

2002

2001-2002 Legislative Summary

Assembly Committee on Health

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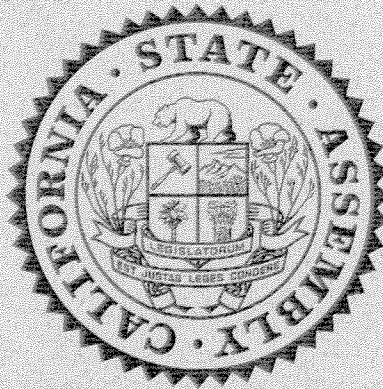
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CALIFORNIA LEGISLATURE

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2001-2002 LEGISLATIVE SUMMARY

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EMERGENCY MEDICAL SERVICES/TRAUMA CARE

AB 1833 (Nakano)

Local emergency medical services funds.

Requires the disbursement of moneys from the Maddy Emergency Medical Services Fund (Maddy Fund) to be made quarterly instead of annually, requires each county to adopt a fee schedule and reimbursement methodology, and requires counties to make all reasonable efforts to notify certain physicians of the availability of the Maddy Fund and the process by which to submit a claim against the Maddy Fund. (Chapter 430, Statutes of 2002)

AB 1988 (Diaz)

Emergency Medical Services Authority: task force: emergency and trauma services.

Requires the Emergency Medical Services Authority to convene a task force to study the delivery and provision of emergency medical services. Requires the task force, among other things, to develop a plan to ensure that all Californians are served by appropriate coverage areas for emergency and trauma services and that sufficient numbers of emergency departments and trauma centers exist to serve each area's population. (Chapter 333, Statutes of 2002)

AB 2067 (Nakano)

Nuclear emergencies: exposure to radioactive iodine.

Requires the Department of Health Services to establish and implement a program to oversee the distribution of KI tablets to all persons who reside, work, visit or attend school within the state designated emergency planning zone of an operational nuclear powerplant. Requires submission of plan to the Governor and the Legislature. Requires implementation only to extent funds are appropriated for this bill's purposes. (Chapter 852, Statutes of 2002)

VETOED

AB 687 (Thomson)

Emergency medical services: trauma care systems.

Requires each local emergency medical services agency that has not implemented a trauma care system to do so January 1, 2005. (Vetoed)

AB 900 (Papan)

Local emergency medical services funds.

Would have revised procedures for payment of claims against the Maddy Emergency Medical Services Fund (Maddy Fund) and required each county to adopt a fee schedule and reimbursement methodology and to notify physicians of the availability of the fund and the process to submit a claim against the fund. Would have included local medical societies within the scope of entities that may serve as the administering officer of the Maddy Fund. (Vetoed)

SB 807 (Dunn)

Vehicles

Would have imposed an additional \$200 assessment, in addition to any other applicable fines and assessments under existing law, for specified Vehicle Code violations with the resulting revenues to be deposited in the Maddy Emergency Medical Services Fund for uncompensated physician services. (Vetoed)

FOOD SAFETY

AB 124 (Cedillo)

Food establishments: public markets.

Exempts the Mercado La Paloma in Los Angeles, operated by the Esperanza Community Housing Corporation, from a requirement that food establishments be fully enclosed, under specified conditions. (Chapter 12, Statutes of 2001)

AB 187 (Liu)

Food labeling and safety.

Permits food establishments to sell Korean rice cakes, as defined, that have been at room temperature for less than 24 hours, and requires manufacturers of Korean rice cakes to provide a date stamp indicating the date of manufacture. (Chapter 204, Statutes of 2001)

AB 610 (Kelley)

Nonprofit charitable temporary food facilities.

Expands the definition of a "nonprofit charitable temporary food facility" (NCTFF), for purposes of the California Uniform Retail Food Facilities Law to include school clubs. Authorizes NCTFFs to operate more frequently by allowing NCTFFs to operate up to four times annually. (Chapter 121, Statutes of 2002)

AB 708 (Bill Campbell)

Retail food facilities: internal food temperatures.

Makes a variety of changes to food safety standards and sanitation standards applicable to retail food facilities. Lowers the minimum internal heating temperature for ready-to-eat pork and changes the temperature for foods including animal tissue prepared in a microwave oven. Makes other changes related to food safety standards. (Chapter 369, Statutes of 2001)

AB 2219 (Keeley)

Retail food establishments.

Applies a requirement that food establishments provide toilet facilities, currently only applicable to food establishments with more than 20,000 square feet built after July 1, 1984, to all food establishments constructed on or after January 1, 2004, and requires all food establishments built before January 1, 2004, regardless of square footage, to provide toilet facilities or post a sign in a public area stating that toilet facilities are not provided. (Chapter 340, Statutes of 2002)

AB 2798 (Aroner)

Retail food facilities: transportation of food.

Includes the transportation of food within the provisions of law regulating food, including the provisions of law requiring potentially hazardous foods to be kept at certain temperatures, and permits local enforcement officers to enter, inspect and issue citations to any vehicle transporting food to or from a retail facility, as specified. (Chapter 532, Statutes of 2002)

HEALTH CARE PROFESSIONAL LICENSING AND REGULATION

AB 269 (Correa)

Professional and vocational licensing boards, commissions, and bureaus.

Clarifies existing law by incorporating the following statement in the enabling statute for each board and bureau at the Department of Consumer Affairs:

"Protection of the public shall be the highest priority for the (name of board or bureau) in exercising licensing, regulatory, and disciplinary functions. Whenever the protection of the public is inconsistent with other interests sought to be promoted, the protection of the public shall be paramount." (Chapter 107, Statutes of 2002)

AB 447 (Firebaugh)

Dental Board of California.

Requires, of the eight practicing dentists that are required to be appointed to the Dental Board of California, a faculty member of a dental college to be considered for at least one appointment and a dentist practicing in a community clinic to be considered for at least one appointment. (Chapter 625, