



Legislative Tracking Grid - 3-19-19- California

Bill No./Author	Description	CalPACE Position	Organizations in Support/Oppose	Status	Similar Legislation
AB 4 Arambula D	<p>Medi-Cal: eligibility. Current law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. Federal law prohibits payment to a state for medical assistance furnished to an alien who is not lawfully admitted for permanent residence or otherwise permanently residing in the United States under color of law. This bill would extend eligibility for full-scope Medi-Cal benefits to individuals of all ages, if otherwise eligible for those benefits, but for their immigration status. The bill would delete provisions delaying eligibility and enrollment until the director makes the determination as specified.</p>	<p>Recommend Support</p>		<p>12/4/2018 - From printer. May be heard in committee January 3.</p>	
AB 5 Gonzalez D	<p>Worker status: independent contractors. Current law, as established in the case of Dynamex Operations West, Inc. v. Superior Court of Los Angeles (2018) 4 Cal.5th 903 (Dynamex), creates a presumption that a worker who performs services for a hirer is an employee. Current law requires a 3-part test, commonly known as the “ABC” test, to establish that a worker is independent contractor. This bill would state the intent of the Legislature to include provisions within this bill would codify the decision in the Dynamex case and clarify its application.</p>			<p>12/4/2018 - From printer. May be heard in committee January 3.</p>	
AB 50 Kalra D	<p>Medi-Cal: Assisted Living Waiver program. Would require the State Department of Health Care Services to submit,</p>	<p>Recommend Support</p>		<p>1/17/2019 - Referred to Com.</p>	

	<p>in 2019, to the federal Centers for Medicare and Medicaid Services a request for renewal of the Assisted Living Waiver program with specified amendments. The bill would require, as part of the amendments, the department to increase the number of participants in the program, as specified, in the 15 existing waiver counties, expansion of the program beyond those counties on a regional basis, and modification to the provider reimbursement tiers while also maintaining the program's budget-neutral provisions.</p>			<p>on HEALTH. 3/26/2019 1:30 p.m. - State Capitol, Room 4202 ASSEMBLY HEALTH, WOOD, Chair</p>	
<p>AB 71 Melendez R</p>	<p>Employment standards: independent contractors and employees. Current case law establishes a three-part test, known as the "ABC" test, for determining whether a worker is considered an independent contractor for purposes of specified wage orders. Under this test, a worker is properly considered an independent contractor only if the hiring entity establishes; 1) that the worker is free from the control and direction of the hirer in connection with the performance of the work, both under the contract for performance of the work and in fact; 2) that the worker performs work outside the usual course of the hiring entity's business; and 3) that the worker is customarily engaged in an independently established trade, occupation, or business of the same nature as the work performed for the hiring entity. This bill would, instead, require a determination of whether a person is an employee or an independent contractor to be based on a specific multifactor test, including whether the person to whom service is rendered has the right to control the manner and means of accomplishing the result desired, and other identified factors.</p>			<p>2/26/2019 - Re-referred to Com. on L. & E.</p>	
<p>AB 251 Patterson R</p>	<p>Personal income taxes: credit: family caregiver. The Personal Income Tax Law allows various credits against the taxes imposed by that law. This bill, for each taxable year beginning on or after January 1, 2020, and before January 1, 2025, would allow a credit against those taxes in an amount equal to 50% of the amount paid or incurred by a family caregiver during the taxable year for eligible expenses related to the care of an eligible family member, not to exceed \$5,000.</p>			<p>3/11/2019 - In committee: Set, first hearing. Hearing canceled at the request of author. 3/18/2019 2:30 p.m. - State Capitol, Room 126 ASSEMBLY REVENUE AND TAXATION, BURKE, Chair</p>	
<p>AB 387</p>	<p>Physician and surgeons: prescriptions.</p>			<p>2/15/2019 -</p>	

