing the Medicaid Fiscal Accountability Regulation (MFAR) from taking effect; ensuring funding to address housing issues and homelessness assistance; and urging that all funds for COVID-19 testing, treatment and eventual vaccinations be made available to everyone, regardless of immigration status.</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>Quick Links</p>	<p>For your convenience, following are a few quick links to ethics-related (and other) COVID-19 resources.</p> <p>Catholic Health Association of the U.S. <a href="https://www.chausa.org/newsroom/coronavirus-resources/">https://www.chausa.org/newsroom/coronavirus-resources/</a></p> <p>Supportive Care Coalition <a href="https://supportivecarecoalition.org/resources-blog/2020/3/19/covid-19-resources">https://supportivecarecoalition.org/resources-blog/2020/3/19/covid-19-resources</a></p> <p>Coalition for Compassionate Care of California <a href="https://coalitionccc.org/covid-conversations-toolbox/">https://coalitionccc.org/covid-conversations-toolbox/</a></p>
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