



BLANNING & BAKER

Associates, Inc.

**CSR Legislative Report
6/17/2022**

Support

AB 1130

(Wood D) California Health Care Quality and Affordability Act.

Current Text: Amended: 2/14/2022 [html](#) [pdf](#)

Introduced: 2/18/2021

Last Amend: 2/14/2022

Status: 2/14/2022-From committee chair, with author's amendments: Amend, and re-refer to committee. Read second time, amended, and re-referred to Com. on HEALTH.

Location: 2/14/2022-S. HEALTH

Summary: Existing law generally requires the State Department of Public Health to license, inspect, and regulate health facilities, including hospitals. Existing law requires health facilities to meet specified cost and disclosure requirements, including maintaining an understandable written policy regarding discount payments and charity. This bill would establish, within HCAI, the Office of Health Care Affordability to analyze the health care market for cost trends and drivers of spending, develop data-informed policies for lowering health care costs for consumers and purchasers, set and enforce cost targets, and create a state strategy for controlling the cost of health care and ensuring affordability for consumers and purchasers. The bill would also establish the Health Care Affordability Board, composed of 8 members, appointed as prescribed. This bill contains other related provisions and other existing laws.

Memo:

Support letter sent to Author -- 2/15/22

Support letter sent to Sen. Health -- 2/15/22

AB 1855

(Nazarian D) Long-Term Care Ombudsman Program: facility access.

Current Text: Amended: 6/15/2022 [html](#) [pdf](#)

Introduced: 2/8/2022

Last Amend: 6/15/2022

Status: 6/15/2022-From committee chair, with author's amendments: Amend, and re-refer to committee. Read second time, amended, and re-referred to Com. on HEALTH.

Location: 6/14/2022-S. HEALTH

Calendar: 6/29/2022 1:30 p.m. - 1021 O Street, Room 1200 SENATE HEALTH, PAN, Chair

Summary: Existing law, as part of the Mello-Granlund Older Californians Act, establishes the Office of the State Long-Term Care Ombudsman, under the direction of the State Long-Term Care Ombudsman, in the California Department of Aging. Existing law provides for the Long-Term Care Ombudsman Program under which funds are allocated to local ombudsman programs to assist elderly persons in long-term health care facilities and residential care facilities by, among other things, investigating and seeking to resolve complaints against these facilities, and providing services to assist residents in the protection of their health, safety, welfare, and rights. Under existing law, if an individual is a patient in a skilled nursing facility when a written advance health care directive is executed, the advance health care directive is not effective unless a patient advocate or ombudsman signs the advance directive as a witness, as specified. This bill, notwithstanding any other law, would prohibit a skilled nursing facility or residential care facility from denying entry to a representative of the office acting in their official capacity, except when the Governor has declared a state of emergency related to a contagious, infectious, or communicable disease, and any of specified circumstances applies at the time the representative requests entry, including, but not limited to, the representative tests positive for the disease that is the reason for the emergency declaration during screening by the skilled nursing facility or residential care facility. The bill would authorize a facility, during the state of emergency, to require a representative of the office entering the facility to adhere to infection control protocols for the duration of their visit that are no more stringent than those required for facility staff. The bill would make related findings and declarations.

Memo:

Support letter sent to Author -- 5/27/22

Support letter sent to Sen. HumServ -- 6/10/22

Support letter sent to Sen. Health -- 6/17/22

[SCR 112](#)

(Dodd D) Elder and Dependent Adult Abuse Awareness Month.

Current Text: Introduced: 5/27/2022 [html](#) [pdf](#)

Introduced: 5/27/2022

Status: 6/16/2022-Referred to Com. on RLS.

Location: 6/16/2022-A. RLS.

Summary: This measure would proclaim and acknowledge the month of June 2022 as Elder and Dependent Adult Abuse Awareness Month in California and would reiterate the importance of annually recognizing Elder and Dependent Adult Abuse Awareness Month in the state.

Memo:

Support letter sent to Author -- 6/17/22

Support letter sent to Asm. Rules -- 6/17/22

[SJR 11](#)

(Skinner D) The Social Security 2100 Act: A Sacred Trust.