Gabriel D	Would require a physician and surgeon to indicate the purpose for a drug or device on the prescription for that drug or device when providing a prescription to a patient unless the patient chooses to opt out of having the purpose for the drug or device included on the prescription.			Referred to Com. on B. & P.	
AB 388 Limón D	Alzheimer's disease. Would require the State Department of Public Health to implement the action agenda items in the Healthy Brain Initiative, as defined, and coordinate a statewide public awareness campaign to educate the public on the sign's and symptoms of Alzheimer's disease and other dementias and to reach consumers at risk of cognitive impairment, with targeted outreach to populations at greater risk of developing Alzheimer's disease and other dementias.	Recommend Support		2/15/2019 - Referred to Com. on HEALTH. 3/19/2019 1:30 p.m. - State Capitol, Room 4202 ASSEMBLY HEALTH, WOOD, Chair	
AB 406 Limón D	Paid family leave. Current law provides family temporary disability insurance benefits to workers to care for their family members, and is known as Paid Family Leave. This bill would declare the intent of the Legislature to enact legislation that would ensure that paid family leave forms are language-accessible to all families in the state.			2/8/2019 - From printer. May be heard in committee March 10.	
AB 414 Bonta D	Healthcare coverage: minimum essential coverage. Current federal law, the Patient Protection and Affordable Care Act (PPACA), enacts various healthcare coverage market reforms as of January 1, 2014. PPACA generally requires individuals, and any dependents of the individual, to maintain minimum essential coverage, as defined, and, if an individual fails to maintain minimum essential coverage, PPACA imposes on the individual taxpayer a penalty. This provision is referred to as the individual mandate. This bill would require a California resident to ensure that the resident and the resident's dependents are covered under minimum essential coverage for each month beginning after 2019. The bill would impose a penalty for the failure to maintain minimum essential coverage.			2/15/2019 - Referred to Com. on HEALTH. 4/9/2019 1:30 p.m. - State Capitol, Room 4202 ASSEMBLY HEALTH, WOOD, Chair	
AB 480 Salas D	Mental health: older adults. Would establish within the State Department of Health Care Services an Older Adult Mental Health Services Administrator to oversee mental health services for older adults. The bill would require that position to be funded with administrative funds reserved to the department from the Mental Health Services Fund. The bill would also state the intent of the	Recommend Support		3/4/2019 - Referred to Coms. on AGING & L.T.C. and HEALTH. 4/2/2019 3 p.m. -	

	Legislature to include provisions in the bill that, among other things, increase service integration for older adults receiving mental health services funded by the Mental Health Services Fund.			State Capitol, Room 127 ASSEMBLY AGING AND LONG TERM CARE, NAZARIA N, Chair	
AB 506 Kalra D	Long-term health facilities. The Long-Term Care, Health, Safety, and Security Act of 1973 generally provides for the licensure and regulation of long-term healthcare facilities by the State Department of Public Health and establishes an inspection and reporting system to ensure that long-term healthcare facilities are in compliance with state statutes and regulations. This bill, under the act, would redefine a class “AA” violation as a class “A” violation that the department determines to have been a substantial factor, as described, in the death of a resident of a long-term healthcare facility. The bill would deem a violation of certain resident’s rights described under a class “B” violation as constituting harm and require a separate citation for each violation, as specified.	Input Needed		2/21/2019 - Referred to Com. on HEALTH. 4/2/2019 1:30 p.m. - State Capitol, Room 4202 ASSEMBLY HEALTH, WOO D, Chair	
AB 526 Petrie- Norris D	Public social services: SSI/SSP. Current law, The Burton-Moscone-Bagley Citizens’ Income Security Act for Aged, Blind and Disabled Californians, requires the State Department of Social Services to contract with the United States Secretary of Health and Human Services to make payments to supplement Supplemental Security Income payments made available pursuant to the federal Social Security Act. This bill would make technical, non-substantive changes to that provision.			2/14/2019 - From printer. May be heard in committee March 16.	
AB 537 Arambula D	Medi-Cal managed care: quality improvement and value-based financial incentive program. Would require, commencing January 1, 2022, a Medi-Cal managed care plan to meet a minimum performance level (MPL) that improves the quality of health care and reduces health disparities for enrollees, as specified. The bill would require the State Department of Health Care Services to establish both a quality assessment and performance improvement program and a value-based financial incentive program to ensure that a Med-Cal managed care plan achieves an MPL. The bill would, among other things, require the department to establish a public stakeholder process in the planning, development, and ongoing oversight of the programs.			2/25/2019 - Referred to Com. on HEALTH. 4/9/2019 1:30 p.m. - State Capitol, Room 4202 ASSEMBLY HEALTH, WOO D, Chair	

