



MEMORANDUM

1411 East 31 st Street
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TO: AHS Board of Trustees

FROM: Terry Lightfoot, Director of Public Affairs and Community Engagement
Elizabeth Lam, Government Relations and Community Engagement Specialist

DATE: February 21, 2019

SUBJECT: Government Relations – Legislative updates

The last day to introduce bills for the legislative year was February 22nd. Legislators are rounding out their legislative packages in the final days preceding the deadline. AHS is reviewing and assessing impacts of the bills and here are a list of bills, not inclusive of bill submitted near the Friday deadline, that may potentially impact AHS:

Expanding Medi-Cal Coverage and Services

The following bills would expand Medi-Cal services and coverage and to reinstate individual mandates.

AB 4 (Arambula) **Medi-Cal Eligibility** - This bill would extend full scope of Medi-Cal to individuals of all age who are otherwise eligible for those benefits but for their immigration status. *Two groups of AHS patients would be affected – First group of patients are the pregnant women who currently receive restricted Medi-Cal benefits due to immigration status. This bill would allow them to be eligible to receive other services outside maternity health services. Second group of patients are healthy adults who currently receive HealthPAC due to immigration status. These patients would be eligible for Medi-Cal under this bill.*

SB 29 (Lara) **Medi-Cal Eligibility** - This bill would extend full scope of Medi-Cal to individuals of all age who are otherwise eligible for those benefits but for their immigration status. (same as AB 4 above)

AB 316 (Ramos) **Medi-Cal: beneficiaries with special dental care needs**- Denti-Cal’s current reimbursement structure is based on a healthier population and does not acknowledge the additional costs of providing care for patients with special dental care needs and inhibits providers’ ability to receive proper payment for their care. This bill would require the State Department of Health Care Services to implement an additional reimbursement, known as payment adjustment, to Medi-Cal providers who render dental services to Medi-Cal beneficiaries with special dental care needs. This bill would require the department to adopt regulations by July 1, 2022. *This bill could provide additional reimbursement to AHS’ Highland Dental Clinic which is a Denti-Cal provider that serves patients with special dental care needs at both the clinic and operating rooms.*

AB 414 (Bonta) **Healthcare coverage: minimum essential coverage** - The bill would create a state-level individual mandate for health care coverage, along with a fine for those who fail to obtain coverage.

AB 577 (Eggman) **Medi-Cal: maternal mental health** - Existing law provides all-pregnancy related and postpartum services for 60 days after the last day of pregnancy. This bill would extend Medi-Cal postpartum care for up to one year beginning on the last day of the pregnancy for an eligible individual diagnosed with a maternal mental health condition.

AB 678 (Flora) **Medi-Cal: podiatric services** - Existing law excludes certain optional Medi-Cal benefits from coverage such as podiatric services and chiropractic services. This bill would restore podiatric services as a covered benefit of the Medi-Cal program as of January 1, 2020. This bill would also prohibit the requirement of prior authorization for podiatry services.

SB 154 (Pan) **Medi-Cal: Restorative dental services** - This bill would authorize Medi-Cal reimbursement for the application of silver diamine fluoride when used as a caries arresting agent for the treatment of dental caries if the treatment is included as part of a comprehensive treatment plan, to the extent that federal financial participation is available and any necessary federal approvals have been obtained. *This bill would allow AHS to use and be reimbursed for procedures provided to patients with special dental needs to minimize their pain, and loss of teeth.*

SB 207 (Hurtdao) **Medi-Cal: asthma preventive services** - This bill would include asthma preventive services such as asthma education, environmental asthma trigger assessments, and environmental asthma trigger remediation as covered benefit under the Medi-Cal program.

