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## Significant new California laws of interest to physicians for 2016

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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, public health issues and end-of-life care. Below is a list of significant new health laws of interest to physicians.

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## ALLIED HEALTH PROFESSIONALS

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### **AB 178 (Bonilla) – Board of Vocational Nursing and Psychiatric Technicians**

Removes the requirement that the executive officer selected by the Board of Vocational Nursing and Psychiatric Technicians be a licensed vocational nurse, registered nurse, or psychiatric technician.

*(Business & Professions Code §2847)*

### **AB 250 (Obernolte) – Telehealth: Marriage and Family Therapists and Interns**

Expands the definition of health care provider to include a marriage and family therapist intern or trainee. Authorizes a marriage and family therapist intern and trainee to provide services via telehealth if he or she is supervised as required by the Licensed Marriage and Family Therapist Act, and is acting within their scope and in accordance with any regulations governing the use of telehealth promulgated by the Board of Behavioral Sciences.

*(Business & Professions Code §§2290.5 and 4980.43)*

### **AB 502 (Chau) – Dental Hygiene**

Excepts a professional corporation rendering professional services by persons licensed by the Dental Hygiene Committee from the certificate of registration requirement. Authorizes registered dental assistants, licensed dentists, registered dental hygienists, and registered dental hygienists in extended functions to be shareholders, officers, directors or professional employees of a registered dental hygienist in alternative practice corporation. Requires licensees to practice within the scope of license. Requires alternative practice corporations to provide security for claims by patients.

*(Business & Professions Code §§1925, Corporations Code §§13401 and 13401.5; Adds Business & Professions Code §§1967, 1967.1, 1967.2, 1967.3, and 1967.4)*

### **AB 599 (Bonilla) – Clinical Laboratories: Cytotechnologists**

Authorizes a licensed cytotechnologist to perform all tests and procedures pertaining to cytology, including, but not limited to, microscopic and non-microscopic methodologies and tests and procedures that utilize molecular or genetic methodologies that are performed on cytologic specimens related to infectious disease of cancer diagnosis, under the overall operation and administration of a laboratory director, subject to specified requirements.

*(Business & Professions Code §1270)*

### **AB 684 (Alejo) – Optometrists: Lens Sellers and Dispensing Opticians**

Amends provisions governing licensed optometrists, dispensing opticians, optical companies and non-resident contact lens sellers related to optometry facility ownership, leasing or partnership, the

provision of optical products, relationships with health care service plans, disciplinary actions, unlawful conduct. Prohibits a licensed optometrist from having any membership, proprietary interest, coownership, or any profit-sharing arrangement with any registered dispensing optician or any optical company, except as otherwise authorized. Authorizes a registered dispensing optician or optical company to operate, own, or have ownership interest in a health plan, if the plan does not directly employ optometrists to provide services directly to health plan enrollees. Makes the State Board of Optometry responsible for the registration and regulation of nonresident contact lens sellers and dispensing opticians requires one of the non-public members to be a registered dispensing optician. Requires specified consumer information to be displayed.

*(Business & Professions Code §§655, 2546.2, 2546.9, 2550.1, 2554, 2556, 2567, 3010.5, 3011, and 3013; Adds Business & Professions Code §§2556.1, 2556.2, 3020, 3021, and 3023.1)*

### **AB 705 (Eggman) – Psychologists: Licensure Exemption**

Amends the Psychology Licensing Law. Prohibits the restriction of activities by a credentialed school psychologist and a psychological assistant from conducting research and dissemination of that research. Prohibits restricting a person with specified education and training employed by a community agency that receives government financial support for training and services. Deletes restrictions of academic institution personnel in practicing psychology under certain conditions.

*(Business & Professions Code §§2909 and 2910; Adds Business & Professions Code §2909.5)*

### **AB 773 (Baker) – Board of Psychology: License Expiration**

Amends the Psychology Licensing Law to revise the formula for the expiration of a license to practice psychology to expire end of a 2-year period from the date the license was issued.

*(Business & Professions Code §2982)*

### **AB 880 (Ridley-Thomas) – Dentistry Licensure: Student Exemption**

Amends the Dental Practice Act to exempt, from licensure requirements, a final year student, without compensation or expectation of compensation and under the supervision of a licensed dentist with a clinical faculty appointment at a sponsored event, if specified conditions are met. Requires sponsoring entity of the event to provide to the Dental Board of California specified information regarding the event.

*(Adds Business & Professions Code §1626.6)*

### **AB 1253 (Steinorth) – Optometry Licensure: Retired Volunteer Service**

Requires the State Board of Optometry to issue a license with retired volunteer service designation to an optometrist who holds a retired license or a license that was issued, or that has expired and has gone unrenewed for specified periods, if the licensee meets specified requirements. Requires certification of

completion of continuing education coursework for applicants for a license with retired volunteer service designation. Expands the scope of the crime of perjury.

*(Business & Professions Code §3151.1)*

### **AB 1359 (Nazarian) – Optometry: Therapeutic Pharmaceutical Agents**

Amends provision regarding therapeutic pharmaceutical agents (TPA) certification for optometrists. Deletes certain requirements, such as completing a didactic course of 80 classroom hours, for an applicant for a TPA certification who graduated from a California accredited school of optometry prior to January 1, 1996 and is a licensed optometrist in the state. Requires applicants to complete a preceptorship with either a TPA-certified optometrist in good standing or a physician and surgeon board-certified in ophthalmology in good standing, and would require such an applicant to complete a minimum of 100 hours of directed and accredited education in ocular and systemic diseases, as specified. Requires a preceptor to certify completion of the preceptorship on a form approved by the board.

*(Business & Professions Code §3041.3)*

### **AB 1374 (Levine) – Psychologists Licensure**

Removes the reference to fees for services from the psychology definition. Provides for modifications to and expansion of the definition of psychology. Relates to the providing of licensure experience verification procedures for a trainee in a manner prescribed by the Board of Psychology. Authorizes the board to establish alternative procedures for obtaining the necessary documentation for verification if the supervising licensed psychologist fails to provide that verification in a timely manner. Relates to unprofessional conduct and psychotherapists. Includes in definition of psychotherapist, a registered psychologist who is under the supervision of a licensed psychologist or board certified psychiatrist for purposes of the psychotherapist-patient privilege.

*(Business & Professions Code §§2903, 2913, and 2914; Evidence Code §1010)*

### **SB 337 (Pavley) – Physician Assistants**

Requires that the medical record for each episode of care for a patient identify the physician and surgeon responsible for supervision. Replaces medical record review provisions and requires supervising physician to use one or more of described alternative medical records review mechanisms. Authorizes a physician assistant, under prescribed supervision of a physician, to administer or provide medication to a patient, or transmit an order to furnish medication or medical device. Prohibits a physician assistant from administering, providing, or issuing a drug order to a patient for controlled substances without advance approval by a supervising physician and surgeon for that particular patient unless the physician assistant has completed an education course that covers controlled substances and that meets approved standards. Requires that the medical record of any patient cared for by a physician assistant for whom a physician assistant's Schedule II drug order has been issued or carried out to be reviewed, countersigned, and dated by a supervising physician and surgeon within 7 days.



*(Business & Professions Code §§3501, 3502, and 3502.1)*

### **SB 407 (Morrell) – Comprehensive Perinatal Services Program: Midwives**

Amends the Comprehensive Perinatal Services Program. Authorizes a health care provider to employ or contract licensed midwives for the purpose of providing comprehensive perinatal services. Provides that, upon effective date of regulations adopted by the board, a licensed midwife shall be eligible to serve as a “comprehensive perinatal provider,” as defined. Requires the State Department of Health Care Services to commence the revision of existing regulations as it determines are necessary for the implementation of these provisions.

*(Welfare & Institutions Code §14134.5)*

### **SB 408 (Morrell) – Midwife Assistants**

Authorizes a midwife assistant to perform certain assistive activities under the supervision of a licensed midwife or certified nurse-midwife, including the administration of medicine, the withdrawing of blood, and midwife technical support services. Prohibits a midwife assistant from being employed for inpatient care in a licensed general acute care hospital. Defines midwife assistant and midwife technical supportive services.

*(Adds Business & Professions Code §2516.5)*

### **SB 466 (Hill) – Registered Nursing: Board of Registered Nursing**

Extends repeal date of existing law that requires the Board of Registered Nursing to appoint an executive officer to perform duties delegated by the board. Requires the Board to contract with the State Auditor's Office to conduct an audit of the Board's enforcement program, with reports to specified entities. Repeals provisions regarding military service for licensure. Requires the Board to deny or revoke approval of a school of nursing that does not give applicants credit for military education and experience by use of challenge examinations or other methods of evaluations. Requires Board to post on its website information related to acceptance of military coursework and experience at each approved school.

*(Business & Professions Code §§2701, 2708, and 2786; Adds Business & Professions Code §§2718 and 2786.1; Repeals Business & Professions Code § 2736.5)*

### **SB 525 (Nielsen) – Respiratory Care Practice**

Amends provision of the Respiratory Care Act to define "overlapping functions" and provide that associated aspects of cardiopulmonary and other systems functions includes patients with deficiencies and abnormalities affecting the heart and cardiovascular system. Defines the respiratory care practice to include the administration of medical gases and pharmacological agents for the purpose of inducing conscious or deep sedation under specified supervision and direct orders, all forms of life support and the treatment, management, diagnostic testing, control, education and care of patients with sleep and wake disorders.