<p>AB 567 Calderon D</p>	<p>Long-term care insurance. Would establish the Long Term Care Insurance Task Force in the Department of Insurance, chaired by the Insurance Commissioner or the commissioner's designee, and composed of specified stakeholders and representatives of government agencies to examine the components necessary to design and implement a statewide long-term care insurance program. The bill would require the task force to recommend options for establishing this program and to comment on their respective degrees of feasibility in a report submitted to the commissioner, the Governor, and the Legislature by July 1, 2021.</p>	<p>Input Needed</p>		<p>2/25/2019 - Referred to Com. on INS. and AGING & L.T.C. 4/3/2019 9 a.m. - State Capitol, Room 437 ASSEMBLY INSURANCE, DA LY, Chair</p>	
<p>AB 568 Reves D</p>	<p>Caregiver resource centers: volunteer workforce. Would establish, until January 1, 2025, a pilot program, administered by the Director of Health Care Services, pursuant to which the CRCs would select, train, and place volunteers to provide care to persons who are at least 65 years of age or who have a cognitive impairment and meet specified criteria. The bill would establish selection criteria for prospective volunteers and specified training requirements. The bill would require the CRCs to provide a stipend and an educational award, as specified, to volunteers.</p>			<p>2/25/2019 - Referred to Com. on AGING & L.T.C. 4/2/2019 3 p.m. - State Capitol, Room 127 ASSEMBLY AGING AND LONG TERM CARE, NAZARIAN, Chair</p>	
<p>AB 633 Voepel R</p>	<p>Health facilities. Would state the intent of the Legislature to enact legislation requiring health facilities to evaluate their safety and sanitation practices.</p>			<p>2/19/2019 - From printer. May be heard in committee March 21.</p>	
<p>AB 667 Muratsuchi D</p>	<p>Medi-Cal. Current law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services, and under which qualified low-income individuals receive healthcare services. The Medi-Cal program is, in part, governed and funded by federal Medicaid Program provisions. Under current law, healthcare, as administered under the Medi-Cal program, is considered a component of public social services. This bill would make technical, non-substantive changes to those provisions.</p>			<p>2/19/2019 - From printer. May be heard in committee March 21.</p>	
<p>AB 678 Flora R</p>	<p>Medi-Cal: podiatric services. Current law excludes certain optional Medi-Cal benefits, including,</p>			<p>2/28/2019 - Referred to Com.</p>	

	among others, podiatric services and chiropractic services, from coverage under the Medi-Cal program, except for specified beneficiaries. This bill would provide that the exclusion of podiatric services is effective only through December 31, 2019, and would restore podiatric services as a covered benefit of the Medi-Cal program as of January 1, 2020, or the effective date of federal approvals as specified.			on HEALTH. 4/2/2019 1:30 p.m. - State Capitol, Room 4202 ASSEMBLY HEALTH, WOOD, Chair	
AB 683 Carrillo D	Medi-Cal: eligibility. Current law requires Medi-Cal benefits to be provided to individuals eligible for services pursuant to prescribed standards, including a modified adjusted gross income (MAGI) eligibility standard. Current law prohibits the use of an asset or resources test for individuals whose financial eligibility for Medi-Cal is determined based on the application of MAGI. This bill would require the department to disregard specified assets and resources, such as motor vehicles and life insurance policies, in determining the Medi-Cal eligibility for an applicant or beneficiary whose eligibility is not determined using MAGI, subject to federal approval and federal financial participation.			2/28/2019 - Referred to Com. on HEALTH. 4/2/2019 1:30 p.m. - State Capitol, Room 4202 ASSEMBLY HEALTH SPECIAL ORDER, WOOD, Chair	
AB 715 Arambula D	Medi-Cal: program for aged and disabled persons. Current law requires the State Department of Health Care Services to exercise its option under federal law to implement a program for aged and disabled persons. Current law requires an individual under these provisions to satisfy certain financial eligibility requirements. Current law requires the department to implement this program by means of all-county letters or similar instructions without taking regulatory action and thereafter requires the department to adopt regulations. This bill would instead require, upon receipt of federal approval, all countable income over 100% of the federal poverty level, up to 138% of the federal poverty level, to be disregarded, after taking all other disregards, deductions, and exclusions into account for those persons eligible under the program for aged and disabled persons.	Recommend Support		2/28/2019 - Referred to Com. on HEALTH. 4/2/2019 1:30 p.m. - State Capitol, Room 4202 ASSEMBLY HEALTH SPECIAL ORDER, WOOD, Chair	
AB 788 Maves R	Health care coverage. Current law states the intent of the Legislature to create a process by which the options for achieving universal health care coverage can be thoroughly examined. Current law requires the Secretary of California Health and Human Services to report to the Legislature on the options for achieving health care coverage, including specified information. This bill would delete the December 1, 2001, report due date and would repeal the reporting requirement on January 1, 2023.			2/28/2019 - Referred to Com. on HEALTH.	

