



Significant new California laws of interest to physicians for 2017

The California Legislature had an active year, passing many new laws affecting health care. In particular, there was a strong focus on health care coverage, drug prescribing, public health, and workers' compensation issues. Below is a list of the most significant new health laws of interest to physicians.

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ADVERTISING

AB 2744 (Gordon) – Healing arts: referrals

Provides that the payment or receipt of consideration for advertising, wherein a licensed healing arts practitioner offers or sells services through a third-party advertiser, does not constitute a referral of patients when the third-party advertiser does not itself recommend, endorse, or otherwise select a licensee. Requires that a licensee disclose in the advertisement that a consultation is required and that the purchaser will receive a refund if not eligible to receive the service. Specifies that these provisions do not apply to basic health care services or essential health benefits, as defined.

(Business and Professions §650)

SB 1130 (Wieckowski) – False advertising: substantiation of claims

Existing law requires any person or business, on whose behalf advertising claims are made to consumers, upon request of the Director of Consumer Affairs, the Attorney General, any city attorney or any district attorney, to provide evidence of the facts upon which the advertising claims are based and allows for those named officials to take specified actions upon failure of the advertiser to adequately substantiate a claim within a reasonable time or if the requesting official has reason to believe that the advertising claim is false or misleading. This bill would additionally authorize a county counsel to request official evidence and take the specified action on the failure of the advertiser to respond or if the county counsel has reason to believe the advertising claim is false or misleading.

(Business and Professions Code §17508)

ALLIED HEALTH PROFESSIONALS

AB 923 (Steinorth) – Respiratory care practitioners

Makes changes to the disciplinary provisions of the Respiratory Care Practice Act, including creating additional causes for disciplinary action, specifying that the loss of a license does not deprive the Respiratory Care Board of jurisdiction to commence with disciplinary proceedings, and making other technical changes.

(Business and Professions Code §§3750 and 3755; Adds Business and Professions Code §3754.8)

AB 1808 (Wood) – Minors: mental health treatment or counseling services

Existing law authorizes a minor who is 12 years of age or older to consent to outpatient mental health treatment and counseling services, if, in the opinion of the attending professional person, the minor is mature enough to participate intelligently in those services. This bill amends the definition of a "professional person" to include a marriage and family therapist trainee, a licensed professional clinical counselor trainee, a registered psychological assistant, a psychology trainee, an associate clinical social worker, or a social work intern while working under supervision of certain licensed professionals to provide those services, as specified.

(Health and Safety Code §124260)

AB 2105 (Rodriguez) – Workforce development: allied health professions

Seeks to expand job training and employment for allied health professions. Requires the Department of Consumer Affairs to engage in a specified stakeholder process to update policies and remove barriers to facilitate the development of earn and learn training programs in the allied health professions by January 1, 2020.

(Unemployment Insurance Code §14017)

AB 2317 (Mullin) – California State University: Doctor of Audiology degrees

Authorizes the California State University to award the Doctor of Audiology (Au.D.) degree focused on preparing audiologists to provide health care services and be consistent with national accreditation standards. Establishes constraints on the funding and fees for these degrees.

(Adds Education Code §§66041 et seq. (Article 4.6, Chapter 2, Part 40, Division 5, Title 3))

ANCILLARY SERVICES

SB 1044 (Nguyen) – Barbering and cosmetology

Requires the State Board of Barbering and Cosmetology to determine by regulation when a fine is required to be assessed against both the holder of the establishment license and the individual licensee for the same violation. Also requires the Board to determine by regulation when a fine shall be assessed to only the holder of the establishment license or to only an individual licensee for the same violation. Requires the Board to consider specified factors in making these determinations.

(Business and Professions Code §7414; Adds Business and Professions Code §§7407.1 and 7408.1)

CLINICAL TRIALS

AB 1823 (Bonilla) – California Cancer Clinical Trials Program

Establishes the California Cancer Clinical Trials Program to increase patient access to eligible cancer clinical trials in underserved or disadvantaged communities and populations. Requests the University of California (UC) to establish and designate an institute or office with the authority to solicit and receive funds from business, industry, foundations, and other private and federal sources for the purpose of administering the program. Establishes a five member board to administer the program. Authorizes the UC to use its own state source funds for oversight and administration of the program relating to the initial start-up costs of the program only, provided the UC is reimbursed from federal and private sources funds. Requires the program, on receipt of funds totaling \$500,000, to establish the Cancer Clinical Trials Grant Program to increase patient access to cancer clinical trials in underserved or disadvantaged communities and populations.

(Adds Health and Safety Code §§101990 et seq. (Part 7, Division 101))

CONFIDENTIAL INFORMATION

AB 691 (Calderon) – Revised Uniform Fiduciary Access to Digital Assets Act

Enacts the Revised Uniform Fiduciary Access to Digital Access Act which authorizes a decedent’s personal representative or trustee to access and manage digital assets and electronic communications, as specified. Authorizes a person to use an online tool or give directions regarding the disclosure of digital assets. Requires a custodian of a person's digital assets to comply with a person’s request for disclosure of digital assets or to terminate an account, except in specified circumstances, for the purpose of administering the estate or trust. Immunizes the custodians from liability for an act or omission done in good faith in compliance with the law.

(Adds Probate Code §§870 et seq. (Part 20, Division 2))

AB 1671 (Gomez) – Confidential communications: disclosure

CMA Position: Support

Makes it a crime for a person who unlawfully eavesdrops upon or records a confidential communication with a health care provider, to intentionally disclose or distribute the contents of the confidential communication in any manner, in any forum, including on Internet websites and social media, or for any purpose without the consent of all parties to the confidential communication unless specified conditions are met.

(Penal Code §§632, 633.5, and 637.2; Adds Penal Code §632.01)

AB 2083 (Chu) – Interagency child death review

Authorizes the voluntary disclosure of specified information, including mental health records, criminal history information, and child abuse reports, by an individual or agency to an interagency child death review team. The bill would provide that written or oral information disclosed to a child death review team pursuant to these provisions would remain confidential, and would not be subject to disclosure or discovery by a third party unless otherwise required by law.

(Penal Code §11174.32)

AB 2119 (Chu) – Medical information disclosure: medical examiners and forensic pathologists

Amends the Confidentiality of Medical Information Act to expand disclosure of medical information to a medical examiner, forensic pathologist, or coroner, as specified. Requires a health facility, as defined, a health or behavioral health facility or clinic, and the physician in charge of the patient to release a patient's medical record to a medical examiner, forensic pathologist, or coroner, as specified, upon request, when a patient dies from any cause, natural or otherwise.

(Civil Code §56.10; Welfare and Institutions Code §§4514 and 5328.8)

AB 2296 (Low) – Digital signatures

Provides that a "digital signature" may be used to satisfy the requirements of an electronic signature under the Uniform Electronic Transactions Act. Provides that if public entities elect to use a digital signatures that meets specified requirements, the digital signature has the same force and effect of a manual signature in an communication with the public entity.

(Civil Code §1633.2; Government Code §16.5)

AB 2828 (Chau) – Personal information: privacy: breach

Requires any agency, person, or business that owns or licenses computerized data that includes personal information to disclose a breach of the security of the system to any California resident whose encrypted personal information was, or is reasonably believed to have been, acquired by an unauthorized person, if the encryption key or security credential was, or is reasonably believed to have been, acquired by an unauthorized person, and the entity that owns or licenses the encrypted information has a reasonable belief that the encryption key or security credential could render that personal information readable or useable.

(Civil Code §§1798.29 and 1798.82)

SB 514 (Anderson) – California Health Benefit Exchange

Prohibits the California Health Benefit Exchange (Covered California) from disclosing personal information obtained from an application for health care coverage to a certified insurance agent or certified enrollment

counselor without the consent of the applicant, unless the agent or counselor is assisting the applicant. Does not preclude Covered California from sharing information of current enrollees or applicants with the same counselor or insurance agent of record, as specified.

(Government Code §100503)

SB 1121 (Leno) – Privacy: electronic communications

Authorizes a government entity, without a warrant or other order, to access electronic device information if (1) the device is seized from an authorized possessor, as defined, who is on parole or post-release community supervision; (2) the device is seized from an authorized possessor who is subject to a search as a condition of parole or release; (3) for purposes of accessing information concerning the location or telephone number to respond to an emergency 911 call from that device. Allows for government entity to retain the information beyond 90 days in specified circumstances.

(Penal Code §§1534, 1546, 1546.1, and 1546.2)

SB 1137 (Hertzberg) – Computer crimes: ransomware

Expands the crime of extortion to include ransomware. Defines “ransomware” as a computer contaminant or lock that is placed or introduced without authorization into a computer, computer system, or network that restricts access by an authorized person to the computer or data, where the person responsible for the placement or introduction of the ransomware demands payment to remove the contaminant to restore access to the computer, system, or network.

(Penal Code §523)

SB 1238 (Pan) – Inmates: biomedical data

CMA Position: Support

Specifies that biomedical research does not include the accumulation of statistical data in the assessment of the effectiveness of non-experimental public health programs or treatment programs in which inmates routinely participate. Authorizes records-based biomedical research involving inmates that uses existing information, but which does not include prospective interaction with human subjects.

(Penal Code §§3500 and 3502)

CORPORATE BAR

AB 2024 (Wood) – Critical access hospitals: employment

Until January 1, 2024, authorizes a federally certified critical access hospital to employ physicians and surgeon or doctors of podiatric medicine and charge for professional services rendered by those medical professionals if the medical staff concur by an affirmative vote that the professional’s employment is in the best interest of the communities served by the hospital and the hospital does not direct or interfere with the professional judgment of a physician and surgeon, as specified. Requires the office, on or before July 1, 2023, to provide a report to the Legislature containing data on the impact of this authorization on federally certified critical access hospitals and their ability to recruit and retain physicians and surgeons, as specified.

(Business and Professions Code §2401)

DRUG PRESCRIBING AND DISPENSING

AB 1069 (Gordon) – Prescription drugs: collection and distribution program

Amends prescription drug repository and distribution program under which a pharmacy, including a pharmacy that is owned by, or contracts with, the county, may distribute surplus unused medications, as defined, to persons in need of financial assistance to ensure access to necessary pharmaceutical therapies. This bill authorizes a pharmacy that exists solely to operate the prescription drug repository and distribution program to repackage a reasonable quantity of donated medicine in anticipation of dispensing the medicine to its patient population. Requires a pharmacy to have repackaging policies and procedures in place for identifying and recalling medications; and requires the medication that is repackaged to be labeled with the earliest expiration date.

(Health and Safety Code §150204)

AB 1386 (Low) – Emergency medical care: epinephrine auto-injectors

Permits an "authorized entity" as defined, to use an epinephrine auto-injector (EAI) to render emergency care to another person in accordance with the law. Authorizes a pharmacy to furnish EAI to an authorized entity, if (1) the EAI is furnished exclusively for use at or in connection with an authorized entity; (2) an authorized health care provider provides a prescription; and (3) the records are maintained by the authorized entity for three years. Requires the authorized entity to create and maintain an operations plan related to its use of EAI; makes other technical and clarifying amendments; and, contains specified immunity provisions. Defines an "authorized entity" as any for-profit, nonprofit, or government entity or organization that employs at least one person or utilizes at least one volunteer or agent that has voluntarily completed a training course as specified.