*(Business & Professions Code §§3701, 3702, and 3702.7)*

### **SB 590 (Stone) – Pharmacy: Intern Pharmacists**

Requires, for all pharmacist licensure examination applicants, that 900 of 1,500 required pharmacy practice experience include experience in a pharmacy, including experience in both a community and institutional pharmacy practice setting. Requires that an applicant for the licensure examination from an ACPE accredited college of pharmacy or school of pharmacy recognized by the State Board of Pharmacy to have satisfied the required hours of practice experience.

*(Business & Professions Code §4209)*

### **SB 620 (Block) – Board of Behavioral Sciences: Licensure Requirements**

Revises experience requirements for the licensure and regulation of marriage and family therapists, clinical social workers, and professional clinical counselors and provides that individuals who submit applications for examination eligibility between specified dates may alternatively qualify under the current requirements.

*(Business & Professions Code §§4980.03, 4980.42, 4980.43, 4980.44, 4996.23, and 4999.46)*

### **SB 672 (Hernandez) – Discovery: Pharmacist Review Committees**

Amends existing law that exempts from discovery as evidence the proceedings and records of specified committees of health care professionals and review committees having the responsibility of evaluation and improvement of the quality of care. Extends the exemption, for purposes of civil proceedings only, to the proceedings and records of pharmacist organized committees and review committees.

*(Evidence Code §1157)*

## **DRUG PRESCRIBING AND DISPENSING**

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### **AB 486 (Bonilla) – Centralized Hospital Packaging Pharmacies: Medication Labels**

Requires that certain information be displayed on a human-readable unit-dose label, and that information to be retrievable by a pharmacist using the medication lot number or control number. Requires a medication barcode to be machine readable, using medication administration software, and that the software compare certain information to the electronic medical record of an inpatient in order to verify that the medication to be given is the correct medication, dosage, and route of administration.

*(Business & Professions Code §§4128, 4128.4 and 4128.5)*

### **AB 679 (Allen) – Controlled Substances: CURES Registration**

*CMA Position: Sponsor*

Extends provisions of existing law requiring a licensed health care practitioner authorized to prescribe, order, administer, furnish or dispense controlled substances, pharmacist, or both, providing care or services to an individual to apply to the Department of Justice to obtain approval to access information contained in the Controlled Substance Utilization Review and Evaluation System (CURES) database regarding the controlled substance history of a patient under his or her care, from January 1, 2016 effective date to July 1, 2016.

*(Health & Safety Code §11165.1)*

### **AB 1073 (Ting) – Pharmacy: Prescription Drug Labels**

Requires a pharmacist to use professional judgment to provide a patient with directions for use of a prescription that enhances the patient’s understanding of those directions, consistent with the prescriber’s instructions. Requires a dispenser, excluding a veterinarian, upon the request of a patient or patient’s representative, to provide translated directions for use as prescribed. Authorizes a dispenser to use translations made available by the board pursuant to those existing regulations. Makes a dispenser responsible for the accuracy of English-language directions for use provided to the patient.

*(Business & Professions Code §§4076 and 4199; Adds Business & Professions Code §4076.6)*

### **SB 671 (Hill) – Pharmacy: Biological Product**

*CMA Position: Support*

Authorizes a pharmacist to select an alternative biological product when filling a prescription order for a prescribed biological product if the alternative biological product is interchangeable and the prescriber does not personally indicate that a substitution is not to be made. Requires a pharmacist or a designee to make an electronically accessible entry in a described entry system of the specified biological product provided to the patient. Requires that the substitution of a biological product be communicated to the patient. Prohibits a pharmacist from selecting an alternative biological product that meets the requirements of these provisions unless the cost to the patient is the same or less than the cost of the prescribed biological product. Requires the Board of Pharmacy to maintain on its website a link to the current list of biological products determined by the FDA to be interchangeable.

*(Adds Business & Professions Code §4073.5)*

## **END OF LIFE**

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### **ABX2 15 (Eggman) – End of Life**

Enacts the End of Life Option Act authorizing an adult who meets certain qualifications, and who has been determined by his or her attending physician to be suffering from a terminal illness, to make a request for a drug for the purpose of ending their life. Establishes procedures and forms for such

requests. Provides immunity from civil or criminal liability solely because the person was present when the qualified individual self-administered the drug so long as the person did not assist with the ingestion of the drug. Provides immunity from liability for health care providers who refuse to engage in activities authorized pursuant to its provisions. Requires a physician to submit specified information to the State Department of Public Health after writing a prescription for an aid-in-dying drug and after the death of individuals who requested an aid-in-dying drug.

*(Adds Health & Safety Code §§443 et seq. (Part 1.85, Division 1))*

### **AB 637 (Campos) – Physician Orders For Life Sustaining Treatment Forms**

*CMA Position: Sponsor*

Authorizes the signature of a nurse practitioner or physician assistant acting under the supervision of the physician and within the scope of practice authorized by law to create a valid Physician Orders for Life Sustaining Treatment form.

*(Probate Code §4780)*

### **SB 19 (Wolk) – Physician Orders For Life Sustaining Treatment Form: Electronic Registry Pilot**

*CMA Position: Support if Amended*

Enacts the California Physician Orders for Live Sustaining Treatment (POLST) eRegistry Act. Requires the establishment of the POLST eRegistry Pilot for the purpose of collecting POLST information received from a physician or physician's designee. Requires specified entities to operate the Pilot after determination that sufficient non-state funds are available for development of the Pilot. Requires POLST information be in a patient's medical record. Requires adoption of guidelines for the operation of the Pilot. Provides immunity from liability for a health care provider who honors a patient's request regarding resuscitative measures obtained from the POLST eRegistry Pilot as specified.

*(Probate Code §4788)*

## **HEALTH CARE COVERAGE**

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### **AB 248 (Hernandez) – Health Insurance: Minimum Value: Large Group Policies**

Extends specified essential health benefit requirements related to a non-grandfathered health care service plan that offers, amends, or renews a group health plan contract and an insurer issuing a policy, except a health care service plan or insurer issuing a specialized health care service plan or policy, that provide less than 60 percent minimum value in the large group market.

*(Adds Health & Safety Code §1367.010 and Insurance Code §10112.9)*

**AB 339 (Gordon) – Health Care Coverage: Outpatient Prescription Drugs**

Prohibits health care service plan or health care insurance formularies from discouraging the enrollment of individuals with health conditions and reducing the generosity of the benefit for those with a particular condition. Provides that the copayment, coinsurance, or any other form of cost sharing for a covered outpatient prescription drug for an individual prescription shall not exceed \$250 for a supply of up to 30 days, except as specified, and would prohibit, for a non-grandfathered individual or small group plan contract or policy, the annual deductible for outpatient drugs from exceeding a specified amount. Requires coverage of a single-tablet antiretroviral drug treatment needed to treat AIDS/HIV. Prohibits a new insurer from requiring the insured to repeat step therapy when that person is already being treated for a medical condition by a prescription drug, as specified.

*(Health & Safety Code §1367.205 and Insurance Code §10123.192; Adds Health & Safety Code §§1367.41, 1367.42, and 1342.71, Insurance Code §§10123.201 and 10123.193)*

**AB 374 (Nazarian) – Health Care Coverage: Prescription Drugs**

*CMA Position: Support*

Authorizes a request for an exception to a health care service plan's or health insurer's step therapy process for prescription drugs to be submitted in the same manner as a request for prior authorization for prescription drugs. Requires the plan and insurer to respond to such request in the same manner as prior authorization requests. Requires the State departments of Managed Health Care and Insurance to include a provision for step therapy exception requests in the prior authorization form.

*(Adds Health & Safety Code §1367.244 and Insurance Code §10123.197)*

**AB 387 (McCarty) – Insurance: Life and Disability Policies**

Authorizes the Insurance Commissioner to develop and publish procedural requirements, guidelines, and standard insurance contract language for the purpose of streamlining and expediting the Department of Insurance's file review process for life and disability insurance forms. Requires the Commissioner to request that a multistate regulatory support organization commission a study to examine and report on the extent to which consumer protections for annuity, life, disability income, and long-term care insurance products differ from uniform standards developed by the Interstate Insurance Product Regulation Commission.

*(Insurance Code §10290; Adds Insurance Code §§10191.1 and 10191.5)*

**AB 449 (Irwin) – Income Taxation: Savings Plans: ABLE Program**

Relates to the creation of tax-free savings accounts for individuals with disabilities or Achieving a Better Life Experience (ABLE) accounts, which assist persons and families to save funds to such persons to maintain health, independence, and quality of life. Conforms state provisions to federal income tax provisions under the Corporation Income Tax law. Establishes an ABLE program and fund.

*(Adds Revenue & Taxation Code §23711.4; Welfare & Institutions Code §§4877, 4878, 4880, 4882, and 4884)*

### **AB 1163 (Rodriguez) – Health Care Services Plan and Health Insurers**

Prohibits a material change made to the terms and conditions of a contract between a health care service plan and a solicitor or a health insurer and a life agent, from becoming effective until the plan or insurer has delivered to the solicitors or life agent written or electronic notice of the change or changes to the contract, within a specified time period.

*(Adds Health & Safety Code §1399.3 and Insurance Code §769.56)*

### **AB 1305 (Bonta) – Limitations on Cost Sharing: Family Coverage**

*CMA Position: Support*

Requires, for family coverage, that an individual within a family shall not have a maximum out-of-pocket limit that is greater than the maximum out-of-pocket limit for individual coverage for that product. Makes changes to a prohibition against a deductible under a small employer health care service plan contract or insurance policy from exceeding certain dollar amounts.