<p>AB 797 Grayson D</p>	<p>Mandated reporters: financial abuse of elder or dependent adults. Would expand the category of mandated reporters of suspected financial abuse to include the officers and employees of a business licensed under the Money Transmission Act.</p>			<p>2/28/2019 - Referred to Coms. on AGING & L.T.C. and JUD. 4/2/2019 3 p.m. - State Capitol, Room 127 ASSEMBLY AGING AND LONG TERM CARE, NAZARIA N, Chair</p>	
<p>AB 848 Gray D</p>	<p>Medi-Cal: covered benefits: continuous glucose monitors. Would, to the extent that federal financial participation is available and any necessary federal approvals have been obtained, add continuous glucose monitors and related supplies required for use with those monitors to the schedule of benefits under the Medi-Cal program for the treatment of diabetes mellitus when medically necessary, subject to utilization controls. The bill would also authorize the department to require the manufacturer of a continuous glucose monitor to enter into a rebate agreement with the department.</p>			<p>3/4/2019 - Referred to Com. on HEALTH. 3/26/2019 1:30 p.m. - State Capitol, Room 4202 ASSEMBLY HEALTH, WOO D, Chair</p>	
<p>AB 856 Brough R</p>	<p>Personal income tax: credit: home care services. The Personal Income Tax Law allows various credits against the taxes imposed by that law. This bill would allow a credit against those taxes for each taxable year beginning on or after January 1, 2020, and before January 1, 2024, in an amount equal to 25% of the amount paid or incurred during the taxable year, not compensated for by insurance or otherwise, by a qualified taxpayer, as defined, for home care services, not to exceed \$5,000.</p>			<p>3/4/2019 - Referred to Com. on REV. & TAX. 3/25/2019 2:30 p.m. - State Capitol, Room 126 ASSEMBLY REVENUE AND TAXATION, BUR KE, Chair</p>	
<p>AB 871 Gray D</p>	<p>Graduate medical education: funding. The California Healthcare, Research and Prevention Tobacco Tax Act of 2016 allocates a specified amount of revenues to provide funding to, among other entities and purposes, the University of California in the amount of \$40,000,000 annually for the purpose and goal of increasing the number of primary care and emergency physicians trained in California, as specified. The act authorizes the Legislature to amend the provision relating to the allocation of these revenues to further the</p>			<p>2/21/2019 - From printer. May be heard in committee March 23.</p>	