(Civil Code §1714.23; Education Code §49414; Health and Safety Code §1797.197a; Adds Business and Professions Code §4119.4)

AB 1668 (Calderon) – Investigational drugs, biological products, and devices

Enacts the Right to Try Act authorizing the manufacturer of an investigational drug, biological product, or device that is not yet approved by the United States Food and Drug Administration (FDA) to make the investigational product available to an eligible patient with a serious or immediately life-threatening disease or condition, as specified, when that patient has considered all other treatment options currently approved by the FDA, has been unable to participate in a relevant clinical trial, and for whom the investigational drug has been recommended by the patient's primary physician and a consulting physician. Authorizes, but does not require, a health plan to provide coverage for any investigational product made available pursuant to this law. Specifies other criteria and requirements for the use of investigational drugs.

(Adds Health and Safety Code §§111548 et seq. (Article 4.5, Chapter 6, Part 5, Division 104))

AB 1748 (Mayes) – Pupils: pupil health: opioid antagonist

CMA Position: Support

Authorizes a pharmacy to furnish naloxone hydrochloride or another opioid antagonist to a school district, county office of education, or charter school if certain conditions are met. Requires the school district, county office of education, or charter school to maintain records regarding the acquisition and disposition of naloxone hydrochloride or another opioid antagonist furnished by the pharmacy for a period of 3 years from the date the records were created. Authorizes the provision of emergency naloxone hydrochloride or another opioid antagonist to school nurses and trained personnel. Immunizes physicians for issuing a prescription or order for such purposes. This bill contains other related provisions and other existing laws.

(Adds Business and Professions Code §4119.8; Adds Education Code §49414.3)

AB 2235 (Thurmond) – Board of Dentistry: pediatric anesthesia

Enacts "Caleb's Law" to require the Dental Board of California (DBC), on or before January 1, 2017, to provide a report to the Legislature on whether current statutes and regulations for the administration and monitoring of pediatric anesthesia in dentistry provides adequate protection for pediatric dental patients and would require the Board to make the report publicly available online. Specifies the minimum information that a dentist must report to the DBC in the event of a death of a patient or removal of a sedation or anesthesia patient to a hospital or emergency center for medical treatment and requires the report to be on a form approved by the Board. Authorizes the Board to assess a penalty on any licensee that fails to report specified adverse events within seven days. Requires that written informed consent for general anesthesia or conscious sedation in the case of a minor include specified information.

(Business and Professions Code §§1680 and 1682; Adds Business and Professions Code §1601.4)

SB 139 (Galgiani) – Controlled substances: synthetic cannabinoids

Expands the definition of a synthetic stimulant compound and a synthetic cannabinoid compound. Adds numerous specified drugs or chemicals to the existing list of prohibited synthetic cannabinoids Excludes from the definition substances that are in the federal clinical trial process, as specified. Expands the scope of and increases the penalty for existing crimes regarding the use or possession of these drugs. Authorizes the synthetic cannabinoid compounds to be obtained and used for bona fide research, instruction, or analysis if that possession and use does not violate federal law. Provides that a person charged with certain crimes under this bill is eligible to participate in preguilty plea drug court programs.

(Health and Safety Code §§11357.5 and 11375.5; Penal Code §1000.5; Adds Health and Safety Code §11375.7)

SB 482 (Lara) – Controlled substances: CURES database

Requires a health care provider authorized to prescribe, order, administer, or furnish a controlled substance to consult the Controlled Substances Utilization Review and Evaluation System (CURES) prior to prescribing a Schedule II, III or IV drug to a patient for the first and at least once every four months thereafter if the substance remains part of the treatment of the patient. Provides exemptions under specified conditions. Authorizes a health care practitioner to provide a patient with a copy of the patient’s CURES patient activity report.

(Health and Safety Code §§11165 and 11165.1; Adds Health and Safety Code §11165.4)

SB 1174 (McGuire) – Medi-Cal: foster care psychotropic medications

Requires the Department of Health Care Services (DHCS) and Department of Social Services (DSS), pursuant to a specified data-sharing agreement, to provide the Medical Board of California with information regarding Medi-Cal physicians and their prescribing patterns of psychotropic medications and related services for foster care children. Requires the Medical Board to report annually to the Legislature, DHCS, and DSS the results of the analysis of the data. Requires the Board to handle on a priority basis investigations and prosecutions of “repeated acts of clearly excessive prescribing, furnishing, or administering psychotropic medications to a minor without a good faith prior examination of the patient and medical reason”.

(Business and Professions Code §2220.05; Adds and repeals Business and Professions Code §2245; Adds and repeals Welfare and Institutions Code §14028)

SB 1229 (Jackson) – Home-generated pharmaceutical waste: secure drug take-back bins

CMA Position: Support

Provides that a collector, as defined, is protected generally from civil and criminal liability for any injury or harm that results from a collector maintaining a secure drug take-back bin on its premises, provided that the collector, not for compensation, acts in good faith to take specified steps to regularly inspect for potential tampering or diversion, ensure the health and safety of consumers and employees, and the proper disposal of the home-generated pharmaceutical waste contained in the secure drug take-back bin. This immunity shall not apply in the case of personal injury or wrongful death which results from the collector's gross negligence or willful or wanton misconduct in maintaining a secure drug take-back bin.

(Adds Civil Code §1714.24)

SJR 29 (Hernandez) – EpiPen: pricing.

Senate joint resolution measure to urge the U.S. Food and Drug Administration to reconsider its denial of approval for generic alternatives to the epinephrine auto-injector EpiPen and urge the U.S. Congress to investigate the impact that Mylan's monopoly has had on the price hikes for EpiPen, and urges the Congress and President to take action to limit the unrestrained ability of drug manufacturers to increase prices based only on what the market can bear.

HEALTH CARE COVERAGE

AB 72 (Bonta) – Health care coverage: out-of-network coverage

Requires a health care service plan, for contracts and health policies issued, amended, or renewed on or after July 1, 2017, to provide that if an enrollee or insured receives covered non-emergency services in a contracting health facility provided by a non-contracting individual health professional, that enrollee or insured would be required only to pay the "in-network cost-sharing amount" unless the enrollee or insured provides written consent that satisfies specified criteria. Establishes a payment rate which is the greater of the health care service plan or health insurer's average contracted rate for commercial products, as specified, or 125% of the amount Medicare reimburses for the same or similar services. Requires the establishment of an independent dispute resolution process (IDRP) for claims and claim disputes related to covered non-emergency services provided at a contracted health facility by a noncontracting individual health care professional. Requires the development of a standardized methodology for plans and insurers to use in determining the average contracted rate. Limits enrollee and insured cost sharing for these covered services to costs no than those incurred had the services been provided by a contracting health professional unless the enrollee provides advance written consent to use out-of-network benefits.

(Adds Health and Safety Code §§1371.30, 1371.31, and 1371.9; Adds Insurance Code §§10112.8, 10112.81, and 10112.82)

AB 565 (Cooley) – Group life insurance: required provisions

Clarifies that for dependent children over the age of majority, the group policyholder would be authorized to elect coverage at age variations up to the limiting age. Requires a waiver of insurance premiums for a specified period for a insured who becomes totally disabled prior o attaining a specified age. Provides a certain premium requirement when renewing a group life insurance policy.

(Insurance Code §§10203.4 and 10271.1)

AB 796 (Nazarian) – Health care coverage: autism and pervasive developmental disorders

Deletes the sunset date and extends indefinitely the provisions requiring health care service plan contracts and health insurance policies to provide coverage for behavioral health treatment for pervasive developmental disorder or autism.

(Health and Safety Code §1374.73; Insurance Code §10144.51)

AB 1703 (Santiago) – Inmates: medical treatment

CMA Position: Support

Expands the definition of “immediate medical or hospital care” to include critical specialty medical procedures or treatment, such as dialysis, which cannot be furnished, performed, or supplied at a city or county jail.

(Penal Code §4011.5)

AB 1795 (Atkins) – Health care programs: cancer

CMA Position: Support

Requires the Department of Health Care Services to provide breast cancer screening and diagnostic services to individuals that meet existing eligibility requirements and are either symptomatic, as defined, or whose age is within the range for routine breast cancer screening, as specified. Deletes existing limits on the period of coverage for treatment of breast cancer (18 months) and cervical cancer (24 months) and instead requires coverage for both cancers to remain for the duration of treatment, as long as the individual continues to meet all other eligibility requirements.

(Health and Safety Code §§104150 and 104161.1)

AB 2308 (Hernández, Roger) – Health care coverage: information to students

Establishes the California Health Care Coverage Act of 2016 to require the California State University and the California Community Colleges to provide their students information about insurance affordability programs, including how to apply for Medi-Cal and Covered California, commencing with the 2017-18 academic year. Extends, until January 1, 2021, the sunset date of existing law requiring public schools to provide parents or legal guardians with information regarding health care coverage options and enrollment assistance.

(Amends and repeals Education Code §49452.9; Adds and repeals Education Code §§66920 et seq. (Chapter 11.2, Part 40, Division 5, Title 3))

AB 2366 (Dababneh) – Long-term care insurance

Requires insurers that offer a policy that combines both life and long-term care coverage, to notify the policyholder of the availability of the new benefits or benefit eligibility or the new policy within 12 months of the date that the new policy series is made available for sale in this state. Limits new benefits to coverage for new long-term care services or providers that are material in nature.

(Insurance Code §10235.52)

SB 10 (Lara) – Health care coverage: immigration status

CMA Position: Support

Requires Covered California to apply to the United States Department of Health and Human Services for a Section 1332 waiver to allow persons who are not otherwise eligible to obtain coverage through the Exchange because of their immigration status to obtain coverage from Covered California. Requires Covered California,

after the waiver is granted, to require an issuer that offers a qualified health plan in the individual market through the Exchange to concurrently offer a California qualified health benefit plan to these individuals.

(Adds Government Code §100522)

SB 908 (Hernandez) – Health care coverage: premium rate change notice

CMA Position: Support

Requires, if the Department of Managed Health Care or the Department of Insurance determines that a small group rate or an individual rate is unreasonable or not justified, the contractholder or policyholder to be notified by the health care service plan or health insurer in writing of that determination. Requires the notification to be developed by the Department of Managed Health Care and the Department of Insurance, as specified. Prohibits a change in premium rates for individual health care service plan contracts and health insurance policies from becoming effective unless written notice is provided as specified. Makes additional changes related to a plan or insurer's premium rate increases.

(Health and Safety Code §§1374.21, 1385.03, 1385.07, 1385.11, and 1389.25; Insurance Code §§10113.9, 10181.3, 10181.7, 10181.11, and 10199.1)

SB 923 (Hernandez) – Health care coverage: cost-sharing changes

CMA Position: Support

Prohibits a health care service plan contract or health insurance policy from changing the cost sharing design, as defined, during the plan or policy year, except when required by state or federal law. Applies to grandfathered health care service plan contracts and health insurance policies and non-grandfathered health plan contracts and health insurance policies in the individual and small group markets that are issued, amended, or renewed on or after January 1, 2017.