*(Health & Safety Code §§1367.006 and 1367.007; Insurance Code §§10112.28 and 10112.29)*

### **SB 43 (Hernandez) – Health Care Coverage: Essential Health Benefits**

Prohibits limits on habilitative and rehabilitative services from being combined and would define essential health benefits to include the health benefits covered by particular benchmark plans as of the first quarter of 2014, for an individual or small group health care service plan contract or an individual or small group health insurance policy issued, amended, or renewed on or after January 1, 2017. Revises the definition of “habilitative services” to conform to federal regulations.

*(Health & Safety Code §1367.005; Insurance Code §10112.27)*

### **SB 125 (Hernandez) – Health Care Coverage**

Extends annual enrollment periods under the federal Patient Protection and Affordable Care Act and the Knox-Keene Health Care Services Plan Act. Requests the University of California to include essential health benefits and the impact of the State Health Benefit Exchange in an analysis, and to assess legislation impacting benefit design, cost sharing, and premiums. Revises the small employer definition. Extends the Health Benefit Review Program and an annual charge on health service plans and insurers.

*(Health & Safety Code §§1357.500, 1399.849, 127660, 127662, 127664, and 127665; Insurance Code §§10753 and 10965.3)*

### **SB 137 (Hernandez) – Health Care Coverage: Provide Directories**

Requires a health care service plan, and a health insurer that contracts with providers for alternative rates of payment, to publish and maintain a provider directory or directories with information on contracting providers that deliver health care services to the plan's enrollees or the health insurer's insureds. Requires the plan or health insurer to make an online provider directory or directories available on the plan or health insurer's website. Requires a health care service plan or health insurer to take appropriate steps to ensure the accuracy of the information contained in the plan or health insurer's directory or directories, and would require the plan or health insurer, at least annually, to review and update the entire provider directory or directories for each product offered. Requires a health care service plan or health insurer to reimburse an enrollee or insured for any amount beyond what the enrollee or insured would have paid for in-network services, if the enrollee or insured reasonably relied on the provider directory. Authorizes a delay in payment to a provider if the provider fails to respond to the plan or insurer's attempts to verify the provider's information.

*(Adds Health & Safety Code §1367.27 and Insurance Code §10133.15; Repeals Health & Safety Code §1367.26)*

### **SB 145 (Pan) – Robert F. Kennedy Farm Workers Medical Plan**

Requires the State Department of Health Care Services to annually reimburse the Robert F. Kennedy Farm Workers Medical Plan up to \$3,000,000 million per year for claim payments that exceed \$70,000 made by the plan on behalf of an eligible employee or dependent for a single episode of care. Requires the Department to make the reimbursement payment within 60 days after it receives specified claims data from the plan.

*(Health & Safety Code §100235)*

### **SB 282 (Hernandez) – Health Care Coverage: Prescription Drugs**

Requires the Department of Managed Care and Department of Insurance to develop the uniform prior authorization form on or before January 1, 2017, and would require prescribing providers to use, and health care service plans and health insurers to accept, only those forms or electronic process on and after July 1, 2017, or 6 months after the form is developed, whichever is later. Deems a prior authorization request to be granted if the plan or insurer fails to respond within 72 hours for non-urgent requests, and within 24 hours when exigent circumstances exist.

*(Health & Safety Code §§1367.24, 1367.241, 1368, and 1368.01; Insurance Code §10123.191)*

### **SB 388 (Mitchell) – Health Care Coverage: Solicitation and Enrollment**

*CMA Position: Support*

Relates to group health and health insurers providing a written summary of benefits and coverage under the Patient Protection and Affordable Care Act. Provides that summary constitutes a vital document and would require a plan or insurer to comply with requirements applicable to those documents. Requires

the development of written translations of the template uniform summary of benefits and coverage and to make those translations available in specified languages on respective Internet websites.

*(Health & Safety Code §1363; Insurance Code §10603)*

### **SB 546 (Leno) – Health Care Coverage: Rate Review**

Requires large group health care service plans and health insurers to file with the respective department prior to implementing any rate increase, all required rate information for any product with a rate increase if any of certain conditions apply. Provides the procedures and time frames for department action on such increase requests. Requires the plan or insurer to file additional aggregate rate information with the respective department. Relates to contracting with multiple medical groups.

*(Health & Safety Code §1374.21 and Insurance Code §10199.1; Adds Health & Safety Code §1385.045 and Insurance Code §10181.45)*

## **HEALTH CARE FACILITIES AND FINANCING**

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### **AB 81 (Obernolte) – Hospitals: Seismic Safety**

Authorizes a hospital located in the City of Willits that has received the additional extension to the deadline pursuant to specified provisions to request an additional extension to obtain either a certificate of occupancy for a replacement building or a construction final for a building on which a retrofit has been performed.

*(Health & Safety Code §130060)*

### **AB 232 (Obernolte) – Hospitals: Seismic Safety**

Authorizes a critical access hospital located in the City of Tehachapi to submit a seismic safety extension application, notwithstanding specified deadlines, and requires the application to include a timetable.

*(Health & Safety Code §130060)*

### **AB 389 (Chau) – Hospitals: Language Assistance Services**

*CMA Position: Support*

Requires a general acute care hospital and the State Department of Health Care Services to make the hospital's updated language assistance services policy available annually to the public on their respective Internet websites. Requires the hospital to post on its website a notice, in English and in the other most commonly spoken languages in the hospital's service area, of the availability of language assistance services.

*(Health & Safety Code §1259)*



**AB 444 (Gipson) – Health Facilities: Epidural and External Feeding**

Existing law prohibits a health facility, as defined, from using an epidural connector or an enteral feeding connector that would fit into a connector other than the type it was intended for, unless an emergency or urgent situation exists and the prohibition would impair the ability to provide health care. Existing law also requires a health facility to develop a patient safety plan. This bill makes the provisions relating to an epidural connector operative as of January 1, 2017, and would make the provisions relating to an enteral feeding connector operative as of July 1, 2016.

*(Health & Safety Code §1279.7)*

**AB 564 (Eggman) – Regional Centers: Parental Fees**

Amends provisions that provide a formula for calculating the monthly parental fees paid by parents of children who are receiving out-of-home services through a regional center or who are residents of a State hospital or on leave from a State hospital. Prohibits the monthly fee from exceeding the maximum monthly cost of caring for a child or cost of services provided, whichever is less. Requires the fee to be calculated at the time of the recalculation, or within a specified time period of a parental request for review. Effective July 1, 2016.

*(Welfare & Institutions Code §§4677 and 4784; Repeals Welfare & Institutions Code §4782)*

**AB 601 (Eggman) – Residential Care Facilities For The Elderly: Licensing**

Amends the Residential Care Facilities for the Elderly Act. Requires the applicant for the licensure of a residential care facility for the elderly to disclose specified information upon initial application. Requires the cross-checking of specified information from the application. Provides specified grounds for the denial of an application or the revocation if the applicant knowingly withholds material information, makes or has made a false statement in regards to material fact regarding the licensure application. Requires, to the extent that the department's computer system can electronically accommodate additional information, the department to post on its website specified information. Authorizes a civil penalty for a violation.

*(Health & Safety Code §§1569.2, 1569.15, 1569.16, 1569.50, and 1569.618; Adds Health & Safety Code §1569.356)*

**AB 848 (Stone) – Alcoholism and Drug Abuse Treatment Facilities**

Authorizes an adult alcoholism or drug abuse recovery or treatment facility that is licensed under provisions to allow a licensed physician and surgeon or other health care practitioner to provide incidental medical services, as defined, to a resident of the facility at the facility premises under specified limited circumstances, including that the resident signs an admission agreement and a physician and surgeon or other health care practitioner determines that it is medically appropriate for the resident to receive these services. Requires the department to establish and collect an additional

fee from those facilities, in an amount sufficient to cover the department's reasonable costs of regulating the provision of those services.

*(Health & Safety Code §§11834.03 and 11834.36; Adds Health & Safety Code §§11834.025, 11834.026)*

### **AB 918 (Stone) – Seclusion and Restraint: Developmental Disabilities**

Requires consistent, timely, and public reporting of data from regional centers and other specified facilities regarding the use of physical or chemical restraints on department website. Requires regional center vendors providing community residential services or supported living services, defined long-term health care facilities, and acute psychiatric hospitals, to report each death or serious injury of a person related to, the use of seclusion, physical restraint, or chemical restraint.

*(Adds Welfare & Institutions Code §§4436.5 and 4659.2)*

### **AB 940 (Ridley-Thomas) – Clinical Laboratories**

Amends an existing law which prohibits the performance of a clinical laboratory test or examination classified as waived under the federal Clinical Laboratory Improvement Amendments of 1988 unless the test or examination is performed under the administration of a laboratory director. Limits certain qualification requirements to a person serving as the director in a laboratory that performs certain tests. Provides that an applicant for a clinical bioanalysts's license have a minimum of 4 years' experience as a licensed clinical laboratory scientist in a laboratory certified under CLIA. Renames the license.

*(Business & Professions Code §§1203, 1209, 1260, 1264, and 1300)*

### **AB 941 (Wood) – Clinics: Licensure and Regulation: Exemption**

Relates to existing law under which some types of clinics are exempted from licensing provisions. Expands the exemption to also include a clinic conducted, maintained, or operated by a federally recognized Indian tribe under a contract with the United States pursuant to federal law, without regard to the location of the clinic, except that if the clinic chooses to apply for a State facility license, then the Department of Public Health would retain authority to regulate that clinic as a primary clinic.

*(Health & Safety Code §1206)*

### **AB 1130 (Gray) – Clinics: Licensing: Hours of Operation**

Increases the number of hours that a licensed primary care community or free clinic may be open under a certain licensure exemption provision to 30 hours a week. Requires a licensed primary care community or free clinic to report to the department when renewing its license, whether it is currently operating an intermittent clinic, the location of any intermittent clinic, and the estimated hours of operation of any intermittent clinic.