	<p>purposes of the act with a 2/3 vote of the membership of each house of the Legislature. This bill would instead provide that funding to the University of California to be administered by a California nonprofit public benefit corporation for that purpose and goal.</p>				
<p>AB 899 Wood D</p>	<p>Clinic licensing. Would authorize a licensed primary care clinic with a license in good standing with the State Department of Public Health for the preceding 5 years to acquire ownership or control of an outpatient setting or a previously licensed primary care clinic. The bill would require a facility acquired by a licensed primary care clinic pursuant to this provision to be deemed compliant with the minimum standards of adequacy and safety required for the acquiring primary care clinic. The bill would require the acquired facility to be added to the existing license of the acquiring primary care clinic immediately following notice to the department by the acquiring primary care clinic.</p>	<p>Recommend Support</p>		<p>3/13/2019 - Referred to Com. on HEALTH. 3/26/2019 1:30 p.m. - State Capitol, Room 4202 ASSEMBLY HEALTH, WOOD, Chair</p>	
<p>AB 970 Salas D</p>	<p>California Department of Aging: grants: transportation. Would require the California Department of Aging to administer a grant program to receive applications from area agencies on aging to fund transportation to and from nonemergency medical services for older individuals with disabilities who reside in rural, desert, or mountain areas within a planning and service area, for the purpose of reducing greenhouse gas emissions. The bill would require that transportation be made available using the purchase, lease, or maintenance of zero-emission or near-zero-emission vehicles with a capacity for 7, 12, or 15 passengers.</p>	<p>Input Needed</p>		<p>3/4/2019 - Referred to Coms. on AGING & L.T.C. and TRANS. 4/2/2019 3 p.m. - State Capitol, Room 127 ASSEMBLY AGING AND LONG TERM CARE, NAZARIAN, Chair</p>	
<p>AB 990 Gallagher R</p>	<p>Medi-Cal: Medi-Cal managed care plans: financial incentives. Would express the intent of the Legislature to enact legislation that would require Medi-Cal managed care plans to offer financial incentives to enrollees for their improved wellness activities, as specified.</p>			<p>2/22/2019 - From printer. May be heard in committee March 24.</p>	
<p>AB 1042 Wood D</p>	<p>Medi-Cal: beneficiary maintenance needs: home upkeep allowances: transitional needs funds. Would establish eligibility and other requirements for providing the home upkeep allowance or a transitional needs fund to Medi-Cal patients residing in a long-term care facility, as specified. The bill would prescribe</p>	<p>Recommend Support</p>		<p>3/7/2019 - Referred to Com. on HEALTH. 4/2/2019 1:30 p.m. - State Capitol,</p>	

	both general and specific requirements for both facility residents who intend to leave the facility and return to an existing home, who would receive the home upkeep allowance, and for residents who do not have a home but intend to leave the facility and establish a new home, who could establish a transitional needs fund for the purpose of meeting the transitional costs of establishing a home.			Room 4202 ASSEMBLY HEALTH SPECIAL ORDER, WOOD, Chair	
AB 1128 Petrie- Norris D	Program of All-Inclusive Care for the Elderly. Would require a PACE center to maintain a license both as a primary care clinic and an adult day health center, and to either maintain a license as a home health agency or contract with a licensed home health agency for the provision of home health services. The bill would require the State Department of Health Care Services, as the single state agency overseeing the PACE program, to license and regulate any primary care clinic, adult day health center, and home health agency that is related to a PACE center, thereby transferring these duties from the State Department of Public Health to the State Department of Health Care Services, and would authorize the State Department of Health Care Services to exempt certain PACE centers from these provisions.	Sponsor		3/7/2019 - Referred to Coms. on AGING & L.T.C. and HEALTH. 4/2/2019 3 p.m. - State Capitol, Room 127 ASSEMBLY AGING AND LONG TERM CARE, NAZARIA N, Chair	
AB 1136 Nazarian D	California Department of Community Living: establishment. Would state the intent of the Legislature to enact legislation to establish the California Department of Community Living, within the California Health and Human Services Agency, from a reorganization of the existing California Department of Aging. The bill would further state the intent of the Legislature to enact legislation to require the California Department of Community Living to realize California's commitment to person-centered, coordinated service delivery for older adults, people with disabilities, and their caregivers and provide leadership and policy development.			2/22/2019 - From printer. May be heard in committee March 24.	
AB 1137 Nazarian D	The California Department of Aging. The Mello-Granlund Older Californians Act establishes the California Department of Aging in the California Health and Human Services Agency, and sets forth its mission to provide leadership to the area agencies on aging in developing systems of home- and community-based services that maintain individuals in their own homes or least restrictive homelike environments. Current law requires the department to develop minimum standards for service delivery, and requires those standards to ensure that a system meets specified requirements, including that it has cost containment and fiscal incentives consistent with the delivery of			3/7/2019 - Referred to Com. on AGING & L.T.C.	

	appropriate services at the appropriate level. This bill would delete that cost containment and fiscal incentives requirement				
AB 1249 Maienschein D	Health care service plans: regulations: exemptions. This bill would require the Director of the Department of Managed Health Care to exempt from the requirements of the act, for a period of at least 5 years, a contract to provide health care services between a voluntary employees' beneficiary association, as defined, and a provider that utilizes risk-based or global risk payment, if the contract meets certain conditions, including that the purpose of the contract is to demonstrate cost savings compared to a fee-for-service reimbursement model.			3/11/2019 - Referred to Com. on HEALTH.	
AB 1287 Nazarian D	Universal assessments: No Wrong Door system. This bill would state the intent of the Legislature to enact legislation to establish the Master Plan for an Aging California that responds to population needs in a comprehensive manner. The bill would further state the intent of the Legislature to enact legislation to develop a plan and strategy for a phased statewide implementation of the No Wrong Door system assisting older adults and people with disabilities obtain accurate information and timely referrals to appropriate community services and supports. The bill would make legislative findings and declarations in support of its intent.			2/22/2019 - From printer. May be heard in committee March 24.	
AB 1296 Gonzalez D	Tax Recovery in the Underground Economy Criminal Enforcement Program. Would establish the Tax Recovery in the Underground Economy Criminal Enforcement Program in the Department of Justice to combat underground economic activities through a multiagency collaboration to, among other things, pool resources, collaborate and share data, prosecute violations, and recover state revenue lost to the underground economy, as specified. The bill would require Tax Recovery in the Underground Economy Criminal Enforcement Program teams to be located in Sacramento, Los Angeles, San Diego, the San Francisco Bay area, and Fresno.			3/11/2019 - Referred to Coms. on PUB. S. and REV. & TAX.	
AB 1382 Aguiar-Curry D	Master Plan for an Aging California. Would state the intent of the Legislature to enact legislation to establish a Master Plan for an Aging California that responds to population needs in a comprehensive manner, including, but not limited to, strategies to address the needs of family caregivers and implement the recommendations offered by the California Task Force on Family			2/25/2019 - Read first time.	

	Caregiving.				
AB 1434 Kalra D	<p>Public social services: SSI/SSP. Current law provides for the State Supplementary Program for the Aged, Blind and Disabled (SSP), which requires the State Department of Social Services to contract with the United States Secretary of Health and Human Services to make payments to SSP recipients to supplement Supplemental Security Income (SSI) payments made available pursuant to the federal Social Security Act. This bill would reinstate the cost-of-living adjustment beginning January 1 of the 2020 calendar year. The bill would also require a maximum aid payment provided to an individual or a married couple that does not equal or exceed 100% of the 2019 federal poverty level to be increased to an amount that equals 100% of the federal poverty level.</p>			3/14/2019 - Referred to Com. on HUM. S.	
AB 1723 Wood D	<p>Medi-Cal: Whole Person Care pilot program. Current law requires the State Department of Health Care Services to establish and operate the Whole Person Care pilot program, a component of the Medi-Cal 2020 demonstration project, under which counties, Medi-Cal managed care plans, and community providers that elect to participate in the pilot program are provided an opportunity to establish a new model for integrated care delivery that incorporates healthcare needs, behavioral needs, and social support, including housing and other supportive services, for the state's most high-risk, high-utilizing populations. This bill would make technical, non-substantive changes to that provision.</p>			2/25/2019 - Read first time.	
SB 29 Durazo D	<p>Medi-Cal: eligibility. The federal Medicaid program provisions prohibit payment to a state for medical assistance furnished to an alien who is not lawfully admitted for permanent residence or otherwise permanently residing in the United States under color of law. Current law requires individuals under 19 years of age enrolled in restricted-scope Medi-Cal at the time the Director of Health Care Services makes a determination that systems have been programmed for implementation of these provisions to be enrolled in the full scope of Medi-Cal benefits, if otherwise eligible, pursuant to an eligibility and enrollment plan, which includes outreach strategies. This bill would extend eligibility for full-scope Medi-Cal benefits to individuals of all ages who are otherwise eligible for those benefits but for their immigration status, and would delete provisions delaying implementation until the director makes the determination as specified.</p>	Recommend Support		3/11/2019 - From committee with author's amendments. Read second time and amended. Re-referred to Com. on HEALTH. 3/20/2019 1:30 p.m. - John L. Burton Hearing Room (4203) SENATE HEALTH, PAN, Chair	