Current Text: Introduced: 2/18/2022 [html](#) [pdf](#)

Introduced: 2/18/2022

Status: 4/21/2022-Referred to Com. on P.E. & R.

Location: 4/21/2022-A. P.E. & R.

Calendar: 6/22/2022 9 a.m. - State Capitol, Room 444 ASSEMBLY PUBLIC EMPLOYMENT AND RETIREMENT, COOPER, Chair

Summary: This measure would affirm the Legislature’s support for expanding Social Security and requests California Representatives in Congress to support expanding Social Security by voting in favor of the Social Security 2100 Act: A Sacred Trust.

Memo:

Support letter sent to Author -- 3/14/22

Support letter sent to Sen. LPE&R -- 3/15/22

Support letter sent to Asm. PE&R -- 6/17/22

Oppose

[AB 386](#)

(Cooper D) Public Employees’ Retirement Fund: investments: confidentiality.

Current Text: Amended: 6/29/2021 [html](#) [pdf](#)

Introduced: 2/2/2021

Last Amend: 6/29/2021

Status: 7/14/2021-Failed Deadline pursuant to Rule 61(a)(11). (Last location was JUD. on 6/9/2021) (May be acted upon Jan 2022)

Location: 7/14/2021-S. 2 YEAR

Summary: Existing law, the California Public Records Act, requires state and local agencies to make their records available for public inspection, unless an exemption from disclosure applies. Existing law excludes from the disclosure requirement certain records regarding alternative investments in which public investment funds invest. This bill would exempt from disclosure under the act specified records regarding an internally managed private loan made directly by the Public Employees’ Retirement Fund. Under the bill, these records would include quarterly and annual financial statements of the borrower or its constituent owners, unless the information has already been publicly released by the keeper of the information. The bill would prescribe specified exceptions to this exemption from disclosure. This bill contains other related provisions and other existing laws.

Memo:

Oppose letter sent to Author -- 5/6/21

Oppose letter sent to Asm. Floor -- 5/13/21

Oppose letter sent to Sen. LPE&R -- 6/11/21

Oppose letter sent to Sen. JUD -- 7/9/21

Watch

[AB 97](#)

(Nazarian D) Health care coverage: insulin affordability.

Current Text: Amended: 8/17/2021 [html](#) [pdf](#)

Introduced: 12/8/2020

Last Amend: 8/17/2021

Status: 8/27/2021-Failed Deadline pursuant to Rule 61(a)(12). (Last location was APPR. on 8/17/2021) (May be acted upon Jan 2022)

Location: 8/27/2021-S. 2 YEAR

Summary: Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care and makes a willful violation of the act's requirements a crime. Existing law provides for the regulation of health insurers by the Department of Insurance. Existing law requires a health care service plan contract or disability insurance policy issued, amended, delivered, or renewed on or after January 1, 2000, that covers prescription benefits to include coverage for insulin, if it is determined to be medically necessary. This bill would prohibit a health care service plan contract or a health disability insurance policy, as specified, issued, amended, delivered, or renewed on or after January 1, 2022, from imposing a deductible on an insulin prescription drug, except as specified for a high deductible health plan, as defined. Because a willful violation of these provisions by a health care service plan would be a crime, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

[AB 154](#)

(Ting D) Budget Act of 2022.

Current Text: Amended: 6/8/2022 [html](#) [pdf](#)

Introduced: 1/8/2021

Last Amend: 6/8/2022

Status: 6/13/2022-Read second time. Ordered to third reading.

Location: 6/13/2022-S. THIRD READING

Calendar: 6/20/2022 #53 SENATE ASSEMBLY BILLS - THIRD READING FILE

Summary: This bill would make appropriations for the support of state government for the 2022-23 fiscal year. This bill would declare that it is to take effect immediately as a Budget Bill.

[AB 383](#)

(Salas D) Behavioral health: older adults.

