

MCHAP – Bills of Interest

January 21, 2021

These are bills that may be of interest to MCHAP members. Inclusion on this list does not indicate support or endorsement by MCHAP or any other entity or organization.

[AB 4](#)

[Arambula D](#)

Medi-Cal: eligibility.

Location: 1/11/2021-A. HEALTH

Summary: Would, effective January 1, 2022, extend eligibility for full scope Medi-Cal benefits to anyone regardless of age, and who is otherwise eligible for those benefits but for their immigration status, pursuant to an eligibility and enrollment plan. The bill would delete the specified provisions regarding individuals who are under 25 years of age or 65 years of age or older and delaying implementation until the director makes the determination described above. The bill would require the eligibility and enrollment plan to ensure that an individual maintains continuity of care with respect to their primary care provider, as prescribed, would provide that an individual is not limited in their ability to select a different health care provider or Medi-Cal managed care health plan, and would require the department to provide monthly updates to the appropriate policy and fiscal committees of the Legislature on the status of the implementation of these provisions

[AB 32](#)

[Aguiar-Curry D](#)

Telehealth.

Location: 1/11/2021-A. HEALTH

Summary: Current law requires a health care service plan contract or health insurance policy issued, amended, or renewed on or after January 1, 2021, to specify that coverage is provided for health care services appropriately delivered through telehealth on the same basis and to the same extent as in-person diagnosis, consultation, or treatment. Current law exempts Medi-Cal managed care plans that contract with the State Department of Health Care Services under the Medi-Cal

program from these provisions, and generally exempts county organized health systems that provide services under the Medi-Cal program from Knox-Keene. This bill would delete the above-described references to contracts issued, amended, or renewed on or after January 1, 2021, would require these provisions to apply to the plan or insurer's contracted entity, as specified, and would delete the exemption for Medi-Cal managed care plans. The bill would subject county organized health systems, and their subcontractors, that provide services under the Medi-Cal program to the above-described Knox-Keene requirements relative to telehealth. The bill would authorize a provider to enroll or recertify an individual in Medi-Cal programs through telehealth and other forms of virtual communication, as specified.

AB 46

Rivas, Luz D

California Youth Empowerment Act.

Location: 1/11/2021-A. A. & A.R.

Summary: Would create the California Youth Empowerment Act to address, among other issues, the growing need to engage youth directly with policymakers. The bill would establish the California Youth Empowerment Commission in state government consisting of 25 voting commissioners between 14 and 25 years of age and meeting specified requirements, with 21 members appointed by the Governor, 2 at-large members appointed by the Senate Committee on Rules, and 2 at-large members appointed by the Speaker of the Assembly, along with several ex officio, nonvoting members from various geographic regions of the state. The bill would establish the commission to be advisory in nature, for the main purpose of providing meaningful opportunities for civic engagement to improve the quality of life for California's disconnected and disadvantaged youth.

AB 58

Salas D

Pupil health: suicide prevention policies and training: school-based health programs: pilot program.

Location: 1/11/2021-A. ED.

Summary: Would require a local educational agency, on or before June 1, 2022, to review and update its policy on pupil

suicide prevention, and revise its training materials, to incorporate best practices identified by the department in the department's model policy. The bill would require a local educational agency, commencing with the 2022–23 school year, to provide suicide awareness and prevention training, at the beginning of each school year, to teachers of pupils in all of the grades served by the local educational agency. By imposing additional duties on local educational agencies, the bill would impose a state-mandated local program.

AB 77

Petrie-Norris D

Substance use disorder treatment services.

Location: 12/7/2020-A. PRINT

Summary: Current law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, 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. Current law provides for various benefits under the Medi-Cal program, including substance use disorder treatment and mental health services that are delivered through the Drug Medi-Cal Treatment Program, the Drug Medi-Cal organized delivery system, and the Medi-Cal Specialty Mental Health Services Program. This bill would declare the intent of the Legislature to enact Jarrod's Law, a licensure program for inpatient and outpatient programs providing substance use disorder treatment services, under the administration of the department.

AB 126

Garcia, Eduardo D

Special education programs: Family Empowerment Centers on Disability.

Location: 1/11/2021-A. ED.

Summary: Current law requires the State Department of Education to award grants for the establishment of Family Empowerment Centers on Disability in 32 regions in the state to provide training and services to children and young adults with disabilities and their families. Current law establishes a minimum base rate of \$150,000 for each center awarded a grant and requires a center that receives a grant to complete

specified actions related to providing that training and those services. Current law establishes a Family Empowerment and Disability Council composed of the executive directors of the centers and certain other members, establishes a base amount of \$150,000 to be made available annually to the council, and requires the council to, among other actions, develop a uniform tracking and data collection system to be used by each center. This bill would revise and recast the provisions related to Family Empowerment Centers on Disability, including requiring the department to give priority to grant applicants in those of the 32 regions in the state that do not have a center, increasing the minimum base rate for each center awarded a grant from \$150,000 to \$237,000 commencing with the start of the fiscal year after a center has been established in each of the 32 regions, and, commencing with the 2024–25 fiscal year, providing for an annual cost-of-living adjustment of the grant amount, as specified.

SB 14

Portantino D

Pupil health: school employee and pupil training: excused absences: youth mental and behavioral health.

Location: 12/7/2020-S. RLS.

Summary: Current law, notwithstanding the requirement that each person between 6 and 18 years of age who is not otherwise exempted is subject to compulsory full-time education, requires a pupil to be excused from school for specified types of absences, including, among others, if the absence was due to the pupil's illness. This bill would include as another type of required excused absence an absence that is for the benefit of the mental or behavioral health of the pupil. To the extent this bill would impose additional duties on local educational entities, the bill would impose a state-mandated local program.

SB 17

Pan D

Public health crisis: racism.

Location: 12/7/2020-S. RLS.

Summary: Current law requires the Office of Health Equity to develop department-wide plans to close the gaps in health status and access to care among the state's diverse racial and

ethnic communities, women, persons with disabilities, and the lesbian, gay, bisexual, transgender, queer, and questioning communities, as specified. Current law requires the office to work with the Health in All Policies Task Force to assist state agencies and departments in developing policies, systems, programs, and environmental change strategies that have population health impacts by, among other things, prioritizing building cross-sectoral partnerships within and across departments and agencies to change policies and practices to advance health equity. This bill would state the intent of the Legislature to enact legislation to require the department, in collaboration with the Health in All Policies Program, the Office of Health Equity, and other relevant departments, agencies, and stakeholders, to address racism as a public health crisis.