*(Health & Safety Code §1206; Adds Health & Safety Code §1218.4)*

**AB 1147 (Maienschein) – Health Facilities: Pediatric Day Health and Respite Care Facilities**

Authorizes an individual who is of 22 years of age or older to continue to receive care in a pediatric day health and respite care facility, if the facility receives approval for a Transitional Health Care Needs Optional Service Unit, and a previous patient, to again receive such services. Establishes a licensing process for a pediatric day health and respite care facility to operate in an optional service unit. Requires that pharmacy services by a pediatric day health and respite care facility satisfy certain requirements. Authorizes the entities to prohibit smoking within the facility or on the premises.

*(Health & Safety Code §§1760.2 and 1760.4; Adds Health & Safety Code §§1760.7, 1760.9, 1761.85, 1762, 1762.2, 1762.4, 1762.6, 1762.8, 1763, 1763.2, and 1763.4)*

**AB 1149 (Wood) – Public Health Emergencies: Funding**

Amends existing law that establishes procedures and requirements to govern the allocation to, and expenditure by, local health jurisdictions, hospitals, long-term health care facilities, clinics, emergency medical systems, and poison control centers of federal funding received for the prevention of, and response to, public health emergencies. Expands these provisions to apply to public health emergency preparedness and response by trade associations of those entities or facilities.

*(Health & Safety Code §101315)*

**AB 1177 (Gomez) – Primary Care Clinics: Written Transfer Agreements**

Requires a primary care clinic, except as specified, to send with each patient at the time of transfer, or in the case of an emergency, as promptly as possible, copies of all medical records related to the patient's transfer, and would require the medical records to include, among other things, current medical findings and a brief summary of the course of treatment provided prior to the patient's transfer. Provides that a licensed primary care clinic is not required to enter into a written hospital transfer agreement pursuant to existing law as a condition of licensure, except as provided primary care clinic that provides services as an alternative birth center.

*(Health & Safety Code §1204.2)*

**AB 1211 (Maienschein) – Health Care Facilities: Congregate Living Facility**

Amends existing law that provides for the license and regulation by the State Department of Public Health of congregate living health facilities to include in the definition of congregate living health facility a residential home with a capacity of no more than 18 beds that provides inpatient and skilled nursing care.

*(Health & Safety Code §1250)*

**AB 1223 (O'Donnell) – Emergency Medical Services: Ambulance Transportation**

Authorizes a local emergency medical services agency to adopt policies and procedures relating to ambulance patient offload time. Requires the Emergency Medical Services Authority to develop a statewide standard methodology for the calculation and reporting by a local agency of ambulance patient offload time.

*(Adds Health & Safety Code §§1797.120 and 1797.225)*

### **AB 1230 (Gomez) –California Americans With Disabilities Act Small Business Capital Access Loan Program**

Establishes the State Americans with Disabilities Act Small Business Capitol Access Loan Program. Creates a self-sustaining program to provide loans to assist small businesses in financing the cost of projects that alter or retrofit existing small business facilities to comply with the federal American with Disabilities Act. Authorizes the State Pollution Control Financing Authority to administer the program.

*(Adds Health & Safety Code §44559.13)*

### **AB 1350 (Salas) – Kern County Hospital Authority**

Revises and recasts certain provisions to make technical changes relating to the transfer of control of a medical center by Kern County to the Kern County Hospital Authority. Clarifies the powers of the Authority, including powers relating to maintenance, operation, management, control, ownership, or lease of the medical center as provided by an enabling ordinance. Makes changes to the personnel transition plan. Amends provisions relating to a specified memorandum of understanding and public employees' retirement.

*(Health & Safety Code §§101852, 101852.1, 101853, 101853.1, 101855, 101855.1, and 101856)*

### **AB 1387 (Chu) – Care Facilities: Penalties, Deficiencies and Appeals**

Relates to residential care facilities for the elderly. Authorizes any person to request an investigation of a residential care facility for the elderly by making a complaint to the Department of Social Services. Provides for rights of access, complaints of long-term care ombudsmen, civil penalties for death, physical abuse, or serious bodily injury, certain appeals, requests for a formal review of a finding of deficiency, and the use of moneys in the Child Health and Safety Fund for assisting families with the identification, transportation, and enrollment of children in day care centers or family day care homes.

*(Health & Safety Code §§1548, 1568.0822, 1569.35, 1569.49, 1596.842, 1596.99, and 1597.58)*

### **SB 75 (Budget and Fiscal Review Committee) – Health**

Budget Act of 2015. This is the Health trailer bill. Trailer Bill Language (TBL) is the implementing language of the California State Budget Bill. Provides provisions regarding health, including Medicaid clinical labs quality control, nursing facility licensing, long-term care facility and hospital complaints, breast and cervical cancer screening, the Food Safety Fund, clean needle and syringe exchange, persons with HIV

drug treatment, Hepatitis C Care Project, Medi-Cal dental treatment for children, Major Medical Insurance Program, gambling treatment, emergency medical transportation, Medi-Cal provider payments, and the State Health Benefit Exchange.

*(Business & Professions Code §1220; Government Code §§100504 and 100505; Health & Safety Code §§1266, 1279.2, 1367.54, 1373.622, 1420, 1423, 104150, 104322, 110050, 120960, 120962, 124040, 124977, and 121348 et seq. (Chapter 17, Part 4, Division 105); Insurance Code §§10123.184 and 10127.16; Revenue & Taxation Code §19548.2; Welfare & Institutions Code §§4369, 4369.1, 4369.2, 4369.3, 4369.4, 4369.5, 14007.2, 14007.5, 14015.5, 14105.94, 14105.192, 14154, 14186, 14186.1, 14186.3, 15894, 24005, and 14134; Adds Health & Safety Code §§120780.2, 121348.4, 122425, 122430, and 122435; Adds Welfare and Institutions Code §§14007.8 and 14127.7)*

### **SB 361 (Hill) – Antimicrobial Stewardship: Education and Policies**

Requires a veterinarian who renews his or her license on or after January 1, 2018, to complete continuing education on the judicious use of antimicrobial drugs every four years. Requires all skilled nursing facilities to adopt and implement an antimicrobial stewardship policy that is consistent with the guidelines developed by the CDC, CMS, or specified professional organizations.

*(Business & Professions Code §4846.5; Adds Health & Safety Code §1275.4)*

### **SB 396 (Hill) – Outpatient Settings and Surgical Clinics: Licensure and Enforcement**

Authorizes accrediting agencies to conduct unannounced inspections of accredited outpatient settings subsequent to the initial inspection for accreditation, if the agency provides specified notice of the unannounced routine inspection to the outpatient setting. Requires each licensee that performs procedures in an outpatient setting that requires the setting to be accredited to be peer reviewed by licensees who are qualified by education and experience to perform the same types of, of similar, procedures.

*(Business & Professions Code §805.5; Health & Safety Code §§1248.15 and 1248.35; Government Code §12529.7)*

### **SB 675 (Liu) – Hospitals: Family Caregivers**

Requires a hospital subject to the federal Health Insurance Portability and Accountability Act of 1996 to take specified actions relating to family caregivers, including notifying the family caregiver of the patient's discharge or transfer to another facility and providing information and counseling regarding the posthospital care needs of the patient, if the patient has consented to the disclosure of the information.

*(Health & Safety Code §1262.5)*

### **SB 804 (Committee on Health) – Public Health**

Senate Health Committee omnibus bill, commonly referred to as a technical clean-up bill. Updates current law through minor deletions or additions into statute.

*(Health & Safety Code §§11801, 11811.6, 11830.1, 11835, 103577, 104151, 128456, 130302, and 130304; Welfare & Institutions Code §§729.12, 4033, 4040, 4095, 4117, 5121, 5150, 5152.1, 5152.2, 5250.1, 5305, 5306.5, 5307, 5308, 5326.95, 5328, 5328.2, 5346, 5400, 5585.22, 5601, 5611, 5664, 5694.7, 5701.1, 5701.2, 5717, 5750, 5814.5, 5847, 5848, 5848.5, 5892, 5899, 5902, 6002.25, 8103, 11467, 11469, 14021.4, 14124.24, 14251, 14499.71, 14682.1, 14707, 14711, 14717, 14718, 14725, 15204.8, and 15847.7)*

## MEDI-CAL

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### **AB 145 (Gomez) – Public Benefits Reports**

Revises the requirement applicable to the Director of Employment Development to permit the use of specified information by the Department of Finance to prepare and submit a report that identifies all employers in California that employs 100 or more employees who receive Medi-Cal benefits.

*(Unemployment Insurance Code §1095)*

### **AB 187 (Bonta) – Medi-Cal: Managed Care: Children’s Services Program**

*CMA Position: Support*

Extends the termination of the prohibition against the State Children's Services Program covered services being incorporated into a Medi-Cal managed care contract entered into after August 1, 1994, until January 1, 2017.

*(Welfare & Institutions Code §14094.3)*

### **AB 461 (Mullin) – Coordinated Care Initiative**

Authorizes a Medi-Cal beneficiary receiving services through a regional center who resides in San Mateo County to participate voluntarily in a demonstration project that enables beneficiaries dually eligible for Medi-Cal program and the Medicare program to receive a continuum of services that maximizes access to, and coordination of, benefits between the programs.

*(Welfare & Institutions Code §14132.275)*

### **AB 664 (Dodd) – Medi-Cal: Universal Assessment Tool Report**

Requires the State Department of Health Care Services, the State Department of Social Services, and the State Department of Aging to evaluate and report to the Legislature on the outcomes of, and lessons learned from, the universal assessment tool pilot project. Requires the report to include findings from

consumers assessed using the tool and findings from consumers to be assessed using previous assessment tools.

*(Welfare & Institutions Code §14186.36)*

#### **SB 4 (Lara) – Health Care Coverage: Immigration Status**

*CMA Position: Support*

Requires, at the time the Director of Health Care Services determines that systems have been programmed for implementing extension of eligibility for full-scope Medi-Cal benefits, individuals under 19 years of age enrolled in restricted-scope Medi-Cal to be enrolled in the full scope of Medi-Cal benefits, if otherwise eligible, pursuant to an eligibility and enrollment plan, as specified. Requires the DHCS to provide monthly updates to the policy and fiscal committees of the Legislature as specified beginning January 31, 2016, until the director makes the above-described determination. Requires that an individual, who is eligible pursuant to these provisions, enroll in a Medi-Cal managed care health plan. Does not precludes a beneficiary from being enrolled in any other children’s Medi-Cal specialty program that he or she would otherwise be eligible for.

*(Welfare & Institutions Code §14007.8)*

#### **SB 36 (Hernandez) – Medi-Cal: Demonstration Project**

Authorizes the Director of Health Care Services, if the DHCS has not received adequate assurances from the federal Centers for Medicare and Medicaid Services, to request one or more temporary extensions of the implementation of specified objectives, including better care coordination for seniors and persons with disabilities and maximization of opportunities to reduce the number of uninsured individuals until the approved effective date of the subsequent demonstration project.

*(Adds Welfare & Institutions Code §14166.253)*

#### **SB 147 (Hernandez) – Federally Qualified Health Centers**

Requires the Department of Health Care Services to authorize an alternative payment methodology pilot project for federally qualified health centers that agree to participate for a specified time period. Requires the determination of the alternative payment methodology supplemental capitation amount for each aid category to be paid to each principal health plan that contains at least one participating FQHC in its provider network. Requires contracting with an independent entity to perform an evaluation of the pilot project.

*(Adds Welfare & Institutions Code §§14138.1 et seq. (Article 4.1, Chapter 7, Division 9))*

#### **SB 276 (Wolk) – Medi-Cal: Local Educational Agencies**

*CMA Position: Support*

Requires the Department of Health Care Services to seek federal financial participation for covered services provided by local educational agencies (LEA) to an eligible Medi-Cal beneficiary regardless of an individualized education plan or individualized family service plan, or whether the same services are provided at no charge to the beneficiary or community at large, if the LEA pursues payment from liable parties. Requires a legally liable third party to either reimburse the claim or issue notice of non-coverage of services or benefits if the third party receives a claim for payment of covered services submitted by an LEA. Authorizes an LEA to bill the Medi-Cal program if there is no response to a claim for payment of covered services submitted to the legally liable third party within 45 days. Expands definition of an LEA to include the governing body of a charter school.

*(Welfare & Institutions Code §14132.06)*

### **SB 299 (Monning) – Medi-Cal: Provider Enrollment**

*CMA Position: Support*

Exempts from notarization requirements any Medi-Cal provider that chooses to enroll electronically. Clarifies that the Department of Health Care Services is required to collect an application fee for continued enrollment. Requires DHCS to designate a provider or applicant as a high categorical risk if DHCS lifted a temporary moratorium within the previous 6 months for the particular provider type submitting the application.

*(Welfare & Institutions Code §§14043.1, 14043.15, 14043.25, 14043.28, 14043.36, 14043.38, 14043.4, and 14043.55)*

## **MEDICAL MARIJUANA**

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### **AB 243 (Wood) – Medical Marijuana**

Requires specified State agencies to promulgate regulations or standards relating to medical marijuana and its cultivation, as specified. Requires various State agencies to take specified actions to mitigate the impact that marijuana cultivation has on the environment. Requires state licensing authority to charge each licensee, a licensure and renewal fee, as applicable, and would further require the deposit of those collected fees into an account specific to that licensing authority in the Medical Marijuana Regulation and Safety Act Fund, which this bill would establish. Imposes certain fines and civil penalties for specified violations of the Medical Marijuana Regulation and Safety Act.

*(Adds Health & Safety Code §§11362.769 and 11362.777; Adds Business & Professions Code §§19331 et seq. (Article 6, Chapter 3.5, Division 8), §§19350 et seq. (Article 13, Chapter 3.5, Division 8), §§19360 et seq. (Article 17, Chapter 3.5, Division 8); Adds Water Code §13276 and Fish & Game Code §12029)*



**AB 258 (Levine) – Organ Transplants: Medical Marijuana: Qualified Patients**

*CMA Position: Support if Amended*

Prohibits a hospital, physician and surgeon, procurement organization, or other person from determining the ultimate recipient of an anatomical gift based solely upon a potential recipient's status as a qualified patient, or based solely upon a positive test for the use of medical marijuana by a potential recipient who is a qualified patient, except to the extent that the qualified patient's use of medical marijuana has been found by a physician and surgeon, following a case-by-case evaluation of the potential recipient, to be medically significant to the provision of the anatomical gift. Provides that these provisions shall not be deemed to require referrals or recommendations for, or the performance of, medically inappropriate organ transplants.

*(Adds Health & Safety Code §7151.36)*

**AB 266 (Bonta) – Medical Marijuana**

*CMA Position: Support*

Enacts the Medical Marijuana Regulation and Safety Act for the licensure and regulation of medical marijuana and would establish within the Department of Consumer Affairs the Bureau of Medical Marijuana Regulation, under the supervision and control of the Director of Consumer Affairs. Requires the Board of Equalization, in consultation with the Department of Food and Agriculture, to adopt a system for reporting the movement of commercial cannabis and cannabis products. Imposes certain fines and civil penalties for specified violations of the act, and would require moneys collected as a result of these fines to be deposited into the Medical Cannabis Fines and Penalties Account.

*(Health & Safety Code §11362.775; Business & Professions Code §§27 and 101; Government Code §9147.7; Adds Business & Professions Code §§19300 et seq. (Chapter 3.5, Division 8), Labor Code §147.5 and Revenue & Taxation Code §31020)*

**SB 303 (Hueso) – Controlled Substances: Destruction of Seized Marijuana**

Authorizes the law enforcement agency to destroy seized substances suspected to be growing or harvested marijuana in excess of 2 pounds, or the amount of marijuana a medical marijuana patient or designated caregiver is authorized to possess by ordinance in the city or county where the marijuana was seized, whichever is greater, subject to specified requirements. Requires the law enforcement agency to retain at least one 2-pound sample and 5 random and representative samples consisting of leaves or buds, for evidentiary purposes, from the total amount to be destroyed. Requires the law enforcement agency to take videos that reasonably and accurately demonstrate the total amount of the suspected controlled substance to be destroyed.

*(Health & Safety Code §11479)*

**SB 643 (McGuire) – Medical Marijuana**

Sets forth standards for a physician and surgeon prescribing medical cannabis and requires that the Medical Board of California prioritize its investigative and prosecutorial resources to identify and discipline physicians and surgeons that have improperly recommended excessive cannabis to patients. Prohibits a recommending physician or surgeon from accepting, soliciting, or offering any form of remuneration from a licensed dispensary facility. Requires the appointment of a Chief of the Bureau of Medical Marijuana Regulation. Sets forth standards for the licensed cultivation of medical cannabis. Authorizes a county cannabis tax.

*(Business & Professions Code §§144, 2220.05, 2241.5, and 2242.1; Adds Business & Professions Code §§19302,1, 19319, 19320, 19322, 19323, 19324, 19325, 2525 et seq. (Article 2525, Chapter 5, Division 2), 19331 et seq. (Article 6, Chapter 3.5, Division 8), 19335 et seq. (Article 7.5, Chapter 3.5, Division 8), 19337 et seq. (Article 8, Chapter 3.5, Division 8), and 19348 et seq. (Article 11, Chapter 3.5, Division 8))*

## MEDICAL PRACTICE AND ETHICS

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**AB 260 (Lopez) – Foster Care: Parenting Youth**

Declares that a child whose parent has been adjudged a dependent child of the court shall not be considered at risk of abuse or neglect solely on the basis of information concerning the parent's placement history, past behaviors, health or mental health diagnoses occurring prior to the pregnancy. Enacts certain exceptions to existing law providing that reunification services need not be provided to the family of a dependent child under certain circumstances. Relates to the maintenance of related court records.

Requires foster care placements to support the preservation of the family unit and to refer a minor dependent parent or non-minor dependent parent to preventive service to address any concerns regarding the safety, health, or well-being of the child and to help prevent, whenever possible, the filing of a petition to declare the child a dependent of the juvenile court.

*(Welfare and Institutions Code §16002.5; Adds Welfare & Institutions Code §§361.8 and 825.5)*

**AB 614 (Brown) – Health Care Standards of Practice**

Authorizes the State Department of Public Health to use a streamlined administrative process to update regulatory references to health care standards of practice adopted by a State or national association when outdated standards are already referenced in regulations. Requires the posting the update on the Department's website, notify stakeholders of the proposed change, and regulatory change, accept comments, and to consider such comments prior to adopting new regulations. Defines “eating disorders” to have the meaning of the term as defined in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders, as published by the American Psychiatric Association.

*(Health & Safety Code §§1254.5 and 1275)*

**AB 1423 (Stone) – Prisoners: Medical Treatment**

Establishes a process of a licensed physician or dentist to file for a determination as to a prisoner patient's capacity to give informed consent and whether a surrogate decisionmaker should be appointed. Requires the related petition to contain specified information including the patient's current physical condition and a description of conditions afflicting the patient. Relates to determinations by an administrative law judge to appoint a surrogate health care decisionmaker for an inmate patient.

*(Adds Penal Code §2604)*

**SB 327 (Hernandez) – Industrial Welfare Commission: Wage Orders: Meal Periods**

Amends existing wage orders that provide that employees in the health care industry who work shifts in excess of 8 total hours in a workday may voluntarily waive their right to one of their two meals in a prescribed manner. Provides that the health care employee meal period waiver provisions were valid and enforceable on and after October 1, 2000 and continue to be valid and enforceable.

*(Labor Code §516)*

**SB 358 (Jackson) – Conditions of Employment: Gender Wage Differential**

Prohibits an employer from paying any of its employees at wage rates less than those paid to employees of the opposite sex for substantially similar work, when viewed as a composite of skill, effort, and responsibility, as specified. Prohibits an employer from prohibiting an employee from disclosing the employee's own wages, discussing the wages of others, inquiring about another employee's wages, or aiding or encouraging any other employee to exercise his or her rights under the law.

*(Labor Code §1197.5)*

**SB 464 (Hernandez) – Healing Arts: Self-Reporting Tools**

*CMA Position: Support*

Authorizes a physician and surgeon, or a registered nurse acting, a certified nurse-midwife, a nurse practitioner, a physician assistant, or a pharmacist acting within the scope of a specified existing law, to use a self-screening tool that will identify patient risk factors for the use of self-administered hormonal contraceptives by a patient, and, after an appropriate prior examination, to prescribe, furnish, or dispense, as applicable, self-administered hormonal contraceptives to the patient. Authorizes blood pressure, weight, height, and patient health history to be self-reported using the self-screening tool.

*(Adds Business & Professions Code §2242.2)*

**SB 478 (Huff) – Child Abuse and Neglect Reporting Act: Mandated Reporters Pilot Program**

Authorizes certain county welfare agencies to develop a pilot program for Internet-based reporting of child abuse and neglect until January 1, 2021. Imposes specified standards on a county that participates. Requires a county choosing to participate in the program to hire an evaluator to monitor the program, and to develop measures to determine the program's effectiveness and report to specified Legislative committees. Authorizes program conclusion if the program compromises the safety of children.

*(Penal Code §11166.02; Welfare & Institutions Code §10612.5)*

**SB 600 (Pan) – Discrimination: Citizenship: Language: Immigration Status**

Relates to protecting individuals regardless of immigration status from employment discrimination. Extends the protections of the Unruh Civil Rights Act to persons regardless of citizenship, primary language, or immigration status. Specifies that these protections do not require the provision of services or documents in a language other than English, beyond that which is otherwise required by law.

*(Civil Code §51)*

## **MEDICAL RECORDS & PRIVACY**

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**AB 503 (Rodriguez) – Emergency Medical Services**

Authorizes a health facility to release patient identifiable medical information to a defined EMS provider, a local EMS agency, and the Emergency Medical Services Authority, to the extent specified data elements are requested for quality assessment and improvement purposes. Authorizes the Authority to development minimum standards for the implementation of such data collection.

*(Adds Health & Safety Code §1797.122)*

**AB 964 (Chau) – Civil Law: Privacy**

Defines “encrypted” to mean rendered unusable, unreadable, or indecipherable to an unauthorized person through a security technology or methodology generally accepted in the field of information technology for purposes of existing law relating to the breach of security relating to the disclosure of a person's computerized personal information.

*(Civil Code §§1798.29 and 1798.82)*

**AB 1104 (Rodriguez) – Search Warrants**

Authorizes the issuance of a search warrant when the property or things to be seized are controlled substances or any device, contrivance, instrument, or paraphernalia used for unlawfully using or administering a controlled substance.

*(Penal Code §1524)*

**AB 1129 (Burke) – Emergency Medical Services: Data and Information System**

Requires an emergency medical care provider to, when collecting and submitting data to a local EMS agency, use an electronic health record system that exports data in a format compliant with the current versions of the State and National Emergency Medical Services Information Systems' standards and ensure that the system can be integrated with the local agency's system. Prohibits mandating a provider use a specified electronic health record system to collect and share data with the agency.

*(Adds Health & Safety Code §1797.227)*

**AB 1337 (Linder) – Medical Records: Electronic Delivery**

Requires a medical provider or attorney to provide an electronic copy of a medical record, when an electronic copy is requested that is maintained electronically and is readily producible in such form and format. Requires the provider to accept a prescribed authorization form from the patient if the provider determines that the form is valid.

*(Evidence Code §1158)*

**AB 1541 (Committee on Privacy and Consumer Protection) – Privacy: Personal Information**

Relates to law requiring a business to implement and maintain security procedures to protect personal information. Revises the definition of personal information to include health insurance information, and a username or email address combined with a password or security question and answer for access to an online account.

*(Civil Code §1798.81.5)*

**SB 178 (Leno) – Privacy: Electronic Communications: Search Warrant**

Prohibits a government entity from compelling the production of or access to electronic communication information or electronic device information without a search warrant, wiretap order, order for electronic reader records or subpoena, except in defined emergencies. Specifies the conditions under which a government entity may access electronic device information by means of physical interaction or electronic communication with the device, such as pursuant to a search warrant, wiretap order, or consent of the owner of the device. Provides that a California or foreign corporation and its officers, employees, and agents are not subject to any cause of action for providing records, information, facilities, or assistance in accordance to the terms of a warrant.

*(Adds Penal Code §§1546 et seq. (Chapter 3.6, Title 12, Part 2))*

**SB 570 (Jackson) – Personal Information: Privacy Breach**

Amends existing law requiring a person or business conducting business in the State and any agency that owns or licenses computerized data that includes personal information to disclose a breach of the security of the system in the most expedient time possible and without unreasonable delay. Requires that a data breach notification form be titled "Notice of Data Breach" and consist of specified information. Provides exemption from security breach notification requirements under this section for covered entities under HIPAA.

*(Civil Code §§1798.29 and 1798.82)*

## **MENTAL HEALTH**

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### **AB 436 (Jones) – Guardian or Conservator: Powers and Duties**

Amends existing law that, upon a court's finding that a conservatee has dementia, and a functional impairment, a conservator may place the conservatee in a prescribed secured residential or nursing facility and authorize the administration of prescribed medications appropriate for care and treatment, and requires representation by an attorney. Requires the court, upon granting or denying that authority to a conservator, to either discharge the attorney or order continuation of the representation.

*(Probate Code §2356.5)*

### **AB 468 (Jones) – Wards and Conservatees: Mental Health**

Relates to existing law that prescribes the extent of the powers and duties of guardians and conservators and the involuntary commitment of a ward or conservatee to a mental health treatment facility and requires the Director of State Hospitals to adopt and issue regulations defining mental health treatment facility. Deletes the requirement that the Director adopt and issue regulations defining mental health treatment facility.

*(Probate Code §2356)*

### **AB 1194 (Eggman) – Mental Health: Involuntary Commitment**

*CMA Position: Support*

Provides, when determining if a person is a danger to him- or herself or to others, as a result of a mental health disorder, that the individual making the determination consider available relevant information about the historical course of the person's mental disorder if the individual concludes that the information has a reasonable bearing on the determination. Requires an application to record whether the historical cause of the disorder was considered in the determination of probable cause.

*(Welfare & Institutions Code §5150)*

**AB 1424 (Mullin) – Mental Health: Community Mental Health Board**

Exempts from a certain prohibition relating to members of community mental health boards, a consumer of mental health services who obtained employment with an employer and who holds a position in which he or she has no interest, influence, or authority over any financial or contractual matter concerning the employer. Requires that member to abstain from voting on any financial or contractual issue concerning his or her employer that may come before the board.

*(Welfare & Institutions Code §5604)*

**SB 11 (Beall) – Peace Officer Training: Mental Health**

*CMA Position: Support*

Requires the Commission on Peace Officer Standards and Training to review the training module relating to persons with a mental illness, intellectual disability, or substance abuse disorder in its basic training course, and develop additional training to better prepare law enforcement officers to recognize, deescalate, and appropriately respond to person with such conditions. Requires the Commission to establish and keep the course updated in a specified manner. Provides which officers must take the course.

*(Adds Penal Code §§13515.26 and 13515.27)*

**SB 29 (Beall) – Peace Officer Training: Mental Health**

*CMA Position: Support*

Requires Commission on Peace Officer Standards and Training (POST) to require field training officers who are instructors for the field training program to have at least 8 hours of crisis intervention behavioral health training in handling person with developmental disabilities or mental illness, or both.

*(Adds Penal Code §§13515.28, 13515.29, and 13515.295)*

**SB 238 (Mitchell) – Foster Care: Psychotropic Medication**

Requires the Judicial Council to amend and adopt rules of court and develop appropriate forms for the implementation of specified provisions. Specifies the contents of such rules of court. Requires a report on the number of such medications authorized. Requires specified related training on aspects of taking and administering such medications. Requires foster care public health nurses to receive this training.

*(Health & Safety Code §§1522.41 and 1529.2; Welfare & Institutions Code §§304.7, 317, 369.5, 739.5, 16003, 16206, and 16501.3; Adds Welfare & Institutions Code §16501.4)*

**SB 319 (Beall) – Child Welfare Services: Public Health Nursing**

Authorizes a foster care public health nurse, as part of medical care planning and coordination, to monitor and oversee the child's use of psychotropic medications. Requires such nurse to assist a non-

minor dependent to make informed decisions about health care. Authorizes the disclosure of health care and mental health care information to such nurse.