Current Text: Amended: 6/21/2021 [html](#) [pdf](#)

Introduced: 2/2/2021

Last Amend: 6/21/2021

Status: 8/27/2021-Failed Deadline pursuant to Rule 61(a)(12). (Last location was APPR. SUSPENSE FILE on 8/16/2021)(May be acted upon Jan 2022)

Location: 8/27/2021-S. 2 YEAR

Summary: Existing law, the Mental Health Services Act (MHSA), an initiative measure enacted by the voters as Proposition 63 at the November 2, 2004, statewide general election, establishes the continuously appropriated Mental Health Services Fund to fund various county mental health programs, including the Adult and Older Adult Mental Health System of Care Act. Existing law authorizes the MHSA to be amended by a 2/3 vote of the Legislature if the amendments are consistent with, and further the purposes of, the MHSA, and also permits the Legislature to clarify procedures and terms of the MHSA by a majority vote. This bill would establish within the State Department of Health Care Services an Older Adult Behavioral Health Services Administrator to oversee behavioral health services for older adults. The bill would require that position to be funded with administrative funds from the Mental Health Services Fund. The bill would prescribe the functions of the administrator and its responsibilities, including, but not limited to, developing outcome and related indicators for older adults for the purpose of assessing the status of behavioral health services for older adults, monitoring the quality of programs for those adults, and guiding decisionmaking on how to improve those services. The bill would require the administrator to receive data from other state agencies and departments to implement these provisions, subject to existing state or federal confidentiality requirements. The bill would require the administrator to report to the entities that administer the MHSA on those outcome and related indicators by July 1, 2022, and would require the report to be posted on the department's internet website. The bill would also require the administrator to develop a strategy and standardized training for all county behavioral health personnel in order for the counties to assist the administrator in obtaining the data necessary to develop the outcome and related indicators. This bill contains other related provisions.

[AB 895](#)

(Holden D) Skilled nursing facilities, intermediate care facilities, and residential care facilities for the elderly: notice to prospective residents.

Current Text: Amended: 6/6/2022 [html](#) [pdf](#)

Introduced: 2/17/2021

Last Amend: 6/6/2022

Status: 6/15/2022-Re-referred to Com. on HUMAN S.

Location: 6/15/2022-S. HUM. S.

Summary: The Long-Term Care, Health, Safety, and Security Act of 1973 generally requires the State Department of Public Health to license and regulate long-term health care facilities and to establish an inspection and reporting system to ensure that long-term health care facilities are in compliance with state statutes and regulations. Existing law defines a "long-term health care facility" to include, among other facility types, a skilled nursing facility and an intermediate care facility. Existing law also regulates residential care facilities for the elderly, which are licensed by the State Department of Social Services. A violation of the provisions relating to the operation or maintenance of a long-term health care facility, or who violates the provisions relating to a residential care facility for the elderly, is a misdemeanor. This

bill would require a skilled nursing facility, intermediate care facility, or residential care facility for the elderly to provide a prospective resident of the skilled nursing facility, intermediate care facility, or residential care facility for the elderly, or their representative, prior to or at the time of admission, a written notice that includes specified contact information for the local long-term care ombudsman and links to specified websites relating to these facilities. The bill would require the notice to include a statement that it is intended as a resource for purposes of accessing additional information regarding resident care at the facility and reporting resident complaints. By expanding the definition of a crime, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

[AB 1624](#)

(Ting D) Budget Act of 2022.

Current Text: Introduced: 1/10/2022 [html](#) [pdf](#)

Introduced: 1/10/2022

Status: 1/20/2022-Referred to Com. on BUDGET.

Location: 1/10/2022-A. BUDGET

Summary: This bill would make appropriations for the support of state government for the 2022–23 fiscal year. This bill contains other related provisions.

[AB 1707](#)

(Boerner Horvath D) Property tax postponement: Senior Citizens and Disabled Citizens Property Tax Postponement Fund.

Current Text: Introduced: 1/26/2022 [html](#) [pdf](#)

Introduced: 1/26/2022

Status: 6/15/2022-From committee: Do pass and re-refer to Com. on APPR with recommendation: To Consent Calendar. (Ayes 5. Noes 0.) (June 15). Re-referred to Com. on APPR.