(Adds Health and Safety Code §1374.255; Adds Insurance Code §10199.49)

SB 1091 (Liu) – Long-term care insurance

Defines “alternate plan of care” as a plan of care developed by a licensed health care practitioner that includes a specification of long-term care services required by an insured that is not specifically defined as a covered service under the policy. Authorizes the insured or an insurer to propose an alternate plan of care. Establishes other minimum standards for alternate plans of care as provided in long-term care insurance policies and requires insurers to provide written explanation notice as to the specific reason an agreement cannot be reached for policies or certificates that contain an alternate plan of care provision.

(Adds Insurance Code §§10231.3 and 10235.9a)

SB 1135 (Monning) – Health care coverage: notice of timely access to care

CMA Position: Support

Requires a health care service plan contract or a health insurance policy, including Medi-Cal managed care plans, that provides benefits through contracts with providers for alternative rates, to provide information to enrollees and insured regarding the standards for timely access to health care services and other specified health care access information, including information related to receipt of interpreter services, at least annually.

(Adds Health and Safety Code §1367.031; Adds Insurance Code §10133.53)

SB 1384 (Liu) – California Partnership for Long-Term Care Program

Current law establishes the California Partnership for Long-Term Care Program administered by the State Department of Health Care Services. This bill requires the department to adopt regulations requiring that a long-term care insurance policy or health care service plan contract that includes long-term care services include nursing and residential care facility coverage only, home care and community-based care coverage only, or comprehensive coverage. Requires plans and policies to include specified protections against loss of benefits due to inflation and requires the formation of a task force to implement reforms to the law.

(Insurance Code §10232.1; Welfare and Institutions Code §§22002, 22003, 22004, 22005, 22005.1, 22006, 22009, and 22010; Adds Insurance Code §10232.81; Amends, repeals, and adds Welfare and Institutions Code §22005.2; Adds Welfare and Institutions Code §22005.3; Adds and repeals Welfare and Institutions Code §22011)

SB 1477 (Committee on Health) – Health

States that the California Health Benefit Exchange is known as Covered California, and would deem any reference to the California Health Benefit Exchange or the Exchange to refer to Covered California. Replaces references from the now-repealed Healthy Families Program to the Medi-Cal program, and from the repealed AIM-Linked Infants Program to the Medi-Cal Access Program. Authorizes the Department of Health Care Services to enter into contracts for administrative activities to help implement the new Medicaid Managed Care regulations, and makes a technical change to ensure that trade associations remain eligible for federal emergency preparedness funds.

(Government Code §100500; Health and Safety Code §§101319, 123870, 123900, 123929, 123940, and 123955; Welfare and Institutions Code §14184.20; Adds and repeals Welfare and Institutions Code §14124.12)

HEALTH CARE FACILITIES AND FINANCING

AB 54 (Olsen) – Disability access: construction-related accessibility claims

CMA Position: Support

Modifies existing requirements for the reporting of information about demand letters and complaints to the California Commission on Disability Access in construction-related accessibility discrimination claim cases and requires the information to be submitted in a standard format specified by the Commission.

(Civil Code §55.32; Adds Government Code §8299.08.1)

AB 1732 (Ting) – Single-user restrooms

Commencing March 1, 2017, requires all single-user toilet facilities in any business establishment, place of public accommodation, or government agency to be identified as all-gender toilet facilities, as specified. Authorizes inspectors, building officials, or other local officials responsible for code enforcement to inspect for compliance with these provisions during any inspection.

(Adds Health and Safety Code §§118600 et seq. (Article 5, Chapter 2, Part 15, Division 104))

AB 1797 (Lackey) – In-home supportive services: application

Requires the county, upon receipt of an application for in-home supportive services, to provide the applicant with a confirmation number, as specified and further permits that confirmation number to be the individual's case number.

(Adds Welfare and Institutions Code §12301.16)

AB 2053 (Gonzalez) – Primary care clinics

Allows a licensed primary care clinic or affiliate clinic to add an additional physical plant maintained and operated on a separate premises without applying for a separate licensure upon notification and payment of a licensing fee. Requires the Department of Public Health, upon written notification by a licensed primary care clinic or an affiliate clinic that it is adding an additional physical plant maintained and operated on separate premises, to amend the clinic's license to include the additional physical plant as part of a single consolidated license.

(Health and Safety Code §1212)

AB 2093 (Steinorth) – Disability access

Increases the information available to and grants specified rights to prospective tenants of commercial property, about a commercial property's compliance with construction-related accessibility standards. Requires the commercial property owner or lessor to state on every lease or rental agreement executed on or after January 1, 2017, whether or not the premises has been inspected by a Certified Access Specialist (CASp) to meet applicable construction-related accessibility standards. Creates a presumption that making repairs or modifications necessary to correct violations of construction-related accessibility standards that are noted in a CASp report is the responsibility of the commercial property owner or lessor, unless otherwise mutually agreed upon by the parties to the lease or rental agreement.

(Civil Code §1938)

AB 2231 (Calderon) – Care facilities: civil penalties

Increases the civil penalties for specified violations and adopts penalties for repeat violations with regard to the licensure and regulation of community care facilities, residential care facilities, day care centers, and family day care homes. Makes further changes to the existing appeals process for deficiencies.

(Health and Safety Code §§1566.7, 1569.335, 1596.819, and 1596.859; Amends, repeals, and adds Health and Safety Code §§1548, 1568.0822, 1569.49, 1596.8595, 1596.99, and 1597.58)

AB 2491 (Nazarian) – Vehicles: stopping, standing, and parking

Authorizes a local authority to, by ordinance, prohibit a person from stopping, parking, or leaving a vehicle within 15 feet of a driveway that is used by certain emergency vehicles to enter or exit a police department, ambulance service provider facility, or general acute care hospital, except as specified, and would require a local authority that enacts that ordinance to provide appropriate curb markings or "KEEP CLEAR" pavement markings and post appropriate signs that delineate this prohibited area.

(Adds Vehicle Code §22500.2)

AB 2568 (Atkins) – County integrated health and human services program

Authorizes the County of San Diego, upon approval of the county board of supervisors and California Health and Human Services Agency, to operate an integrated and comprehensive health and human services system, and further, specifies the purview and requirements of this system.

(Government Code §30025; Adds Welfare and Institutions Code §18986.89)

AB 2737 (Bonta) – Nonprovider health care districts

Requires a "nonprovider healthcare district," as defined, to spend at least 80% of its annual budget on community grants awarded to organizations that provide direct health services, and not more than 20% of its annual budget to be spent on administrative expenses. Defined "nonprovider healthcare district" to mean a

healthcare district that meets all of the following criteria: (1) The district does not provide direct health care services to consumers; (2) The district has not received an allocation of real property taxes in the past three years; (3) The district has assets of \$20 million or more; (4) The district is not located in a rural area that is typically underserved for health care services; and, (5) The district, in two or more consecutive years, has dedicated an amount to community grants that is less than twice the total administrative costs and overhead not directly associated with revenue-generating enterprises.

(Adds Health and Safety Code §§32495 et seq. (Chapter 8, Division 23))

AB 2750 (Gomez) – Tissue banks

Creates an additional exemption from the tissue bank licensing requirement for the storage of allograft tissue by a person if that person is a hospital or outpatient setting, the person maintains a log including specified information pertaining to the allograft tissue, and the allograft tissue meets specified requirements, including, among other things, that the allograft tissue was obtained from a California-licensed tissue bank, is individually boxed and labeled with a unique identification number and expiration date, and is intended for the express purpose of implantation into or application on a patient.

(Health and Safety Code §1635.1)

SB 269 (Roth) – Disability access

CMA Position: Support

Establishes a rebuttable presumption that certain "technical violations" do not cause a plaintiff difficulty, discomfort or embarrassment if specified conditions are met, for the purpose of an award of minimum statutory damages in a construction-related accessibility claim. Requires State Architect to publish and regularly update, easily accessible lists of businesses that file notices of inspection by a certified access specialist. Makes additional changes to increase educational materials and information on the federal Americans with Disabilities Act and the California Commission on Disability Access.

(Civil Code §§55.53 and 55.56; Government Code §§4459.7, 4459.8, and 8299.06; Adds Government Code §65941.6; Adds Government Code §§65946 et seq. (Article 4, Chapter 4.5, Division 1, Title 7))

SB 833 (Committee on Budget and Fiscal Review) – Health

Budget bill to make various statutory changes to implement the 2016-17 budget for health related issues, including those related to Covered California, Medi-Cal, opioid prevention and naloxone programs, workers' compensation, public health programs, and mental health services. Deletes obsolete law and makes various other technical changes.

(Government Code §100504; Health and Safety Code §§1324.9, 120955, 120960, 130301, 130303, 130305, 130306, 130309, 130310, and 130313; Welfare and Institutions Code §§5848.5, 10752, 14009.5, 14046.7, 14105.436, 14105.45, 14105.456, 14105.86, 14131.10, 14132.56, 14154, 14301.1, and 14592; Adds Health and Safety Code §§1179.80 et seq. (Part 6.2, Division 1); Adds Health and Safety Code §§122450 et seq. (Part 7.5, Division 105); Repeals Health and Safety Code §§120965, 130307, and 130312; Amends and repeals Labor Code §138.7; Amends and adds Welfare and Institutions Code §14593)

SB 837 (Committee on Budget and Fiscal Review) – State government

Budget bill to make various statutory changes necessary to implement the state administration-related provisions of the Budget Act of 2016. Changes the names of state agencies and references from "medical marijuana" to "medical cannabis."

(Business and Professions Code §§27, 101, 144, 205.1, 19300, 19300.7, 19302, 19302.1, 19303, 19304, 19305, 19306, 19307, 19310, 19311, 19312, 19315, 19321, 19322, 19323, 19326, 19327, 19328, 19332, 19332.5, 19334, 19335, 19341, 19342, 19343, 19344, 19345, 19347, 19350, 19351, 19360, and 19300 et seq. (Chapter 3.5, Division 8); Amend and repeal Business and Professions Code §19320; Add Business and Professions Code §§19332.2, 19347.1, 19347.2, 19347.3, 19347.4, 19347.5, 19347.6, 19347.7, and 19347.8; Repeals Business and Professions Code §§19313, 19318, and 19331 et seq. (Article 6, Chapter 3.5, Division 8); Repeal and add Business and Professions Code §19300.5; Election Code §§2154, 2265, 5100, and 5151; Fish and Game Code §§1602, 12025.2, and 12029; Add Fish and Game Code §1617; Food and Agricultural Code §52452; Add Food and Agricultural Code §37104; Add Government Code §§15283 and §30035 et seq. (Chapter 6.45, Division 3, Title 3 Health and Safety Code §§11362.769, 11362.777, 44559.11, 50800.5, 51341, 51349, 51455, and 51622; Amend and renumber Health and Safety Code §§51344 and 51345; Amend and repeal Health and Safety Code §11362.775; Add Health and Safety Code §§44559.14, 50912.5 51511 and 500899.1 et seq. (Chapter 19, Part 2, Division 31); Repeal Health and Safety Code §§51342, 51347, 51348, 51618, and 51619; Revenue and Taxation Code §§12206, 17058, 18900.24, and 23610.5; Add and repeal Revenue and Taxation Code §§17053.88.5 and 23688.5; Repeal Revenue and Taxation Code §31020; Water Code §§1058.5, 1525, 1535, 1552, 1831, 1840, 1845, 1846, and 5103; Add Water Code §§1847, 1848, and 13149)

SB 867 (Roth) – Emergency medical services

CMA Position: Co-sponsor

Extends until January 1, 2027, provisions of the Maddy Emergency Medical Services (EMS) Fund, which authorizes each county to establish an emergency medical services fund for reimbursement of costs related to emergency medical services. Extends provision that authorize each county to elect to levy an additional \$2 penalty for deposit into the EMS Fund for every \$10 of fines, penalties, and forfeitures collected for criminal offenses and requires 15% of those funds collected to be used as funding for pediatric trauma centers.