Medi-Cal Reimbursement Rate

SB 66 (Atkins) **Medi-Cal: federally qualified health center and rural health clinic services** - Under existing law, federally qualified health center (FQHC) services are reimbursed to providers on a per-visit basis. This bill would authorize reimbursement for a maximum of 2 visits taking place on the same day at a single location if after the first visit, the patients suffers illness or injury requiring additional diagnosis or treatment, or if the patient has a medical visit and a mental health or dental visit. *AHS currently provides outpatient mental health as part of its integrated behavioral health program. This bill may enable AHS to bill for services it's already providing but unable to bill for due to providing services on the same visit.*

Health Facility Operations and Compliance

AB 329 (Rodriguez) **Hospitals: Assaults and batteries** - would expand current law that increases criminal penalties for assault or battery against a physician or nurse providing emergency medical care outside a facility by also covering physicians, nurses, and other health care workers providing services within a facility.

AB 451 (Arambula) **Health Care facilities: treatment of psychiatric emergency medical conditions** - This bill would require a psychiatric unit within a general acute care hospital, a psychiatric health facility, or an acute psychiatric hospital to provide emergency services and care to treat a patient who is accepted to the facility for the purpose of determining the existence of a psychiatric medical emergency condition. *AHS' acute care hospitals (Highland, Alameda and San Leandro) do not have psychiatric units. However,*

if other general acute care hospitals with a psychiatric unit would have to provide emergency services for patients who are accepted to their facilities, potentially less patients would be triaged to the psychiatric ED at John George.

SB 227 (Levy) **Health and care facilities: inspections and penalties** - This bill would require periodic hospital inspections to include a review of nurse-to-patient ratios. The bill would also allow the California Department of Public Health to assess administrative penalties for violations of the ratios — \$30,000 for the first violation and \$60,000 for subsequent violations. *AHS opposed a similar bill which was vetoed by Governor Brown last year because it removes the ability for CDPH to determine if circumstances in which hospitals were out of compliance were appropriate based on care delivery needs prior to leveling a fine.*

SB 305 (Hueso) **Access to Cannabis in Healthcare Facilities Act** - This bill would require a healthcare facility to allow a patient who is receiving palliative care to use medical cannabis within the healthcare facility. Patients would have to provide the facility with a copy of their medical marijuana card or written documentation that the use of medical cannabis is recommended by a physician. The bill would authorize a healthcare facility to reasonably restrict the manner that a patient stores and uses medical cannabis to ensure the safety of others, compliance with other state laws, and the safe operations of the healthcare facility. *AHS would have to adopt a policy regarding patients use of medical cannabis within AHS' facilities.*

SB 322 (Bradford) **Health facilities: inspections: employee reporting** - This bill would provide an employee with the right to discuss possible regulatory violations or patient safety concerns with the State Department of Public Health's inspector privately during the course of an investigation or inspection by the department.

Discourage Sugary Drinks

Following bills intend to lower consumption of sugary drinks to promote better health of Californians. As nutrition and health are closely related, AHS not only has a policy in place within our facilities to restrict sales of sugary drinks, but also promotes healthy living and nutritious diet to our patients and community members. AHS supports the following bills.

AB 138 (Bloom) **California Community Health Fund** - This bill would express the intent of the Legislature to establish the California Community Health Fund in the State Treasury and would require moneys in the fund to be used to diminish the human and economic costs of diabetes, obesity, and heart and dental disease in California.

AB 764 (Bonta) **Sugar-sweetened beverages**— This bill would state the intent of the Legislature to support evidence of the link between obesity, diabetes, dental disease, and heart disease and the consumption of sugar-sweetened beverages by enacting legislation to restrict beverage companies from offering and funding promotional and marketing activities for sugar-sweetened beverages

AB 765 (Wicks) **Health Checkout Aisles for Healthy Families Act**— This bill would require a store to make available only specified beverages including milk and natural fruit and vegetable juice in the checkout areas of the store.

AB 766 (Chiu) **Unsealed beverage container cap** – This bill would prohibit a retailer from selling or providing consumers an unsealed beverage container that is more than 16 fluid ounces.

SB 347 (Monning) **Sugar-sweetened beverages: safety warnings** – This bill would require a warning label on the front of beverage containers with added sweeteners that have 75 or more calories per 12 oz, including fruit drinks, sports drinks, energy drinks, sweet teas and sodas.