Location: 6/15/2022-S. APPR.

Calendar: 6/27/2022 10 a.m. - 1021 O Street, Room 2200 SENATE APPROPRIATIONS, PORTANTINO, Chair

Summary: Existing law authorizes the Controller, upon approval of a claim for the postponement of ad valorem property taxes, to directly pay a county tax collector for the property taxes owed by the claimant, as provided. Existing law establishes the Senior Citizens and Disabled Citizens Property Tax Postponement Fund and continuously appropriates moneys in the fund to the Controller for specified purposes, including disbursements relating to the postponement of property taxes pursuant to the Property Tax Postponement Law. Existing law requires the Controller to, on June 30, 2018, and on June 30 each year thereafter, transfer any moneys in the fund in excess of \$15,000,000 to the General Fund. The bill would require money to be transferred, on June 30, 2023, and on June 30 each year thereafter, from the General Fund to the Senior Citizens and Disabled Citizens Property Tax Postponement Fund when the balance in the latter fund is less than \$15,000,000. The bill would require the amount of money transferred each year to be equal to the sum needed to bring the balance of the Senior Citizens and Disabled Citizens Property Tax Postponement Fund to \$15,000,000. By authorizing the expenditure of additional General Fund moneys for the purpose of the property tax postponement program, this bill would make an appropriation.

[AB 1801](#)

(Nazarian D) State holidays: Genocide Awareness Day.

Current Text: Amended: 5/19/2022 [html](#) [pdf](#)

Introduced: 2/7/2022

Last Amend: 5/19/2022

Status: 6/15/2022-From committee: Do pass and re-refer to Com. on ED. (Ayes 14. Noes 0.) (June 14). Re-referred to Com. on ED.

Location: 6/14/2022-S. ED.

Calendar: 6/29/2022 9 a.m. - 1021 O Street, Room 2100 SENATE EDUCATION, LEYVA, Chair

Summary: Existing law designates specific days as holidays in this state. Existing law designates holidays on which community colleges and public schools are authorized to close pursuant to a memorandum of understanding between the governing board and represented employees, including "Native American Day" on the 4th Friday in September. Existing law entitles state employees, with specified exceptions, to be given time off with pay for specified holidays. This bill would add April 24, known as "Genocide Awareness Day," to the list of state holidays. The bill would authorize community colleges and public schools to close on April 24, known as "Genocide Awareness Day," as specified. The bill would authorize state employees to elect to take time off with pay in recognition of "Genocide Awareness Day," as specified.

[AB 1824](#)

(Committee on Public Employment and Retirement) Public employees' retirement.

Current Text: Amended: 5/25/2022 [html](#) [pdf](#)

Introduced: 2/7/2022

Last Amend: 5/25/2022

Status: 5/25/2022-From committee chair, with author's amendments: Amend, and re-refer to committee. Read second time, amended, and re-referred to Com. on L., P.E. & R.

Location: 5/4/2022-S. L., P.E. & R.

Summary: Existing law, the Teachers' Retirement Law (TRL), establishes the State Teachers' Retirement System (STRS) and creates the Defined Benefit Program of the State Teachers' Retirement Plan, which provides a defined benefit to members of the program, based on final compensation, creditable service, and age at retirement, subject to certain variations. STRS is administered by the Teachers' Retirement Board. Existing law creates the Cash Balance Benefit Program, which is administered by the board, to provide a retirement plan for the benefit of participating employees who provide creditable service for less than 50% of full time. The TRL defines "creditable service" in connection with the Cash Balance Benefit Program with reference to specified activities performed for certain employers, including for a prekindergarten through grade 12 employer, as specified, and for a community college employer, as specified. STRS prescribes the activities that earn creditable service in this regard to include trustee service, as specified. This bill would revise the description of trustee service to link it to the definition of this service, which means duties performed by a member of the governing body of an employer. This bill contains other related provisions and other existing laws.

[AB 2080](#)

(Wood D) Health Care Consolidation and Contracting Fairness Act of 2022.

Current Text: Amended: 5/19/2022 [html](#) [pdf](#)

Introduced: 2/14/2022

Last Amend: 5/19/2022

Status: 6/8/2022-Referred to Coms. on HEALTH and JUD.

Location: 6/8/2022-S. HEALTH

Calendar: 6/22/2022 1:30 p.m. - 1021 O Street, Room 1200 SENATE HEALTH, PAN, Chair

Summary: Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care, and makes a willful violation of the act a crime. Existing law provides for the regulation of health insurers by the Department of Insurance. Existing law regulates contracts between health care service plans or health insurers and health care providers or health facilities, including requirements for reimbursement and the cost-sharing amount collected from an enrollee or insured. This bill, the Health Care Consolidation and Contracting Fairness Act of 2022, would prohibit a contract issued, amended, or renewed on or after January 1, 2023, between a health care service plan or health insurer and a health care provider or health facility from containing terms that, among other things, restrict the plan or insurer from steering an enrollee or insured to another provider or facility or require the plan or insurer to contract with other affiliated providers or facilities. The bill would authorize the appropriate regulating department to refer a plan's or insurer's contract to the Attorney General, and would authorize the Attorney General or state entity charged with reviewing health care market competition to review a health care practitioner's or health facility's entrance into a contract that contains specified terms. Because a willful violation of these provisions by a health care service plan would be a crime, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

[AB 2127](#)

(Santiago D) Health care coverage: dependent adults.

Current Text: Amended: 3/24/2022 [html](#) [pdf](#)

Introduced: 2/15/2022

Last Amend: 3/24/2022

Status: 6/1/2022-From committee: Do pass and re-refer to Com. on APPR with recommendation: To Consent Calendar. (Ayes 9. Noes 0.) (June 1). Re-referred to Com. on APPR.

Location: 6/1/2022-S. APPR.

Summary: Existing law establishes the Health Insurance Counseling and Advocacy Program (HICAP) in the California Department of Aging to provide Medicare beneficiaries and those imminently eligible for Medicare with counseling and advocacy regarding health care coverage options. Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care, and makes a willful violation of the act a crime. Existing law provides for the regulation of health insurers by the Department of Insurance. Existing law requires an individual health care service plan contract or health insurance policy issued, amended, or renewed on or after January 1, 2023, that provides dependent coverage to make dependent coverage available to a qualified dependent parent or stepparent. Existing law requires a plan, an insurer, or the California Health Benefit Exchange to provide an applicant seeking to add a dependent parent or stepparent with written notice about HICAP at the time of solicitation and on the application. This bill would clarify that a health care service plan, a health insurer, or a solicitor is required to provide an individual with the name, address, and telephone number of the local HICAP program and the statewide HICAP telephone number at the time of solicitation and, for a plan or insurer, on the application. Because a violation of these provisions by a health care service plan would be a crime, the bill would impose a state-mandated local program. The bill would state the intent of the Legislature to ensure an individual is informed of and understands their specific rights and health care options before enrolling a Medicare-eligible or enrolled dependent parent or stepparent in individual health care coverage. This bill contains other existing laws.

[AB 2352](#)

(Nazarian D) Prescription drug coverage.

Current Text: Amended: 4/6/2022 [html](#) [pdf](#)

Introduced: 2/16/2022

Last Amend: 4/6/2022

Status: 6/16/2022-From committee: Amend, and do pass as amended and re-refer to Com. on APPR. (Ayes 9. Noes 0.) (June 15).

Location: 6/15/2022-S. APPR.