(Government Code §76000.5; Health and Safety Code §1797.98a)

SB 957 (Hueso) – Health care districts: design-build process

Authorizes, until January 1, 2025, any health care district to use the design-build process when contracting for the construction of a hospital or health facility building.

(Health and Safety Code §32132.5)

SB 1076 (Hernandez) – General acute care hospitals: observation services

Establishes new requirements for observation services provided by a general acute care hospital, including that observation services provided in an outpatient observation unit comply with the same nurse-to-patient ratios as supplemental emergency services, and requiring patients to receive written notice when they are receiving observation services in an inpatient unit of the hospital. Requires the Office of Statewide Health Planning and Development to include summaries of observation services data in its data summaries.

(Health and Safety Code §128765; Adds Health and Safety Code §1253.7)

SB 1159 (Hernandez) – California Health Care Cost, Quality, and Equity Data Atlas

Requires the California Health and Human Services Agency to research options for developing a cost, quality, and equity data atlas. Authorizes the agency to enter into contracts or agreements to conduct this research and make the results of the research available to the public no later than March 1, 2017, by submitting a report to the Assembly and Senate Committees on Health.

(Adds Health and Safety Code §§127670 et seq. (Chapter 8, Part 2, Division 107); Repeals the heading of Health and Safety Code Chapter 8, Part 2, Division 107)

SB 1365 (Hernandez) – Hospitals

Requires a general acute care hospital, except as specified, to notify patients scheduled for a service in a hospital-based outpatient clinic, as defined, when that service is available in a nonhospital-based location that may cost less. Defines “hospital-based outpatient clinic,” for purposes of this bill, as a department of a provider, as defined in specified provisions of federal regulations, that is not located on the campus of that provider.

(Adds Health and Safety Code §1323.1)

MEDI-CAL

ABX2 1 (Thurmond) – Developmental services: Medi-Cal: funding

CMA Position: Support

Implements targeted rate increases in Medi-Cal for the community-based developmental services system, and prohibits the Department of Health Care Services from retroactive recoupment of Medi-Cal payment reductions and rate freezes and overpayments as specified.

(Welfare and Institutions Code §§4519.5, 4639.5, 4652.5, 4689.8, 4690.5, 4691.6, 4691.9, and 4860; Adds Welfare and Institutions Code §§4519.8, 4691.10, 4691.11, 4870, 14105.075, and 14105.195)

AB 168 (Maienschein) – Mental health: community-based services

Requires the Department of Health Care Services to provide an update to the Legislature by March 1, 2017 to include specified information if California is selected as a participating state and awarded a grant, authorized under the federal Protecting Access to Medicare Act of 2014, to participate in a time-limited demonstration program that is designed to improve access to community mental health and substance use treatment services provided by certified community behavioral health clinics to Medi-Cal beneficiaries, as specified.

(Welfare and Institutions Code §14021.2; Statutes of 2016, Chapter 6 §1)

AB 635 (Atkins) – Medical interpretation services

CMA Position: Support

Requires the Department of Health Care Services (DHCS) to work with stakeholders to conduct a study to identify current requirements for medical interpretation services as well as education, training, and licensure requirements, analyze other state Medicaid programs, and make recommendations on strategies that may be employed regarding the provision of medical interpretation services for Medi-Cal beneficiaries who are limited English proficient (LEP), in compliance with applicable state and federal requirements. Establishes a pilot project to improve medical interpretation services.

(Adds and repeals Welfare and Institutions Code §§14146 et seq. (Article 4.6, Chapter 7, Part 3, Division 9))

AB 847 (Mullin) – Mental health: community-based services

Requires the Department of Health Care Services to develop a proposal to participate in the time-limited demonstration program, administered by the federal Secretary of Health and Human Services under the Protecting Access to Medicare Act of 2014, that is designed to improve access to community mental health and substance use treatment services provided by certified community behavioral health clinics to Medi-Cal beneficiaries.

(Adds Welfare and Institutions Code §14021.2)

AB 1114 (Eggman) – Medi-Cal: pharmacist services

Requires the following pharmacy services to be covered under Medi-Cal: 1) Furnishing travel medications; 2) Furnishing naloxone hydrochloride; 3) Furnishing self-administered hormonal contraception; 4) Initiating and administering immunizations; and 5) Providing tobacco cessation counseling and furnishing nicotine replacement therapy. Requires the rate of reimbursement for pharmacist services to be at 85% of the fee schedule for physician services under Medi-Cal.

(Adds Welfare and Institutions Code §14132.968)

AB 1299 (Ridley-Thomas) – Medi-Cal: specialty mental health services foster children

CMA Position: Support

Declares the intent of the Legislature to ensure that foster children who are placed outside of their county of original jurisdiction are able to access mental health services in a timely manner consistent with their individualized strengths and needs and the requirements of Early and Periodic Screening, Diagnostic, and Treatment program standards and requirements. Requires the State Department of Health Care Services to issue policy guidance that establishes the conditions for and exceptions to presumptive transfer of responsibility for providing or arranging for mental health services to a foster child from the county of original jurisdiction to the county in which the foster child resides, as prescribed. Makes additional related changes.

(Welfare and Institutions Code §14714; Adds Welfare and Institutions Code §14717.1)

AB 1568 (Bonta) – Medi-Cal: demonstration project

Requires the Department of Health Care Services to establish and operate, as part of the Medi-Cal 2020 Demonstration Project Act, the Whole Person Care pilot program, the Dental Transformation Initiative. Requires the department to conduct or arrange to have conducted, any study, report and assessments required under the Special Terms and Conditions. Makes the operation of this bill contingent upon the enactment of SB 815 (Hernandez and De León) of the 2015-16 legislative session.

(Adds Welfare and Institutions Code §§14184.21, 14184.41, 14184.51, 14184.60, 14184.61, 14184.70, and 14184.71)

AB 1696 (Holden) – Medi-Cal: tobacco cessation services

CMA Position: Support

Requires Medi-Cal to cover tobacco cessation services only to the extent that federal financial participation is available and not otherwise jeopardized. Requires that the tobacco cessation services covered under Medi-Cal be subject to utilization controls and include all intervention recommendations assigned a grade A or B by the United States Preventive Services Task Force. Specifies that beneficiaries who are covered under this bill shall not be required to receive a particular form of tobacco cessation service as a condition of receiving any form or tobacco cessation service. Requires the Department of Health Care Services to seek any federal approvals necessary to implement the provisions of this bill.

(Adds Welfare and Institutions Code §14134.25)

AB 1849 (Gipson) – Foster youth: transition to independent living

CMA Position: Support

Requires, for purposes of the 90-day transitional independent living plan for foster youth, information provided regarding health insurance options to include verification that the eligible youth or non-minor is enrolled in Medi-Cal and a description of the steps that have been or will be taken by the youth's social worker or probation officer to ensure that the eligible youth or non-minor is transitioned into the Medi-Cal program upon case

closure, as specified. Revises the list of information, services, and documents that are required to be provided to the non-minor to include, among other things, a Medi-Cal Benefits Identification Card and continued uninterrupted enrollment in Medi-Cal for eligible non-minors.

(Welfare and Institutions Code §§391 and 16501.1)

AB 1863 (Wood) – Medi-Cal: federally qualified health centers: rural health centers

CMA Position: Support

Adds marriage and family therapists to the list of healthcare professionals that qualify for a face-to-face encounter with a patient at federally qualified health centers (FQHCs) or rural health clinics (RHCs) for purposes of a per-visit Medi-Cal payment under the prospective payment system. Makes conforming changes, including requiring an FQHC or an RHC that includes the costs of the services of a marriage and family therapist that chooses to bill these services as a separate visit, to apply for an adjustment to its per-visit rate; that multiple encounters on the same day constitutes a single visit; adjustment of rates; and, change in scope of service requirements.

(Welfare and Institutions Code §14132.100)

AB 2207 (Wood) – Medi-Cal: dental program

Requires the Department of Health Care Services to make changes to improve the Medi-Cal Dental Program (Denti-Cal), including expediting the provider enrollment and monitoring dental service access and utilization. Adds performance measures to the lists for both the dental fee-for-service program and dental health plan, as specified, increases oversight responsibility over Denti-Cal contracts, and aligns annual and quarterly data reporting requirements for the dental fee-for-service program and dental health plans.

(Welfare and Institutions Code §§14132.915 and 14459.6; Adds Welfare and Institutions Code §§14184.72, 14184.73, 14184.74, and 14184.75; Adds Welfare and Institutions Code §§14149.8 et seq. (Article 4.10, Chapter 7, Part 3, Division 9))

AB 2394 (Garcia, Eduardo) – Medi-Cal: nonmedical transportation

CMA Position: Support

Requires Medi-Cal to cover nonmedical transportation, as defined, for a beneficiary to obtain covered Medi-Cal services commencing on July 1, 2017 or the effective date of any necessary federal approvals, whichever is later. Specifies that nonmedical transportation includes, at a minimum, round trip transportation for a beneficiary to obtain covered Medi-Cal services by passenger car, taxicab, or any other form of public or private conveyance, and mileage reimbursement when conveyance is in a private vehicle arranged by the beneficiary and not through a transportation broker, bus passes, taxi vouchers, or train tickets.

(Welfare and Institutions Code §14132)

SBX2 2 (Hernandez) – Medi-Cal: managed care organization tax

Establishes a new managed care organization (MCO) provider tax to be administered by the Department of Health Care Services on licensed health care service plans, managed care plans contracted to provide Medi-Cal services, and alternate health care service plans, as defined. Establishes applicable taxing tiers and continuously appropriates funds from the MCO tax for purposes of funding the non-federal share of Medi-Cal managed care rates. Reduces the amount of the corporate or gross premiums tax rate. Sunsets these provisions on June 30, 2020.

(Adds Insurance Code §685.5; Adds and repeals Revenue and Taxation Code §§12202.2 and 24330; Adds and repeals Welfare and Institutions Code §§14199.50 et seq. (Article 6.7, Chapter 7, Part 3, Division 9))

SB 586 (Hernandez) – Children's services

CMA Position: Support

Authorizes the Department of Health Care Services to establish a Whole Child Model program under which managed care plans served by county organized health system or Regional Health Authority in designated counties would provide California Children's Services (CCS) to Medi-Cal eligible CCS children and youth. Limits number of managed care plans that are eligible to participate in the program.

(Health and Safety Code §§123835 and 123850; Welfare and Institutions Code §§14093.06, 14094.2, and 14094.3; Adds Welfare and Institutions Code §§14094.4 et seq. (Article 2.985, Chapter 7, Part 3, Division 9))

SB 815 (Hernandez) – Medi-Cal: demonstration project

Establishes the Medi-Cal 2020 Demonstration Project Act, administered by the Department of Health Care Services and consistent with the Special Terms and Conditions approved by the federal agencies. Requires the department to implement the Global Payment Program, under which global payment program systems, would be eligible to receive global payments calculated on a value-based point methodology based on the health care they provide to the uninsured. Requires the department to establish and operate the Public Hospital Redesign and Incentive in Medi-Cal under which entities would be eligible to earn incentive payments by undertaking special projects set forth in the Special Terms and Conditions, for which there are required project metrics and targets. Makes the operation of this bill contingent upon the enactment of AB 1568 (Bonta) of the 2015-16 legislative session.

(Adds Welfare and Institutions Code §§14184 et seq. (Article 5.5, Chapter 7, Part 3, Division 9))

SB 1291 (Beall) – Medi-Cal: specialty mental health minor and non-minor dependents

CMA Position: Support

Requires a mental health plan review to be conducted annually by an external quality review organization (EQRO) that includes specific data for Medi-Cal eligible minor and non-minor dependents in foster care. Requires the Department of Health Care Services to share data, post corrective action plans to address deficiencies identified by the EQRO review online, and notify the mental health plan of any deficiencies and would require the mental health plan to provide a written corrective action plan to the department.

(Adds Welfare and Institutions Code §14717.5)

MEDICAL MARIJUANA

AB 21 (Wood) – Medical marijuana: cultivation licenses

Removes provisions giving the Department of Food and Agriculture the sole licensing authority for medical marijuana cultivation as specified. Provides that exemption from licensure requirements does not limit or prevent a city, county, or city and county from exercising its police power authority under specified constitutional provisions.

(Health and Safety Code §11362.777)

AB 2516 (Wood) – Medical cannabis: state cultivator license types: specialty cottage type

Medical Cannabis Regulation and Safety Act provides for the licensure and regulation of commercial activities relating to medical marijuana, cannabis, and establishes various types of state cultivator licenses to be issued to

qualified applicants by the Department of Food and Agriculture This bill creates a Type 1C, or "specialty cottage," medical cannabis state cultivator license.

(Business and Professions Code §19332)

AB 2679 (Cooley) – Medical marijuana: regulation: research

Requires agencies with regulatory responsibilities under the Medical Cannabis Regulation and Safety Act to include additional information in their existing reporting requirements to the Legislature. Authorizes the University of California (UC) to ascertain the effect of marijuana on motor skills within its existing authority to study the efficacy and safety of administering medical marijuana. Exempts collectives or cooperatives that manufacture medical cannabis products from certain criminal sanctions, if specific requirements are met.

(Business and Professions Code §19353; Health and Safety Code §§11362.775 and 11362.9)

SB 1036 (Hernandez) – Controlled substances: synthetic cannabinoids: analogs

Expands the definition of controlled substance analog to include a substance the chemical structure of which is substantially similar to the chemical structure of a synthetic cannabinoid compound. Requires the controlled substance analogs of synthetic cannabinoid compounds to be treated the same as the synthetic cannabinoid compound of which it is an analog for the purpose of the provisions criminalizing synthetic cannabinoid compounds.

(Health and Safety Code §§11400 and 11401)

MEDICAL PRACTICE AND ETHICS

AB 1709 (Gallagher) – Deaf or hard-of-hearing individuals

Replaces the term "hearing impaired" with the term "hard of hearing," or a close variation of "hard of hearing," and makes additional technical, nonsubstantive changes in those provisions.

(Civil Code §§54.1 and 54.2; Code of Civil Procedure §224; Education Code §§44265.6, 44265.8, and 44265.9; Evidence Code §§754 and 754.5; Government Code §§8593, 8593.2, 8840, 8841, 53112, 68560.5, and 84507; Health and Safety Code §§1259, 1373.65, 1568.02, and 121369; Penal Code §13835.4; Public Utilities Code §§2881, 2881.1, 2881.2, and 2881.4; Unemployment Insurance Code §§11000, 11003, and 11004; Welfare and Institutions Code §§10559, 10620, 10621, 10622, 10624, and 10625)

AB 1744 (Cooper) – Sexual assault forensic medical evidence kit

Requires the Department of Justice's Bureau of Forensic Services, the California Association of Crime Laboratory Directors, and the California Association of Criminalists to work collaboratively with public crime laboratories, in conjunction with the California Clinical Forensic Medical Training Center, to develop a standardized sexual assault forensic medical evidence kit, containing minimum basic components, to be used by all California jurisdictions.

(Penal Code §13823.12; Adds Penal Code §13823.14)

AB 2457 (Bloom) – Autopsy: electronic image systems

Allows coroners, medical examiners, and other authorized personnel to perform an autopsy or post-mortem examination to use an electronic imaging system to fulfill specified post-mortem examination or autopsy requirements. Requires a dissection autopsy to be performed to determine the cause and manner of death if the results of an autopsy using electronic imaging provides the basis to suspect that the death was caused by or related to the criminal act of another and it is necessary to collect evidence for presentation in a court of law.

(Government Code §27521)

AB 2499 (Maienschein) – Sexual assault evidence kits

Requires the Department of Justice, on or before July 1, 2018, and in consultation with law enforcement agencies and crime victims groups, to establish a process by which victims of sexual assault may inquire regarding the location and information regarding their sexual assault evidence kits.

(Adds Penal Code §680.1)

SB 1005 (Jackson) – Marriage

Replaces references to a “husband” or “wife” with references to a “spouse.” Defines “spouse” as including “registered domestic partner,” and makes other conforming and related changes.

(Business and Professions Code §17537.1; Civil Code §§14, 50, 51.3, 51.11, 682, 682.1, 683, 1099, 1569, and 3390; Code of Civil Procedure §§17, 116.540, 371, 703.140, and 704.930; Commercial Code §1201; Corporations Code §§158, 704, 5612, 7612, 12482, 25102, and 25206; Education Code §§21100, 24803, and 68062; Evidence Code §§917 and 980; Financial Code §§14860, 18220, 18523, and 22327; Fish and Game Code §8552.3; Government Code §§9359.9, 9374, 21571, 21572, and 21573; Health and Safety Code §§1373.5, 18080, 25299.54, and 32501; Insurance Code §§10112, 10121.5, 10320, 10493, and 10494.6; Labor Code §3503; Penal Code §§7, 152.3, 197, 270e, 273.5, 281, 282, 284, 534, 4002, and 13700; Probate Code §§59, 78, 100, 101, 103, 2407, 5040, 5042, 5203, 6122, 6227, 6240, 13500, and 13600; Revenue and Taxation Code §§17021, 17039, 17045, 17053.5, 17054, 17077, 17555, 18501, 18522, 18530, 18531.5, 18532, 19006, 19035, 19107, 19110, 19701.5, and 20542; Streets and Highways Code §2804; Unemployment Insurance Code §13003; Welfare and Institutions Code §§742.16, 7275, 12003, 14140, and 18291; Adds Business and Professions Code §14.2; Adds Corporations Code §12.2; Adds Education Code §73.2; Adds Elections Code §356.5; Adds Evidence Code §215; Adds Family Code §143; Adds Financial Code §11.2; Adds Fish and Game Code §9.2; Adds Food and Agricultural Code §36; Adds Government Code §12.2; Adds Harbors and Navigation Code §12.2; Adds Health and Safety Code §12.2; Adds Insurance Code §12.2; Adds Labor Code §12.2; Adds Military and Veterans Code §19; Adds Probate Code §72; Adds Public Contract Code §11005; Adds Public Resources Code §12.2; Adds Public Utilities Code §12.2; Adds Revenue and Taxation Code §12.2; Adds Streets and Highways Code §12.2; Adds Unemployment Insurance Code §11.2; Adds Vehicle Code §12.2; Adds Water Code §12.2; Welfare and Institutions Code §12.2)

SB 1065 (Monning) – Dismissal or denial of petitions to compel arbitration: Elder and Dependent Adult Civil Protection Act

In a claim under the Elder and Dependent Adult Civil Protection Act in which a party has been granted a court preference and an appeal from an order dismissing or denying a petition to compel arbitration, provides that the court of appeal must issue its decision within 100 days after the notice of appeal is filed, as specified. Shortens the time within which a party may file a notice of appeal and provides an exception allowing the court to grant an extension of time, only if good cause is shown and will promote the interests of justice.

(Adds Code of Civil Procedure §1294.4)

SB 1189 (Pan) – Postmortem examinations or autopsies: forensic pathologists

CMA Position: Support

Requires a forensic autopsy to only be conducted by and the results be determined by a licensed physician and surgeon. Requires all persons in the autopsy suite be informed of risks presented by bloodborne pathogens be informed that they should wear personal protective equipment in accordance with existing law for health and safety purposes. Prohibits, if an individual dies due to the involvement of law enforcement activity, law enforcement personnel directly involved with the care and custody of that individual from being involved with any portion of the postmortem examination nor allowed inside the autopsy suite during the performance of the autopsy. Requires specified materials related to a death that is incident to law

enforcement activity to be made available to the physician and surgeon who conducts the autopsy prior to the completion of the investigation of the death.

(Government Code §§27491.4, 27491.41, 27491.43, 27491.46, 27491.47, and 27520; Adds Government Code §27522)

MENTAL HEALTH

AB 38 (Eggman) – Mental health: Early Diagnosis and Preventive Treatment Program

CMA Position: Support

Establishes the Early Diagnosis and Preventive Treatment Program Fund, to provide funding to the Regent of the University of California for the purpose of providing reimbursement to the program that would utilize integrated systems of care to provide early intervention, assessment, diagnosis, a treatment plan, and necessary services for individuals with severe mental illness and children with severe emotional disturbance, as specified.

(Adds and repeals Welfare and Institutions Code §§5950 et seq. (Part 6, Division 5))

AB 59 (Waldron) – Mental health services: assisted outpatient treatment

CMA Position: Support

Under the Assisted Outpatient Treatment Demonstration Project Act of 2002, known as Laura's Law, grants counties the authority to offer certain assisted outpatient treatment services and requires participating counties to provide prescribed assisted outpatient services including a service planning and delivery process, that are client-directed and employ psychosocial rehabilitation and recovery principles. Current law requires the Department of Health Care Services to submit a report and evaluation of all counties implementing any component of these provisions to the Governor and the Legislature. This bill extends the operation of the program until January 1, 2022, and deletes the reporting requirement.

(Welfare and Institutions Code §§5348 and 5349.5)

AB 1836 (Maienschein) – Mental health: referral of conservatees

CMA Position: Support

Authorizes the court, if a conservatorship has already been established under the Probate Code, to refer the conservatee for an assessment by the local mental health system or plan to determine if the conservatee has a treatable mental illness, including whether the conservatee is gravely disabled as a result of a mental disorder or impairment by chronic alcoholism, and is unwilling to accept, or is incapable of accepting, treatment voluntarily. Requires the court to appoint counsel to a conservatee if he or she cannot afford counsel.

(Welfare and Institutions Code §5350.5)

AB 1962 (Dodd) – Criminal proceedings: mental competence

Requires, on or before July 1, 2017, the State Department of State Hospitals, through the use of a workgroup representing specified groups, to adopt guidelines for education and training standards for a psychiatrist or licensed psychologist to be considered for appointment by the court. The bill would provide that, if there is no reasonably available expert who meets the guidelines, the court shall have discretion to appoint an expert who does not meet the guidelines.

(Penal Code §1369)

AB 2246 (O'Donnell) – Pupil suicide prevention policies

CMA Position: Support

Requires the governing board of a local educational agency that serve students in grades 7 to 12 to adopt policies on the prevention of student suicides that specifically addresses the needs of high risk groups. Requires the California Department of Education to develop and maintain a model suicide prevention policy to serve as a guide for local educational agencies.

(Adds Education Code §§215 *et seq.* (Article 2.5, Chapter 2, Part 1, Division 1, Title 1))

SB 955 (Beall) – State hospital commitment: compassionate release

Establishes compassionate release provisions for a defendant who has been committed to a state hospital because, among other reasons, the defendant is incompetent to stand trial or be adjudged for punishment, mentally disordered, or has been found not guilty by reason of insanity. Makes additional conforming changes and authorizes the director of the State Department of State Hospitals to adopt emergency regulations to implement the law.

(*Penal Code §1026; Adds Penal Code §§1370.015 and 2977; Adds Welfare and Institutions Code §4146*)

PROFESSIONAL LICENSING AND DISCIPLINE

AB 2745 (Holden) – Healing arts: licensing and certification

Specifies that a physician or surgeon licensee who is otherwise eligible for a license but is unable to practice some aspects of medicine safely due to a disability is authorized to receive the limited license if specified described conditions are met, including payment of the appropriate fee. Clarifies the Medical Board of California's authority to: revoke, suspend, or deny a license for licensees and applicants who are guilty of unprofessional conduct, expands the Board's authority to request medical records of deceased patients, authorizes specified disciplinary actions for licensed midwives, research psychoanalysts, and certified polysomnographic technologists.

(*Business and Professions Code §§2088, 2221, 2225, 2441, 2519, 2520, 2529, 3576, and 3577; Adds Business and Professions Code §§2522, 2523, 2529.1, 2529.6, 3576.1, 3576.2, and 3576.3*)

AB 2859 (Low) – Professions and vocations: retired category: licenses

Authorizes any of the boards, within the Department of Consumer Affairs to establish, by regulation, a system for a retired category of licensure for persons not actively engaged in the practice of their profession, as specified. Prohibits the holder of a retired license from engaging in any activity for which a license is required, unless the board, by regulation, specifies the criteria for a retired licensee to practice his or her profession. Requires a board, upon receipt of a complaint from any person, to investigate the actions of any licensee, including, among others, a person with a license that is retired or inactive.

(*Business and Professions §464*)

SB 1139 (Lara) – Health professionals: medical degree programs: healing arts residency training programs: undocumented immigrants: nonimmigrant aliens: scholarships, loans, and loan repayment

CMA Position: Support

Prohibits a student, including a person without lawful immigration status, and/or a person who is exempt from nonresident tuition, who meets the requirements for admission to a medical degree program at any public or

private postsecondary educational institution that offers such a program, or who meets the requirements for admission to a healing arts residency training program whose participants are not paid, from being denied admission based on his or her citizenship or immigration status. Prohibits specified grant and loan repayment and forgiveness programs from denying an application based on an applicant's citizenship or immigration status.

(Adds Business and Professions Code §§2064.3 and 2064.4; Adds Health and Safety Code §128371)

SB 1177 (Galgiani) – Physician and Surgeon Health and Wellness Program

CMA Position: Sponsor

Authorizes the Medical Board of California (MBC) to establish a Physician and Surgeon Health and Wellness Program for the early identification and appropriate interventions to support a licensee in his or her rehabilitation from substance abuse and authorizes MBC to contract with an independent entity to administer the program. Requires program participants to enter into an individual agreement with the program that includes, among other things, a requirement to pay expenses related to treatment, monitoring, and laboratory tests, as provided.

(Adds Business and Professions Code §§2340 et seq. (Article 14, Chapter 5, Division 2))

SB 1261 (Stone) – Physicians and surgeons: residency fee exemption

Removes the requirement that a physician and surgeon reside in California in order to receive a license fee waiver, when the license is for the sole purpose of providing voluntary and unpaid services.

(Business and Professions Code §§2083 and 2442)

SB 1478 (Committee on Business, Professions and Economic Development) – Healing arts

Existing law requires the board to keep a copy of a complaint it receives regarding the poor quality of care rendered by a licensee for 10 years from the date the board receives the complaint, as provided. This bill deletes that requirement. Existing law requires a Controlled Substance Utilization Review and Evaluation System (CURES) fee of \$6 to be assessed annually, at the time of license renewal, on specified licensees to pay the reasonable costs associated with operating and maintaining CURES for the purpose of regulating those licensees. This bill, beginning July 1, 2017, except as specified, exempts licensees issued a license placed in a retired or inactive status from the CURES fee requirement. Makes other changes to statutes related to dentists, podiatrists, opticians, licensed marriage and family therapists, licensed professional clinical counselors, and clinical social workers. Deletes obsolete provisions, makes conforming changes and other non-substantive changes.

(Business and Professions Code §§27, 208, 1632, 1634.1, 2467, 2541.3, 2541.6, 2545, 2550, 2550.1, 2552, 2553, 2554, 2555, 2555.1, 2558, 2559, 2559.2, 2559.3, 2559.5, 2561, 2563, 3027, 4980.36, 4980.37, 4980.43, 4980.78, 4980.79, 4980.81, 4992.05, 4996.3, 4996.18, 4996.23, 4999.12, 4999.40, 4999.47, 4999.52, 4999.60, 4999.61, and 4999.120; Adds Business and Professions Code §§4980.09 and 4999.12.5; Repeals Business and Professions Code §§852, 2029, 2540.1, 4980.40.5, 4999.54; and 2380 et seq. (Article 16, Chapter 5, Division 2))

PUBLIC HEALTH

AB 857 (Cooper) – Firearms: identifying information

CMA Position: Support

Requires a person, commencing July 1, 2018, who manufactures or assembles a firearm to first apply to and obtain from the Department of Justice a unique serial number or other mark of identification prior to manufacturing or assembling a firearm, as specified. Requires by January 1, 2019, any person who, as of July 1,

2018, owns a firearm that does not bear a serial number assigned to it to obtain a unique serial number or other mark of identification prior to manufacturing or assembling a firearm, as specified.

(Penal Code §§11106, 16520, 23910, and 30105; Adds Penal Code §§29180 et seq. (Chapter 3, Division 7, Title 4, Part 6))

AB 1135 (Levine) – Firearms: assault weapons

CMA Position: Support

Revises the definition of what constitutes an “assault weapon” in order to close the bullet button loophole. Also requires registration of weapons, which were previously not prohibited, which now fall under the new definition.

(Penal Code §§30515 and 30900; Adds Penal Code §30680)

AB 1554 (Irwin) – Powdered alcohol

CMA Position: Support

Prohibits the Department of Alcoholic Beverage Control (ABC) from issuing a license to manufacture, distribute, or sell powdered alcohol. Defines "powdered alcohol" to mean an alcohol prepared or sold in a powder or crystalline form that is used for human consumption in that form or reconstituted as an alcoholic beverage when mixed with water or any other liquid. Prohibits the possession, purchase, sell, offer for sale, distribution, manufacture, or use of powdered alcohol. Specifies that any person who possesses, purchases, or uses powdered alcohol is guilty of an infraction and subject to a fine of \$125.

(Business and Professions Code §§23004 and 23005; Adds Business and Professions Code §§23003.1, 23794, and 25623.5)

AB 1639 (Maienschein) – Pupil health: The Eric Paredes Sudden Cardiac Arrest Prevention Act

CMA Position: Support

Establishes the Eric Paredes Sudden Cardiac Arrest Prevention Act that would require the California Department of Education to make available specified guidelines and materials on sudden cardiac arrest and warning signs. Requires pupils and parents to sign an acknowledgment of receipt of an information sheet on sudden cardiac arrest symptoms and warning signs before athletic participation. Requires training of coaches, athletic trainers, or authorized persons. Requires coaches to remove from participation a pupil who passes out or faints while participating in or immediately following an athletic activity and sets other requirements for action in the event a pupil experiences specified symptoms.

(Adds Education Code §§33479 et seq. (Article 13.5, Chapter 3, Part 20, Division 2, Title 2))

AB 1680 (Rodriguez) –Crimes: emergency personnel

CMA Position: Support

Makes it a misdemeanor to operate or use an unmanned aerial vehicle, remote piloted aircraft, or drone to impede specified emergency personnel in the performance of their duties while coping with an emergency.

(Penal Code §402)

AB 1695 (Bonta) – Firearms: false reports of stolen firearms

Expands the existing misdemeanor of making a false report to law enforcement to include a person who reports to law enforcement and other specified individuals that a firearm has been lost or stolen knowing the report to be false. Makes it a misdemeanor for a person convicted of making a false report under this law to own a firearm within 10 years of the conviction.

(Penal Code §§148.5 and 29805)

AB 1719 (Rodriguez) – Pupil instruction: cardiopulmonary resuscitation

CMA Position: Support

Requires, commencing with the 2018-19 school year, the governing board of a school district or the governing body of a charter school that requires a course in health education for graduation from high school to include instruction in performing compression-only cardiopulmonary resuscitation, as provided. Encourages those entities to provide to pupils general information on the use and importance of an automated external defibrillator. Expands existing immunities from civil liability related to this law.

(Adds Education Code §51225.6)

AB 2439 (Nazarian) – HIV testing.

Creates a pilot project to be administered by the California Department of Public Health (CDPH) to assess and make recommendations regarding the effectiveness of the routine offering of a human immunodeficiency virus (HIV) test in the emergency department of a hospital. Requires participating hospitals to offer an HIV test to any patient in the hospital emergency department, collect specified information, and to report the information to CDPH.

(Adds Health and Safety Code §120992)

AB 2510 (Linder) – Firearms: license to carry concealed: uniform license

Requires the Attorney General to develop a uniform license that may be used as indicia of proof of licensure throughout the state to carry a concealed firearm.

(Penal Code §26175)

AB 2640 (Gipson) – Public health: HIV

Requires a medical care provider or person administering a test for human immunodeficiency virus (HIV) to provide patients who test negative for HIV infection, and are determined to be at high risk for HIV infection by the medical provider or person administering the test, with specified information and information about methods that prevent or reduce the risk of contracting HIV, including, but not limited to, pre-exposure prophylaxis and post-exposure prophylaxis, consistent federal guidelines.

(Health and Safety Code §120990)

AB 2696 (Gaines, Beth) – Diabetes prevention and management

CMA Position: Support

Requires the California Department of Public Health (CDPH) to submit a report to the Legislature, as specified, that includes a summary and compilation of recommendations on diabetes prevention and management of diabetes from certain sources. Requires CDPH to post annually specified information regarding programs and activities aimed at preventing or managing diabetes on its website.

(Adds Health and Safety Code §§104250 et seq. (Article 1, Chapter 4, Part 1, Division 103))

SB 32 (Pavley) – California Global Warming Solutions Act of 2006: emissions limit

Requires the Air Resources Board (ARB) to ensure that statewide greenhouse gas emissions are reduced to at least 40% below the 1990 level by 2030.

(Adds Health and Safety Code §38566)

SB 819 (Huff) – Powdered alcohol

CMA Position: Support

Prohibits the purchase, sale, and offer for sale, distribution, manufacture, possession, or use of powdered alcohol, as defined. Requires the Department of Alcoholic and Beverage Control to revoke the license of any licensee who manufactures, distributes, or sells powdered alcohol.

(Business and Professions Code §§23004 and 23005; Adds Business and Professions Code §§23003.1, 24200.7 and 25623)

SB 880 (Hall) – Firearms: assault weapons

CMA Position: Support

Revises the definition of what constitutes an “assault weapon” in order to close the bullet button loophole. Also requires registration of weapons, which were previously not prohibited, which now fall under the new definition.

(Penal Code §§30515 and 30900; Adds Penal Code §30680)

SB 1064 (Hancock) – Sexually exploited minors

Current law, until January 1, 2017, authorizes the Counties of Alameda and Los Angeles, respectively, to create a pilot project, contingent upon local funding, for the purposes of developing a comprehensive, replicative, multidisciplinary model to address the needs and effective treatment of commercially sexually exploited minors, as specified. This bill extends the operation of this program indefinitely in the County of Alameda and expands the definition of a “commercially sexually exploited minor.”

(Welfare and Institutions Code §§18259 and 18259.3; Repeals Welfare and Institutions Code §§18259.1 and 18259.5; Amends headings of Welfare and Institutions Code §§18259 et seq. (Chapter 4.3, Part 6, Division 9))

SB 1095 (Pan) – Newborn screening program

CMA Position: Support

Requires the California Department of Public Health to expand statewide screening of newborns to include screening for any disease that is detectable in blood samples as soon as practicable, but no later than two years after the disease is adopted by the federal Recommended Uniform Screening Panel (RUSP) or enactment of this bill, whichever is later.

(Health and Safety Code §§124977 and 125001)

SB 1235 (De León) – Ammunition

CMA Position: Support

Creates a new regulatory framework, contingent on whether the Safety for All Act of 2016 is enacted by voters, for the purchase and sale of ammunition in California. Requires the Department of Justice to maintain ammunition vendor license information, ammunition transaction information, and authorizes specified agencies, officials, and officers to disseminate the name of a person and specified ammunition purchase information by that person if the subject of the record has been arraigned, is being prosecuted, or is serving a sentence for conviction of domestic violence or is the subject of a protective order, as specified.

(Penal Code §§16150, 17315, 30000, 30306, and 30352 ; Adds Penal Code §§11106.5, 16151, 30355 et seq. (Article 4, Chapter 1, Division 10, Title 4, Part 6), and 30360 et seq. (Article 5, Chapter 1, Division 10, Title 4, Part 6); Repeals Penal Code §§16650, 16662, and 30312; Repeals and adds Penal Code §§30370 and 30345 et seq. (Article 3, Chapter 1, Division 10, Title 4, Part 6))

SB 1383 (Lara) – Short-lived climate pollutants: methane emissions: dairy and livestock: organic waste: landfills

CMA Position: Support

Requires the Air Resources Board to approve and implement the comprehensive short-lived climate pollutant strategy to achieve, from 2013 levels, a 40% reduction in methane, a 40% reduction in hydrofluorocarbon gases, and a 50% reduction in anthropogenic black carbon, by 2030. Establishes specific targets and requires state agencies to adopt regulations to reduce organic waste in landfills, reduce methane emissions, and increase the sustainable production and use of renewable gas.

(Adds Health and Safety Code §§39730.5, 39730.6, 39730.7, and 39730.8; Adds Public Resources Code §§42652 et seq. (Chapter 13.1, Part 3, Division 30))

SB 1408 (Allen) – Tissue donation

Deletes the prohibition in existing law on the transplantation of tissue from a donor with HIV and instead permits such transplantation if the physician and surgeon performing the transplantation has ensured that the organ from an individual who has been found reactive to HIV may be transplanted only into an individual who has been found reactive for HIV before receiving the organ and is either participating in clinical research approved by an institutional review board pursuant to federal requirements, or if the U.S. Secretary of Health and Human Services determines that participation in this clinical research is no longer warranted as a requirement for transplants, as specified.

(Business and Professions Code §2221.1; Health and Safety Code §§1621.5, 1635, 1635.1, 1644.5, and 120290)

SB 1435 (Jackson) – School curriculum: health framework: healthy relationships

Requires the Instructional Quality Commission to consider including comprehensive information, for grades K-8, on the development of healthy relationships in the next revision to the “Health Framework for California Public Schools.” Provides that “development of a healthy relationship” includes but is not limited to: 1) understanding the principles of treating one another with respect, dignity, and kindness; 2) demonstrating the ability to use interpersonal communication skills to address and resolve disagreement and conflict; and 3) recognizing when and how to respond to dangerous or other situations that may result in the bullying, harassment, harming, or hurting of another person.

(Adds Education Code §33546)

REPORTING REQUIREMENTS

AB 1001 (Maienschein) – Child abuse reporting: foster family agencies

Expands the definition of mandated reporter to include a board member of a public or private organization whose duties require direct contact and supervision of children, including a foster family agency.

(Health and Safety Code §1558; Penal Code §§11165.7 and 11166; Adds Health and Safety Code §§1522.09 and 1556.5)

AB 2325 (Bonilla) – Ken Maddy California Cancer Registry

Requires, on or after January 1, 2019, a pathologist diagnosing cancer to report cancer diagnoses to the California Department of Public Health (CDPH) by electronic means in a format prescribed by CDPH.

(Health and Safety Code §103885)

SB 877 (Pan) – Reporting and tracking of violent deaths

CMA Position: Support

To the extent that funding is appropriated by the Legislature or available through private funds in each fiscal year, requires the State Department of Public Health to establish and maintain the California Electronic Violent Death Reporting System to collect data on violent deaths, as specified, and to post on the department's website a summary and analysis of the collected data.

(Adds Health and Safety Code §§131230 et seq. (Article 3, Chapter 2, Part 1, Division 112))

REPRODUCTIVE ISSUES

AB 1954 (Burke) – Health care coverage: reproductive health care services

Enacts the Direct Access to Reproductive Health Care Act which prohibits health care service plans and health insurers from requiring an enrollee to receive a referral prior to receiving coverage or reproductive and sexual health care services, as provided.

(Adds Health and Safety Code §1367.31; Adds Insurance Code §10123.202)

AB 2349 (Chiu) – Assisted reproduction agreements for gestational carriers

Extends the jurisdiction of California courts under the Uniform Parentage Act to a proceeding to determine parentage of the child as to a child who is conceived pursuant to assisted reproduction agreement for gestational carriers if certain conditions are satisfied, including if the child is born in this state, or one or more parties to the agreement resides in this state or resided in the state at the time the agreement was executed. Provides for additional information that must be included in an assisted reproduction agreement for gestational carriers regarding the persons from whom the gametes originated.

(Family Code §§7613, 7620, and 7962)

SB 999 (Pavley) – Health care coverage: contraceptives: annual supply

CMA Position: Support

Requires a health care service plan or a health insurance policy to cover, and authorizes a pharmacist to dispense, up to a 12-month supply of FDA-approved, self-administered hormonal contraceptives when dispensed at one time for an enrollee or insured at one time by a provider, pharmacist, or at a location licensed or authorized to dispense drugs or supplies. Incorporates chaptering amendments for SB 253 (Monning).

(Business and Professions Code §4064.5; Health and Safety Code §1367.25; Insurance Code §10123.196; Adds Welfare and Institutions §14000.01)

SB 1433 (Mitchell) – Incarcerated persons: contraceptive counseling and services

CMA Position: Oppose unless amended

Provides that any incarcerated person in state prison who menstruates shall, upon request, have access and be allowed to use materials necessary for personal hygiene with regard to their menstrual cycle and reproductive system. Any incarcerated person who is capable of becoming pregnant shall, upon request, have access and be allowed to obtain contraceptive counseling and their choice of birth control methods, as specified, unless medically contraindicated. Imposes additional requirements on the California Correctional Health Care Services regarding the implementation of these provisions.

(Repeals and adds Penal Code §3409)

TOBACCO

ABX2 7 (Stone, Mark) – Smoking in the workplace

CMA Position: Co-sponsor

Expands prohibition on smoking tobacco products inside an enclosed space at a place of employment to include an owner-operated business, as defined. Eliminates most of the specified exemptions that permit smoking in certain work environments, such as hotel lobbies, bars and taverns, banquet rooms, warehouse facilities, and employee break rooms.

(Labor Code §6404.5)

ABX2 9 (Thurmond) – Tobacco use programs

CMA Position: Co-sponsor

Expands eligibility for funding for the tobacco use prevention program to include charter schools and require the State Department of Education to require that all school districts, charter schools, and county offices of education receiving funding under the program adopt and enforce a tobacco-free campus policy prohibiting the use of products containing tobacco and nicotine, as specified, in and on its properties. Prohibits the use of tobacco and nicotine products in a county office of education, charter school or school district-owned or leased building, on school or district property, and in school or district vehicles without regard to whether those entities receive funding and requires them to prominently display signs at all entrances to school property stating "Tobacco use is prohibited."

(Health and Safety Code §§104420 and 104466; Adds Health and Safety Code §§104559 et seq. (Article 4, Chapter 1, Part 3, Division 103))

ABX2 11 (Nazarian) – Cigarette and tobacco product licensing: fees and funding

CMA Position: Co-sponsor

Adjusts state tobacco license fees under the Cigarette and Tobacco Products Licensing Act of 2003 to change the retailer license fee from a \$100 one-time fee to a \$265 annual fee, and increase the distributor and wholesaler license fee from \$1,000 to \$1,200.