<p>SB 66 Atkins D</p>	<p>Medi-Cal: federally qualified health center and rural health clinic services. Current law provides that federally qualified health center (FQHC) services and rural health clinic (RHC) services, as defined, are covered benefits under the Medi-Cal program, to be reimbursed, to the extent that federal financial participation is obtained, to providers on a per-visit basis. "Visit" is defined as a face-to-face encounter between a patient of an FQHC or RHC and specified health care professionals, including a physician. Under current law, "physician," for these purposes, includes, but is not limited to, a physician and surgeon, an osteopath, and a podiatrist. This bill would authorize reimbursement for a maximum of 2 visits taking place on the same day at a single location if after the first visit the patient suffers illness or injury requiring additional diagnosis or treatment, or if the patient has a medical visit and a mental health visit or a dental visit, as defined.</p>			<p>2/21/2019 - Set for hearing March 20. 3/20/2019 1:30 p.m. - John L. Burton Hearing Room (4203) SENATE HEALTH, PAN, Chair</p>	
<p>SB 214 Dodd D</p>	<p>Medi-Cal: California Community Transitions program. Would require the State Department of Health Care Services to implement and administer the California Community Transitions program, as authorized under federal law and pursuant to the terms of the Money Follows the Person Rebalancing Demonstration. The bill would require the department to seek federal matching funds, and if federal matching funds are unavailable, the bill would require the department to fund the program. The bill would require the department to seek partnerships with counties and other local jurisdictions as a means to securing enhanced and complementary funding, as specified.</p>			<p>2/13/2019 - Referred to Com. on HEALTH.</p>	
<p>SB 228 Jackson D</p>	<p>Master Plan on Aging. Would require the Governor to appoint an Aging Czar and a 15-member Aging Task Force to work with representatives from impacted state departments and with stakeholders to identify the policies and priorities that need to be implemented in California to prepare for the aging of its population and to develop a master plan for aging. The bill would require the master plan to address how the state should accomplish specified goals, including expanding access to coordinated, integrated systems of care. The bill would also require the Aging Task Force to solicit input from stakeholders and gather information on the impact of California's aging population.</p>	<p>Recommend Support</p>		<p>2/21/2019 - Referred to Com. on HUMAN S.</p>	
<p>SB 280 Jackson D</p>	<p>Older adults and persons with disabilities: fall prevention. The Mello-Granlund Older Californians Act establishes the California Department of Aging, and sets forth its duties and powers, including,</p>			<p>3/5/2019 - Set for hearing March 25. 3/25/2019 3 p.m. -</p>	

	among other things, entering into a contract for the development of information and materials to educate Californians on the concept of “aging in place” and the benefits of home modification. Current law also establishes the Senior Housing Information and Support Center within the department for the purpose of providing information and training relating to available innovative resources and senior services, and housing options and home modification alternatives designed to support independent living or living with family. This bill would repeal those provisions relating to the department’s provision of information on housing and home modifications for seniors.			Room 2040 SENATE HUMAN SERVICES, HURTADO, Chair	
SB 309 Rubio D	Personal income tax: California Senior Citizen Advocacy Voluntary Tax Contribution Fund. Would require the California Senior Citizen Advocacy Voluntary Tax Contribution Fund to indefinitely remain on the personal income tax form. By depositing additional moneys into a continuously appropriated fund, the bill would make an appropriation.			2/28/2019 - Referred to Com. on GOV. & F.	
SB 361 Mitchell D	Medi-Cal: Health Home Program. Current law authorizes the State Department of Health Care Services to create the Health Home Program for enrollees with chronic conditions, as authorized under federal law. Current law prohibits the implementation of the program using additional General Fund moneys to fund the administration and costs of services, unless the department projects, as specified, that no net increase in ongoing General Fund costs for the Medi-Cal program would result. Existing law requires the nonfederal share for the program to be provided by funds from local governments, private foundations, or any other source permitted under state and federal law. This bill would remove the prohibition on the use of General Fund moneys for the implementation of the program.	Input Needed		2/28/2019 - Referred to Com. on HEALTH. 4/3/2019 1:30 p.m. - John L. Burton Hearing Room (4203) SENATE HEALTH, PAN, Chair	
SB 453 Hurtado D	Older adults. This bill would delete the contingent operation of these provisions and instead make only the operation of the ADRC program contingent upon an appropriation of funds for that purpose. The bill would also declare the intent of the Legislature in enacting those provisions is to establish a No Wrong Door System in California to serve seniors and individuals with disabilities. The bill would additionally require the ADRC program to collect and report certain data to the California Department of Aging.			3/7/2019 - Referred to Com. on HUMAN S.	
SB 492 Galgiani D	Elder or dependent adult abuse. Would, when the alleged victim of elder or dependent adult abuse has a			3/12/2019 - Set for hearing April 2.	