*(Civil Code §56.103; Welfare & Institutions Code §§5328.04 and 16501.3)*

### **SB 453 (Pan) – Prisons: Involuntary Medication**

Relates to findings of mental incompetence in criminal proceedings. Relates to withdrawal of consent for antipsychotic medication or circumstances where a treating psychiatrist determines that antipsychotic medication is medically necessary and appropriate. Authorizes a treating psychiatrist to request that a facility medical director designate another psychiatrist to act in the place of the psychiatrist for purposes of involuntary medication. Requires an examination prior to the hearing.

*(Penal Code §1370)*

### **SB 484 (Beall) – Juveniles**

Provides that psychotropic medications may be used at a group home, other than at a runaway and homeless youth shelter, only in accordance with the written directions of the physician prescribing the medication and as authorized by the juvenile court. Requires the group home to maintain in the child's records specified information regarding the administration of those medications. Requires the Department of Social Services, in consultation with the State Department of Health Care Services and stakeholders, to establish a methodology to identify those group homes that have levels of psychotropic drug utilization warranting additional review.

*(Health & Safety Code §§1507.6 and 1536; Welfare & Institutions Code §11469; Adds Health & Safety Code §§1538.8 and 1538.9;)*

### **SB 507 (Pavley) – Sexually Violent Predators**

Amends existing law that provides for the civil commitment of criminal offenders who have been determined to be sexually violent predators for treatment in a secure state hospital facility. Requires an evaluator performing an updated evaluation to include a statement listing the medical and psychological records reviewed. Directs the court to issue a subpoena for a certified copy of these records. Authorizes attorneys to use the records in the commitment proceedings but prohibits disclosure for any other purpose.

*(Welfare & Institutions Code §6603)*

### **SB 613 (Allen) – State Department of Public Health: Dementia Guidelines Workgroup**

Requires the Department of Public Health to convene a workgroup to update the Guidelines for Alzheimer's Disease Management in the State to address changes in the health care system, including changes in the federal Patient Protection and Affordable Care Act, Medicaid, and Medicare. Requires the submission of a report on the updates and recommendations to the Legislature.



*(Health & Safety Code §125285.5)*

### **SB 621 (Hertzberg) – Mentally Ill Offender Crime Reduction Grants**

*CMA Position: Support*

Authorizes the funds from a mentally ill offender crime reduction grant administered by the Board of State and Community Corrections to be used to fund specialized diversion programs that offer appropriate mental health and treatment services.

*(Penal Code §6045.4)*

## **OFFICE SAFETY**

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### **SB 225 (Wieckowski) – Medical Waste**

Amends the Medical Waste Management Act. Revises the definition of biohazard bag. Limits the application of the requirement that biohazard film bags used for transport be marked and certified by the manufacturer as having passed specified tests only to those bags used to transport from the generator's facility onto roadways and into commerce to a treatment and disposal facility. Revises the requirements for such bags that are used to collect medical waste within a specified facility. Relates to tracking documents.

*(Health & Safety Code §§117630, 117904, 117943, 117945, 117975, 118032, 118040, 118345, and 118275)*

### **SB 612 (Jackson) – Hazardous Materials**

Requires a hazardous materials generator to include all hazardous waste it has generated in any month when computing whether it is required to comply with specified regulatory requirements. Requires a business plan of a business handling hazardous materials to contain a site map and to include additional map requirements. Excludes a tank or tank facility located on and operated on a farm from the definition of above ground storage tanks. Increases the administrative penalty for violations of the disposal of medical waste.

*(Health & Safety Code §§25270.2, 25270.3, 25270.4.1, 25270.4.5, 25270.5, 25270.6, 25270.9, 25281, 25404, 25505, 25507, 25507.2, 25508.1, 25531.2, and 118330; Adds Health & Safety Code §25158.1)*

## **PROFESSIONAL LICENSING AND DISCIPLINE**

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**AB 179 (Bonilla) – Healing Arts**

A sunset extension bill. Under existing law, it is not unprofessional conduct when sexual contact is between a physician and surgeon and patient, client or customer who is his or her spouse or person in an equivalent domestic relationship, as specified. This bill expands this exception by providing that it would not be unprofessional conduct when consensual sexual contact is between a licensee and his or her spouse or person in an equivalent domestic relationship, as specified. Amends provisions relating to the Dental Board. Amends provisions related to the Board of Vocational Nursing and Psychiatric Technicians and extends the repeal date of the provisions relating to the board to January 1, 2018.

*(Business & Professions Code §§726, 1601.1, 1616.5, 1632, 1638, 1638.1, 1638.3, 1646.6, 1647.8, 1724, 1725, 1742, 1752.1, 2841, 4501, 4503, 205, 2894, 4547, 2847.1, 2847.5, 2858.5; Adds Business & Professions Code §1650.1)*

**AB 333 (Melendez) – Healing Arts: Continuing Education**

Allows specified healing arts licensees to apply a unit of continuing education credit, once per renewal cycle, towards units for attending courses that results in the licensee becoming a certified instructor of cardiopulmonary resuscitation or the proper use of an automated external defibrillator. Allows such licensees to apply a specified number of continuing education credits toward any required continuing education for conducting first aid training sessions for employees of school districts and community college districts.

*(Adds Business & Professions Code §856)*

**SB 467 (Hill) – Professions and Vocations**

Requires the Attorney General's Office to submit annual reports on consumer complaints concerning a professional licensed under a Department of Consumer Affairs agency. It also requires the Director of the Department of Consumer Affairs (DCA) to implement "Complaint Prioritization Guidelines" for health care boards. Prioritization of disciplinary cases and specific enforcement reporting was highlighted as a concern during oversight hearings and sunset review of the DCA and licensing boards. This bill also extends the sunset for two Boards, the California Board of Accountancy and the term of the executive officer, and the Contractors State License Board and the term of the Registrar, until January 1, 2020.

*(Business & Professions Code §§5000, 5015.6, 7000.5, 7011, 7071.6; Adds Business & Professions Code §§312.2, 328, and 5100.5; Repeals Business & Professions Code §7067.5)*

**SB 672 (Hernandez) – Discovery: Pharmacist Review Committees**

Extends the exemption from discovery as evidence the proceedings and records of specified committees of health care professionals and review committees having the responsibility of evaluation and improvement of the quality of care. Extends the exemption, for purposes of civil proceedings only, to the proceedings and records of pharmacist organized committees and review committees.

*(Evidence Code §1157)*

### **SB 800 (Committee on Business, Professions and Economic Development) – Healing Arts**

The committee's technical clean-up bill. Updates current law on health-related regulatory boards under the Department of Consumer Affairs through minor, non-substantive deletions or additions to statute.

*(Business & Professions Code §§28, 146, 500, 650.2, 800, 1603a, 1618.5, 1640.1, 1648.10, 1650, 1695, 1695.1, 1905.1, 1944, 2054, 2401, 2428, 2529, 2650, 2770, 2770.1, 2770.2, 2770.7, 2770.8, 2770.10, 2770.11, 2770.12, 2770.13, 2835.5, 3057, 3509.5, 4836.2, 4887, 4938, 4939, 4980.399, 4980.43, 4980.54, 4984.01, 4989.34, 4992.09, 4996.2, 4996.22, 4996.28, 4999.1, 4999.2, 4999.3, 4999.4, 4999.5, 4999.7, 4999.45, 4999.46, 4999.55, 4999.76, and 4999.100; Repeals Business & Professions Code §1917.2)*

## **PUBLIC HEALTH**

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### **AB 53 (Garcia) – Vehicles: Child Safety Seats**

*CMA Position: Support*

Requires a parent, legal guardian, or the driver of a motor vehicle to properly secure a child who is under 2 years of age in an appropriate rear-facing child passenger restraint system, unless the child weighs 40 or more pounds or is 40 or more inches in height.

*(Vehicle Code §27360)*

### **AB 216 (Garcia) – Product Sales to Minors: Vapor Products**

Prohibits the sale of any device intended to deliver a non-nicotine product in a vapor state, to be directly inhaled by the user, to a person under 18 years of age. Exempts from the prohibition the sale of a drug or medical device that has been approved by the federal Food and Drug Administration.

*(Adds Health & Safety Code §24600 (Chapter 5, Division 20))*

### **AB 768 (Thurmond) – Smokeless Tobacco: Baseball Stadiums**

*CMA Position: Support*

Commencing December 1, 2016, prohibits the use or possession of smokeless tobacco products on the playing field of a baseball stadium during a professional baseball game or practice. Provides that provisions do not prohibit the adoption of a more restrictive local ordinance.

*(Adds Health & Safety Code §118916 (Article 1.5, Chapter 4, Part 15, Division 104))*

**AB 1321 (Ting) – Nutrition Incentive Matching Grant Program**

*CMA Position: Support*

Establishes the Nutrition Incentive Matching Grant Program in the Office of Farm to Fork. Creates the Nutrition Incentive Matching Grant Account in the Department of Food and Agriculture Fund to collect matching funds received from a specified federal grant program and funds from other public and private sources to encourage the purchase and consumption of fresh fruits, nuts, and vegetables of the State by nutrition benefit clients. Requires moneys in the account be awarded in the form of grants to qualified entities.

*(Adds Food & Agricultural Code §§49010 et seq. (Chapter 13, Division 17))*

**AB 1369 (Frazier) – Special Education: Dyslexia**

*CMA Position: Support*

Requires the development of program guidelines for dyslexia to be used to assist regular education teachers, special education teachers, and parents to identify and assess pupils with dyslexia, and to plan, provide, evaluate, and improve educational services to pupils with dyslexia. Requires the state board to include “phonological processing” in that description of basic psychological processes.