(Business and Professions Code §§22973 and 229771.1)

AB 1901 (Quirk) – Taxation: cigarettes: unaffixed stamps

CMA Position: Support

Extends penalties for possessing, selling, or buying unaffixed cigarette tax stamps, and requires any fines assessed to be deposited in the Cigarette and tobacco products Compliance Fund. Defines "unaffixed stamps" as stamps for which the tax has previously been paid by a licensed distributor and previously affixed to a package. Requires the Board of Equalization to destroy any stamps seized under this section.

(Revenue and Taxation Code §30473.5)

AB 2770 (Nazarian) – Cigarette and tobacco product licensing: fees and funding

CMA Position: Support

Requires a tobacco retailer that adds an additional retail location to renew the license for that location based on a 12-month period beginning in the month the retailer obtained its license for its first retail location. Requires the Board of Equalization to report to the Legislature, Governor and Department of Finance, no later than

January 1, 2019, regarding the adequacy of funding for the licensing program under the Cigarette and Tobacco Products Licensing Act of 2003.

(Business and Professions Code §§22972, 22973, 22973.3, and 22977.1; Adds Business and Professions Code §§22990.5 and 22990.7)

SBX2 5 (Leno) – Electronic cigarettes

CMA Position: Co-sponsor

Defines the term “smoking” for purposes of the Stop Tobacco Access to Kids Enforcement Act. Changes the definition under the law of “tobacco products” to include electronic devices, such as electronic cigarettes, that deliver nicotine or other vaporized liquids, and makes the furnishing of tobacco product to a minor a misdemeanor.

(Business and Professions Code §§22950.5, 22958, and 22962; Civil Code §1947.5; Education Code §48901; Government Code §7597; Health and Safety Code §§1234, 1286, 1530.7, 1596.795, 104495, 114332.3, 114371, 118910, 118925, and 118948; Labor Code §6404.5; Penal Code §308; Public Utilities Code §§561 and 99580; Vehicle Code §12523; Amend, repeal, and add Business and Professions Code §22980.2; Adds Business and Professions Code §§22971.7 and 22973.3; Adds Health and Safety Code §119406; Repeals Health and Safety Code §119405)

SBX2 7 (Hernandez) – Tobacco products: minimum legal age

CMA Position: Co-sponsor

Extends the applicability of specified provisions of the Stop Tobacco Access to Kids Enforcement Act, including but not limited to provisions prohibiting the furnishing of tobacco products to, and the purchase of tobacco products by minors to persons under 21 years of age. Authorizes the California Department of Public Health to conduct random, onsite sting inspections of tobacco product retailers. Exempts active military personnel who is 18 years of age or older as confirmed by a military identification card.

(Business and Professions Code §§17537.3, 22951, 22952, 22956, 22958, and 22963; Penal Code §308; Adds Business and Professions Code §22964)

SB 977 (Pan) – Tobacco: youth sports events

CMA Position: Support

Prohibits a person from smoking a tobacco product, as defined, within 250 feet of a youth sports event, as defined. Defines "smoke or smoking" as inhaling, exhaling, burning, or carrying any lighted or heated cigar, cigarette, or pipe, or any other lighted or heated tobacco or plant product intended for inhalation, whether natural or synthetic, in any manner or in any form. Provides that “smoking” includes the use of an electronic smoking device that creates an aerosol or vapor, in any manner or in any form, or the use of any oral smoking device for the purpose of circumventing the prohibition of smoking. Does not preempt authority of local county or city to regulate the use of tobacco products around a youth sports event.

(Health and Safety Code §104495)

WORKERS' COMPENSATION

AB 1244 (Gray) – Workers' compensation

Requires the Administrative Director of the Division of Workers' Compensation to promptly suspend any physician, practitioner, or provider from participating in the workers' compensation system if as a physician, practitioner, or provider, or entity meets specified criteria, including if that individual has been convicted of any

felony or misdemeanor involving fraud or abuse of the Medi-Cal program, Medicare program, or workers' compensation system, if that individual's license, certificate, or approval to provide health care has been surrendered or revoked, or if that individual or entity has been suspended, due to fraud or abuse, from participation in the Medicare or Medicaid programs.

(Labor Code §4906; Welfare and Institutions Code §14123; Adds Labor Code §139.21)

AB 2503 (Oberholte) – Workers' compensation: utilization review

CMA Position: Support

Requires a physician providing treatment to an injured worker to send any requests for authorization for medical treatment, with supporting documentation, to the claims administrator for the employer, insurer, or other entity, according to rules adopted by the Administrative Director of the Division of Workers' Compensation.

(Labor Code §4610)

AB 2883 (Committee on Insurance) – Workers' compensation: employees

Existing law defines an employee, for purposes of the laws governing workers' compensation, to include, among other persons, officers and members of boards of directors of quasi-public or private corporations while rendering actual service for the corporations for pay. This bill revises exceptions from the definition of an employee to apply to an officer or member of the board of directors, as specified, if he or she owns at least 15% of the issued and outstanding stock of the corporation, or an individual who is a general partner of a partnership or a managing member of a limited liability company, and that person elects to be excluded by executing a written waiver of his or her rights under the laws governing workers' compensation, stating under penalty of perjury that he or she is a qualifying officer or director, or a qualifying general partner or managing member, as applicable.

(Labor Code §§3351 and 3352; Repeals Labor Code §6354.7)

SB 914 (Mendoza) – Workers' compensation: medical provider networks: independent medical reviews

Deletes references to the American College of Occupational and Environmental Medicine's Occupational Medicine Practice Guidelines as standards for independent medical reviews in the workers' compensation system.

(Labor Code §4616.4)

SB 1160 (Mendoza) – Workers' compensation

CMA Position: Co-sponsor

Requires the Administrative Director of the Division of Workers' Compensation to adopt regulations to provide employees with notice regarding access to medical treatment following the denial of a claim. Increases the penalty assessments and require the posting of a list of claims administrators who are in violation of data reporting requirements. Revises and recasts provisions related to utilization review with regard to injuries occurring on or after January 1, 2018. Modernizes data collection in the workers' compensation system and implements anti-fraud measures in the filing and collection of liens.

(Labor Code §§138.4, 138.6, 4610, 4610.5, 4610.6, 4903.05, 4903.8, 5307.27, 5710, 5811, and 6409; Adds Labor Code §4615)

SB 1175 (Mendoza) – Workers' compensation: requests for payment.

Requires that, for treatment provided on or after January 1, 2017, the medical provider must submit the request for payment within 12 months of the date of service or 12 months of the date of discharge for inpatient facility services. Requires that, for medical-legal services or expenses, the request for payment must be submitted 12

months of the date of service. Unless otherwise allowed, any request for payment and bills for medical-legal charges are barred unless timely submitted.

(Labor Code §§4603.2, 4603.4, and 4625)

WORKFORCE & OFFICE SAFETY ISSUES

AB 488 (Gonzalez) – Employment discrimination

Authorizes individuals employed under a special license in a nonprofit sheltered workshop or rehabilitation facility to bring an action under the Fair Employment and Housing Act for prohibited harassment or discrimination. Provides for an affirmative defense against claims under this law and exemptions from the licensure requirement in certain specified circumstances.

(Government Code §12926; Adds Government Code §12926.05)

AB 1676 (Campos) – Employers: wage discrimination

Existing law prohibits an employer from paying an employee at wage rates less than the rates paid to employees of the opposite sex in the same establishment for equal work and establishes exceptions to the prohibition based on bona fide factors other than sex. This bill specifies that prior salary cannot, by itself, justify any disparity in compensation under the bona fide exception to this prohibition.

(Labor Code §1197.5)

AB 1843 (Stone, Mark) – Applicants for employment: criminal history

Prohibits an employer from asking an applicant for employment to disclose, or from utilizing as a factor in determining any condition of employment, information concerning or related to an arrest, detention, processing, diversion, supervision, adjudication, or court disposition that occurred while the person was subject to the process and jurisdiction of juvenile court law.

(Labor Code §432.7)

AB 1847 (Stone, Mark) – California Earned Income Tax Credit

Request employers currently required to notify employees who may be eligible for the federal earned income tax credit to also notify these employees that they may be eligible for the California Earned Income Credit under the same conditions.

(Revenue and Taxation Code §§19851, 19852, 19853, and 19854)

AB 1978 (Gonzalez) – Employment: property service workers.

This bill enacts protections for property service workers, including any individual predominantly working, whether as an employee, independent contractor, or a franchisee, as a janitor. Requires employers who employs or enters into contracts with covered workers to provide janitorial services to keep accurate records, register with the Labor Commissioner, and provide employees with a pamphlet on sexual harassment. Requires the Division of Labor to establish a biennial in-person sexual violence and harassment prevention training requirement for employees and employers.

(Adds Labor Code §§1420 et seq. (Part 4.2, Division 2))

AB 2048 (Gray) – National Health Service Corps State Loan Repayment Program.

CMA Position: Support

Requires the Office of Statewide Health Planning and Development to include all federally qualified health centers located in California in the National Health Service Corps State Loan Repayment Program's certified eligible site list. As part of the application process for the program, the bill requires program sites to agree to provide matching funds.

(Health and Safety Code §127940)

AB 2337 (Burke) – Employment protections: victims of domestic violence, sexual assault, or stalking

Requires employers to inform each employee of his or her rights established under current law protecting employees affected by domestic violence, sexual assault, or stalking, by providing specific information in writing to new employees upon hire and to other employees upon request. Requires the Labor Commissioner to develop a form that an employer may elect to use to satisfy this notice requirement, as specified.

(Labor Code §230.1)

AB 2535 (Ridley-Thomas) – Employment: wages: itemized statements

Current law provides that an itemized wage statement does not need to show total hours worked by the employee if the employee's compensation is solely based on salary and the employee is exempt from payment of overtime as specified. This bill would additionally exempt an employee exempt from the payment of minimum wage and overtime laws under specified conditions.

(Labor Code §226)

SB 1001 (Mitchell) – Employment practices: unfair practices

Relates to existing law prohibiting an employer from engaging in an unfair immigration-related practice against a person. Makes it unlawful for an employer to request more or different documents than are required under federal law, to refuse to honor documents tendered that on their face reasonably appear to be genuine, to refuse to honor documents or work authorization based upon the specific status or term of status that accompanies the authorization to work, or to reinvestigate or reverify an incumbent employee's authorization to work, as specified.

(Labor Code §1019.1)

SB 1063 (Hall) – Conditions of employment: wage differential: race or ethnicity

Amends the Equal Pay Act to prohibit employers from paying any of its employees at wage rates less than the rates paid to employees of a different race or ethnicity for substantially similar work.

(Labor Code §§1197.5 and 1199.5)

SB 1167 (Mendoza) – Employment safety: indoor workers: heat regulations

Requires the Division of Occupational Safety and Health to propose to the Occupational Safety and Health Standards Board for review and adoption, a heat illness and injury prevention standard applicable to workers working in indoor places of employment by January 1, 2019. In developing the standard, heat stress and heat strain guidelines in the 2016 Threshold Limit Values and Biological Exposure Indices developed by the American Conference of Governmental Industrial Hygienists must be taken into consideration.

(Adds Labor Code §6720)