

# LEGISLATIVE UPDATE



Week of February 12, 2024

## State Issues

New Bill  
Introduction  
Deadline

Today is the deadline for bills to be introduced for the 2024 session. It will take several days for all to be posted, but following are a few bills of interest to date:

**AB 2180 (Weber)** would require a health plan to apply amounts paid through various savings programs to the patient's cost-sharing requirement under the health plan.

**AB 2200 (Kalra): Guaranteed Health Care for All.** Creates a single payer health care system for California and propose similar structure as in year's past: all health care to all residents would be provided through Cal Care; California health care providers would only be able to provide care within the Cal Care system; the system will be governed by a board comprised of Gubernatorial and Legislative appointees, and all current federal funding for health care services (i.e. Medicaid, Medicare, CHIP, etc.) would be block granted to the state for CalCare services.

**AB 2297 (Friedman)** allows emergency department physicians to set eligibility criteria for hospital discount payment programs and sets new rules for hospital collection practices.

**AB 2339 (Aguiar Curry)** would update the state's telehealth statutes related to asynchronous care.

**AB 2348 (Rodriguez)** sets reporting requirements for Local Emergency Service Areas on response times.

**AB 2352 (Irwin)** states that it is the intent of the Legislature to set parameters for psychiatric advance directives.

**AB 2319 (Wilson, Weber)** would expand on previous legislation that mandates hospitals provide implicit bias training in an attempt to address California's maternal mortality rates.

**AB 2490 (Petrie Norris)** provides for the legislative intent to promote access to emergency reproductive health care.

**SB 895 (Roth)** allows California's Community Colleges to offer bachelor's degrees in nursing to help address the health care worker shortages.

**SB 963 (Ashby)** would require all general acute care hospitals to make a self-identifying human trafficking system for their emergency departments.

*(more)*

<p>New Bill Introduction Deadline (continued)</p>	<p><b>SB 1116 (Portantino)</b> would allow for unemployment benefits for striking workers.</p> <p><b>SB 1119 (Newman)</b> would add certain Providence hospitals to current law that allows the Department of Health Care Access and Information to adjust timelines and reporting requirements for compliance with seismic regulations.</p> <p><b>SB 1269 (Padilla)</b> would set a definition for the hospital safety net.</p>
<p>New Assembly Select Committees Announced</p>	<p>Assembly Speaker Robert Rivas announced a few new select Committees and their memberships on Wednesday. These types of Committees usually focus on specific, timely and critical subject matter – see below. The Speaker is highlighting climate issues, recovery of downtowns, permitting reform and ... happiness! The new Speaker has appointed the Speaker Emeritus Anthony Rendon to the newly created “Happiness and Policy Outcomes Select Committee.” There is a presumption that it will focus on the former Speaker’s legacy accomplishments.</p> <ul style="list-style-type: none"> <li>▪ Select Committee on Building a Zero-Carbon Hydrogen Economy (Bennett, Chair)</li> <li>▪ Select Committee on Downtown Recovery (Haney, Chair)</li> <li>▪ Select Committee on Happiness and Public Policy Outcomes (Rendon, Chair)</li> <li>▪ Select Committee on Permitting Reform (Wicks, Chair)</li> </ul>
<p>Health Plan Hype</p>	<p>This week, California’s health plans released their annual infographic that outlines how their research states health plan spending is allocated – the document can be found <a href="#">here</a>. According to the California Association of Health Plans, “The vast majority of health plan spending in California goes to pay for medical services for hospital and doctor visits, prescription drugs, lab tests, x-rays, and medical supplies. In 2022, health plans spent over \$204 billion, or 94 cents out of every health plan dollar, on medical care.”</p> <p>On a related front, the California Hospital Association (CHA) is working to hold insurers accountable for meeting their basic responsibilities to patients and advocating for increased oversight and accountability for insurance companies. According to CHA, health insurance companies have enormous power in California – 94% of the commercial health insurance market is controlled by just six companies. They are increasingly denying enrollees access to care, and even refusing to pay for care that’s already been delivered, all while enjoying record profits. According to the federal government, some insurance companies are denying more than a quarter of Medicaid managed care requests.</p>

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