Calendar: 6/20/2022 #6 SENATE ASSEMBLY BILLS - SECOND READING FILE

Summary: Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care, and makes a willful violation of the act a crime. Existing law provides for the regulation of health insurers by the Department of Insurance. Existing law requires a health care service plan contract or health insurance policy that provides coverage for outpatient prescription drugs to cover medically necessary prescription drugs and subjects those policies to certain limitations on cost sharing and the placement of drugs on formularies. Existing law limits the maximum amount an enrollee or insured may be required to pay at the point of sale for a covered prescription drug to the lesser of the applicable cost-sharing amount or the retail price, and requires that payment to apply to the applicable deductible. This bill would require a health care service plan or health insurer that provides prescription drug benefits and maintains one or more drug formularies to furnish specified information about a prescription drug upon request by an enrollee or insured, or their prescribing provider. The bill would require the plan or insurer to respond in real time to that request and ensure the information is current no later than one business day after a change is made. The bill would prohibit a health care service plan or health insurer from, among other things, restricting a prescribing provider from sharing the information furnished about the prescription drug or penalizing a provider for prescribing a lower cost drug. Because a willful violation of these provisions by a health care service plan would be a crime, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

[AB 2443](#)

(Cooley D) Public employees' retirement: federal law: limitation on benefits.

Current Text: Amended: 3/17/2022 [html](#) [pdf](#)

Introduced: 2/17/2022

Last Amend: 3/17/2022

Status: 5/18/2022-Referred to Com. on L., P.E. & R.

Location: 5/18/2022-S. L., P.E. & R.

Summary: Existing law establishes the Legislators' Retirement System, Public Employees' Retirement System, the Judges' Retirement System, and the Judges' Retirement System II, all of which provide retirement and other benefits to their respective members and are administered by the Board of Administration of the Public Employees' Retirement System. Existing federal law prescribes limits on the amount of retirement benefits that a member may receive if a retirement system is to maintain its tax-qualified status and may require that benefits from different retirement plans maintained by the same employer be aggregated. This bill, for purposes of the above-described retirement systems, would prescribe the method by which benefits are to be reduced when federal law requires aggregation of benefits from different plans maintained by the same employer and federal limits on benefits are reached.

[AB 2604](#)

(Calderon D) Long-term care insurance.

Current Text: Amended: 6/13/2022 [html](#) [pdf](#)

Introduced: 2/18/2022

Last Amend: 6/13/2022

Status: 6/13/2022-From committee chair, with author's amendments: Amend, and re-refer to committee. Read second time, amended, and re-referred to Com. on INS.

Location: 6/1/2022-S. INS.

Calendar: 6/22/2022 1:30 p.m. - 1021 O Street, Room 2100 SENATE INSURANCE, RUBIO, SUSAN, Chair
6/29/2022 1:30 p.m. - 1021 O Street, Room 1200 SENATE HEALTH, PAN, Chair

Summary: Existing law establishes the California Partnership for Long-Term Care Program, administered by the State Department of Health Care Services, to link private long-term care insurance policies and health care service plan contracts that cover long-term care with the In-Home Supportive Services Program and the Medi-Cal program. Existing law requires a long-term care insurance policy or a health care service plan contract to contain certain provisions certified by the department, including protection against loss of benefits due to inflation and a periodic record issued to the insured. Existing law requires an applicant to be offered one option that provides, at a minimum, protection against inflation that automatically increases benefit levels by 5% each year over the previous year, as specified, and at least one lower-cost option. This bill would require that lower-cost option to provide protection against inflation that automatically increases benefit levels by, at a minimum, 3% each year over the previous year, but would authorize a policy or certificate to be certified if it automatically increases benefit levels by 1% each year over the previous year if the policyholder or certificate holder meets specified criteria. The bill would require policyholders and certificate holders to be offered various options, if applicable, if a premium increases, including the option to reduce the daily benefit, as specified. The bill would also make conforming changes.

[ACA 11](#)

(Kalra D) Taxes to fund health care coverage and cost control.

Current Text: Introduced: 1/5/2022 [html](#) [pdf](#)

Introduced: 1/5/2022

Status: 1/6/2022-From printer. May be heard in committee February 5.