	<p>personal representative, as defined, who is the alleged abuser, require the adult protective services agency or long-term care ombudsman to proceed with an investigation as if the alleged victim has provided consent. The bill would require an investigation to be reported to the local law enforcement agency that has a primary investigative role. By increasing the investigative and reporting duties of local governments, this bill would create a state-mandated local program.</p>			<p>4/2/2019 8:30 a.m. - John L. Burton Hearing Room (4203) SENATE PUBLIC SAFETY, SKINNER, Chair</p>	
<p>SB 512 Pan D</p>	<p>Long-term services and supports. Would establish the California Long-Term Services and Supports Benefits Board (LTSS Board), to be composed of 9 specified members, including, among others, the Treasurer as chair, the Secretary of the California Health and Human Services Agency as vice chair, and 3 members to be appointed by the Governor. The bill would require the LTSS Board to manage and invest revenue deposited in the California Long-Term Services and Supports Benefits Trust Fund (LTSS Trust), which the bill would create in the State treasury, to, upon appropriation, finance long-term services and supports for eligible individuals.</p>	<p>Recommend Support</p>		<p>3/7/2019 - Referred to Coms. on HUMAN S. and G.O.</p>	
<p>SB 611 Caballero D</p>	<p>Housing: elderly and individuals with disabilities. Would state the intent of the Legislature to enact legislation to establish a master plan that responds to population needs in a comprehensive manner which shall include, but not be limited to, policy recommendations that address the housing needs of California's older adults, and people with disabilities.</p>			<p>3/14/2019 - Referred to Com. on RLS.</p>	
<p>SB 623 Jackson D</p>	<p>Housing: surplus land. Current law requires an entity proposing to use surplus land for developing low- and moderate-income housing to agree to make available not less than 25% of the total number of units developed on the parcels at affordable housing cost or affordable rent to lower income households. Current law requires these and other specified requirements to be contained in a covenant or restriction recorded against the surplus land at the time of sale, to run with the land, and be enforceable, against any owner who violates the covenant or restriction and each successor in interest who continues the violation, by various specified parties. This bill would make non-substantive changes to that provision.</p>			<p>3/14/2019 - Referred to Com. on RLS.</p>	
<p>SB 712 Grove R</p>	<p>Housing for the elderly. Current law prohibits a city, county, city and county, or other political subdivision from requiring more than one building permit for a low-rent housing development for the elderly financed with federal or state funds</p>			<p>3/14/2019 - Referred to Com. on RLS.</p>	

	or by a loan insured by the federal or state government and limits the fee for the permit, as specified. This bill would make a non-substantive change to that provision.				
SB 725 Rubio D	Veterans rental housing. Current law creates the Veterans Housing and Homeless Prevention Act of 2014, to provide for the acquisition, construction, rehabilitation, and preservation of affordable multifamily supportive housing, affordable transitional housing, affordable rental housing, or related facilities for veterans and their families to allow veterans to access and maintain housing stability. This bill would require the department to establish a rental housing assistance program to provide financial assistance to veterans seeking rental housing, based on the needs of the veterans.			3/14/2019 - Referred to Com. on V.A.	

Total Measures: 52

Total Tracking Forms: 52