*(Adds Education Code §§56334 and 56335)*

**SB 27 (Hill) – Livestock: Use of Antimicrobial Drugs**

*CMA Position: Support*

Prohibits the administration of medically important antimicrobial drugs to livestock unless prescribed by a licensed veterinarian or a feed directive. Prohibits the administration of a medically important antimicrobial drug to livestock solely for purposes of promoting weight gain or improving feed efficiency. Requires the development of antimicrobial stewardship guidelines and best practices on the proper use of such drugs. Requires gathering of related information. Provides civil penalties for violations.

*(Adds Food & Agricultural Code §§14400 et seq. (Chapter 4.5, Division 7))*

**SB 277 (Pan) – Public Health: Vaccinations**

*CMA Position: Sponsor*

Eliminates the exemption from existing specified immunization requirements based upon personal beliefs. Allows an exemption from future requirements deemed appropriate by the State Department of Public Health for either medical reasons or personal beliefs. Exempts pupils in a home-based private school and students enrolled in an independent study program and who do not receive classroom-based instruction. Provides an temporary exclusion is only for a child who has been exposed to a specified

disease and whose proof of status does not show proof of immunization against one of specified diseases. After July 1, 2016, prohibits a governing authority from unconditionally admitting to any private or public elementary or secondary school, child day care center, day nursery, nursery school, family day care home, or development center within the state for the first time or admitting or advancing any pupil to the 7<sup>th</sup> grade level, unless the pupil has been immunized as required by this bill.

*(Health & Safety Code §§120325, 120335, 120370, and 120375; Adds Health & Safety Code §120338; Repeals Health & Safety Code §120365)*

### **SB 287 (Hueso) – Automated External Defibrillators**

*CMA Position: Support*

Requires certain occupied structures that are not owned or operated by any local government entity and are constructed on or after January 1, 2017, to have an automated external defibrillator (AED) on the premises. Requires a person or entity that supplies an AED to comply with specified existing law regarding AEDs, and exempts a person or entity that acquires an AED for emergency care from liability for civil damages resulting from any acts or omissions in the rendering of emergency care if certain requirements are met.

*(Adds Health & Safety Code §19300 (Chapter 3, Part 3, Division 13))*

### **SB 658 (Hill) – Automated External Defibrillators**

*CMA Position: Support*

Provides an exemption from civil liability for a physician and surgeon or other health care professional that is involved in the selection, placement, or installation of an Automated external defibrillators (AED). Requires person or entity that acquires an AED to comply with specified regulations for the placement of the device and ensure that the AED is maintained and tested. Requires certain notification regarding an AED location by building owners and to inform tenants regarding AED training.

*(Civil Code §1714.21; Health & Safety Code §1797.196)*

### **SB 738 (Huff) – Pupil Health: Epinephrine Auto-Injectors: Liability Limitation**

*CMA Position: Support*

Prohibits an authorizing physician and surgeon from being subject to professional review, being liable in a civil action, or being subject to criminal prosecution for the issuance of a prescription or order of emergency epinephrine auto-injectors to a qualified supervisor of health or administrator at a school district, unless the physician and surgeon's issuance of the prescription or order constitutes gross negligence or willful or malicious conduct.

*(Education Code §49414)*

**SB 792 (Mendoza) – Day Care Facilities: Immunizations: Exemptions**

*CMA Position: Support*

Prohibits a person from being employed or volunteering at a day care center or family day care home if he or she not been immunized against influenza, pertussis, and measles. Specifies the circumstances under which a person would be exempt from such requirement. Requires maintaining immunization documentation.

*(Health & Safety Code §§1597.055 and 1597.54; Adds Health & Safety Code §§1596.7995 and 1597.622)*

## REPRODUCTIVE ISSUES

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**AB 775 (Chiu) – Reproductive FACT Act**

Enacts the Reproductive Freedom, Accountability, Comprehensive Care, and Transparency (FACT) Act that requires a licensed covered facility to disseminate a notice to all clients stating the State has public programs that provide immediate free or low-cost access to family planning services, prenatal care, and abortion, for eligible women. Requires an unlicensed covered facility to disseminate a notice that the facility is not licensed as a medical facility by the State. Authorizes civil penalties against facilities that do not comply.

*(Adds Health & Safety Code §§123470 et seq. (Article 2.7, Chapter 2, Division 106))*

**AB 960 (Chiu) – Parentage: Assisted Reproduction**

Provides that the donor of semen provided to a licensed physician and surgeon or to a licensed sperm bank for use in assisted reproduction is treated as if he were not the natural parent of the child unless otherwise agreed to in a writing signed by the donor and woman prior to the conception of the child. Provides, if the semen is not provided to a licensed physician and surgeon or a licensed sperm bank, that the donor of semen for use in assisted reproduction by a woman other than the donor's spouse is treated in law as if he were not the natural parent of the child if either the donor and the woman agreed in a writing prior to conception that the donor would not be a parent or a court finds by clear and convincing evidence that the child was conceived through assisted reproduction and that, prior to the conception of the child, the woman and the donor had an oral agreement that the donor would not be a parent. Provides that the donor of ova for use in assisted reproduction is treated as if she were not the natural parent of a child thereby conceived unless the court finds satisfactory evidence that the donor and the woman intended for the donor to be a parent.

*(Family Code §§7613 and 7613.5)*

**AB 1049 (Patterson) – Parent and Child Relationship**

States that a person's offer or refusal to sign a voluntary declaration of paternity may be considered as a factor, but shall not be determinative as to the issue of legal parentage in any proceedings regarding the establishment or termination of parental rights. Requires a non-attorney donor facilitator to direct his or her client to deposit client funds in an independent bonded escrow account or a trust account maintained by an attorney, subject to specified withdrawal requirements.

*(Family Code §§7612, 7960, and 7961)*

## **WORKERS' COMPENSATION**

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### **AB 438 (Chiu) – State Government: Workers' Compensation**

*CMA Position: Support*

Requires the Department of Industrial Relations and the Division of Workers' Compensation to make specified forms, notices, and fact sheets available in Chinese, Tagalog, Korean, and Vietnamese. Requires the Administrative Director to make recommendations regarding any other documents that should be translated into languages other than English. Requires the Department and the Division to submit the recommendations and any translated documents to the Legislature.

*(Labor Code §124)*

### **AB 627 (Gomez) – Pharmacy Benefit Managers: Contracting Pharmacies**

Exempts certain contracts governing the medicines and medical supplies that are required to be provided to injured employees in workers' compensation cases from requirements of existing law that imposes an audit of pharmacy services provided to beneficiaries of a health benefit plan. Requires a pharmacy benefit manager reimbursing a contracting pharmacy for a drug on a maximum allowable cost basis to include contract information identifying any national drug pricing compendia or other data sources used to determine the maximum allowable cost for the drugs on a maximum allowable cost list and to provide for an appeal process. Requires the manager to provide the most up-to-date cost list or lists used by the manager in a Web-based format.

*(Business & Professions Code §§4430 and 4432; Adds Business & Professions Code §4440)*

### **AB 1124 (Perea) – Workers' Compensation: Medication Formulary**

Requires the administrative director to establish a drug formulary, as part of the medical treatment utilization schedule, for medications prescribed in the workers' compensation system. Requires the administrative director to meet and consult with stakeholders, as specified, prior to the adoption of the formulary. Requires the administrative director to publish at least 2 interim reports on the Division of Workers' Compensation website describing the status of the creation of the formulary, until the formulary is implemented. Requires the administrative director to update the formulary at least on a

quarterly basis to allow for the provision of all appropriate medications, including medications new to the market. Exempts an order updating the formulary from the Administrative Procedure Act and other provisions, as specified. Requires the administrative director to establish an independent pharmacy and therapeutics committee to review and consult with the administrative director in connection with updating the formulary, as specified.

*(Labor Code §§4600.1, 4600.2, and 5307.27; Adds Labor Code §§5307.28 and 5307.29)*

### **AB 1513 (Williams) – Workers' Compensation and Piece-Rate Compensation**

Repeals obsolete requirements that the Commission on Health and Safety and Workers' Compensation to undertake a specified study examining the causes of the number of insolvencies among workers' compensation insurers. Requires the itemized statement provided to employees compensated on a piece-rate basis to also separately state specified information. Requires employees to be compensated for rest and recovery periods and other non-productive time separately from any piece-rate compensation.

*(Labor Code §226.2; Repeals Labor Code §§77.7, 127.6, and 138.65)*

### **SB 542 (Mendoza) – Workers' Compensation: Medical Provider Networks: Fee Schedules**

Requires every medical provider network to post on its Internet website, information about how to contact the medical provider network contact and medical access assistants, and also information about how to obtain a copy of any notification regarding the medical provider network that is required to be given to an employee by regulations adopted by the administrative director. Provides that a modification that updates an entire medical provider network plan to bring the plan into full compliance with applicable laws would be deemed approved for a period of 4 years from the modification approval date. Requires medical provider networks to file continuity of care policies. Authorizes, rather than requires, the fee schedule to be based on either the maximum service hours and fees set forth in law governing in-home supportive services or other state or federal home health care services fee schedules.

*(Labor Code §§4616, 4616.2, 4616.4, 4616.5, and 5307.8)*

### **SB 623 (Lara) – Workers' Compensation: Benefits**

*CMA Position: Support*

Provides that a person shall not be excluded from receiving benefits under the Uninsured Employers Fund or the Subsequent Injuries Benefits Trust Fund based on his or her citizenship or immigration status.

*(Adds Labor Code §§3733 and 4756)*