Location: 1/5/2022-A. PRINT

Summary: Existing law imposes various taxes, including personal income and excise taxes. The California Constitution requires a 2/3 vote of both houses of the Legislature for the passage of any change in statute that results in any taxpayer paying a higher tax. The California Constitution generally prohibits the total annual appropriations subject to limitation of the state and each local government from exceeding the appropriations limit of the entity of government for the prior fiscal year, adjusted for the change in the cost of living and the change in population, and prescribes procedures for making adjustments to the appropriations limit. This measure would impose an excise tax, payroll taxes, and a State Personal Income CalCare Tax at specified rates to fund comprehensive universal single-payer health care coverage and a health care cost control system for the benefit of every resident of the state, as well as reserves deemed necessary to ensure payment, to be established in statute. The measure would authorize the Legislature, upon an economic analysis determining insufficient amounts to fund these purposes, to increase any or all of these tax rates by a statute passed by majority vote of both houses of the Legislature. This bill contains other related provisions.

[SB 154](#)

(Skinner D) Budget Act of 2022.

Current Text: Enrollment: 6/15/2022 [html](#) [pdf](#)

Introduced: 1/8/2021

Last Amend: 6/8/2022

Status: 6/15/2022-Enrolled and presented to the Governor at 2:30 p.m.

Location: 6/15/2022-S. ENROLLED

Summary: This bill would make appropriations for the support of state government for the 2022–23 fiscal year. This bill contains other related provisions.

[SB 457](#)

(Portantino D) Personal income taxes: credit: reduction in vehicles.

Current Text: Amended: 5/26/2022 [html](#) [pdf](#)

Introduced: 2/16/2021

Last Amend: 5/26/2022

Status: 6/13/2022-June 13 hearing: Heard for testimony only.

Location: 5/27/2022-A. REV. & TAX

Summary: The Personal Income Tax Law allows various credits against the taxes imposed by the law. This bill would, for taxable years beginning on or after January 1, 2023, allow a credit against those taxes in an amount of \$2,500 for each household member, as defined, that exceeds the number of registered vehicles, as defined, and would limit the amount of the credit allowed to \$7,500. Existing law requires a bill authorizing a new tax expenditure to contain, among other things, specific goals, purposes, and objectives that the tax expenditure will achieve, detailed performance indicators, and data collection requirements. This bill would provide findings and declarations relating to the goals of this credit. This bill would take effect immediately as a tax levy.

[SB 840](#)

(Skinner D) Budget Act of 2022.

Current Text: Introduced: 1/10/2022 [html](#) [pdf](#)

Introduced: 1/10/2022

Status: 1/11/2022-From printer.

Location: 1/10/2022-S. BUDGET & F.R.

Summary: This bill would make appropriations for the support of state government for the 2022–23 fiscal year. This bill contains other related provisions.

[SB 853](#)

(Wiener D) Prescription drug coverage.

Current Text: Amended: 6/2/2022 [html](#) [pdf](#)

Introduced: 1/19/2022

Last Amend: 6/2/2022

Status: 6/2/2022-Referred to Com. on HEALTH. From committee with author's amendments. Read second time and amended. Re-referred to Com. on HEALTH.

Location: 6/2/2022-A. HEALTH

Calendar: 6/28/2022 1:30 p.m. - 1021 O Street, Room 1100 ASSEMBLY HEALTH, WOOD, Chair

Summary: Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care, and makes a willful violation of the act a crime. Existing law provides for the regulation of disability insurers, including health insurers, by the Department of Insurance. Existing law generally authorizes a health care service plan or health insurer to use utilization review, under which a licensed physician or a

licensed health care professional who is competent to evaluate specific clinical issues may approve, modify, delay, or deny requests for health care services based on medical necessity. Existing law prohibits a health care service plan contract that covers prescription drug benefits or a specified health insurance policy from limiting or excluding coverage for a drug on the basis that the drug is prescribed for a use that is different from the use for which it was approved by the federal Food and Drug Administration if specified conditions are met. Existing law also prohibits a health care service plan that covers prescription drug benefits from limiting or excluding coverage for a drug that was previously approved for coverage if an enrollee continues to be prescribed that drug, as specified. This bill would expand the above-described prohibitions to prohibit limiting or excluding coverage of a drug, dose, or dosage form, and would apply the prohibition to blanket disability insurance policies and certificates. The bill would prohibit a health care service plan or disability insurer that provides coverage for prescription drugs from limiting or declining to cover a drug or dose of a drug as prescribed, or imposing additional cost sharing for covering a drug as prescribed, if specified criteria apply. The bill would provide that a reduction or termination of an ongoing and approved course of treatment before the end of the treatment or the end or amendment of the policy is an adverse benefit determination, and would require a health care service plan or disability insurer to notify an enrollee or insured, or their representative, and the enrollee's or insured's provider in writing of the adverse benefit determination no fewer than 7 calendar days before the effective date. The bill would require a plan or insurer that has approved an ongoing course of treatment to provide continuing coverage pending appeal or review. Because a willful violation of the bill's requirements relative to health care service plans would be a crime, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

[SB 939](#)

(Pan D) Prescription drug pricing.

Current Text: Amended: 6/15/2022 [html](#) [pdf](#)

Introduced: 2/8/2022

Last Amend: 6/15/2022

Status: 6/15/2022-From committee with author's amendments. Read second time and amended. Re-referred to Com. on HEALTH.

Location: 5/27/2022-A. HEALTH

Calendar: 6/28/2022 1:30 p.m. - 1021 O Street, Room 1100 ASSEMBLY HEALTH, WOOD, Chair

Summary: Existing federal law requires the United States Secretary of Health and Human Services to enter into an agreement with each manufacturer of covered outpatient drugs to ensure the amount a covered entity is required to pay for those drugs does not exceed the average manufacturer price of the drug under the federal Medicaid program. Existing state law requires a covered entity to dispense only drugs subject to these federal pricing requirements to Medi-Cal beneficiaries. Existing law defines a "covered entity" to include a federally qualified health center and entities receiving specified grants and federal funding. This bill would prohibit a pharmacy benefit manager from discriminating against a covered entity or its pharmacy in connection with dispensing a drug subject to federal pricing requirements or preventing a covered entity from retaining the benefit of discounted pricing for those drugs. The bill would prohibit a drug manufacturer that is subject to federal pricing requirements from imposing preconditions, limitations, delays, or other barriers to the purchase of covered drugs that are not required under federal law or regulations.

[SB 1343](#)

(Leyva D) Public employees' retirement: charter schools.

Current Text: Amended: 6/15/2022 [html](#) [pdf](#)

Introduced: 2/18/2022

Last Amend: 6/15/2022

Status: 6/15/2022-From committee with author's amendments. Read second time and amended. Re-referred to Com. on P.E. & R.

Location: 6/9/2022-A. P.E. & R.

Calendar: 6/22/2022 9 a.m. - State Capitol, Room 444 ASSEMBLY PUBLIC EMPLOYMENT AND RETIREMENT, COOPER, Chair

Summary: The Teachers' Retirement Law establishes the State Teachers' Retirement System (STRS) and creates the Defined Benefit Program of the State Teachers' Retirement Plan, which provides a defined benefit to members of the program, based on final compensation, credited service, and age at retirement, subject to certain variations. Existing law also establishes the Cash Balance Benefit Program for the purpose of providing a retirement plan for specified teachers whose service is less than 50% of the full-time equivalent for the person's position or who are employed on a temporary basis or as a substitute, as specified. The Cash Balance Benefit Program and STRS are administered by the Teachers' Retirement Board. The Public Employees' Retirement Law establishes the Public Employees' Retirement System (PERS), which provides defined benefits to members of the system based on final compensation, credited service, and age at retirement, subject to certain variations. PERS is administered by its board of administration. The California Constitution grants plenary authority for the administration of a public pension or retirement system to its retirement board, as specified, and provides that the assets of a retirement system are trust funds, as specified. This bill would require a charter school initially authorized to commence operations on and after January 1, 2023, to participate in STRS or PERS, or both. The bill would specify that this provision does not apply to a charter school

seeking a renewal authorization on or after January 1, 2023, if the charter school initially received authorization to commence operations before January 1, 2023, and has continuously operated as a charter school since that initial authorization. The bill would generally require STRS, the Cash Balance Benefit Program, and PERS to apply to a charter school in the same manner as the systems and program apply to other public schools. This bill contains other related provisions and other existing laws.

Total Measures: 25

Total Tracking Forms: 25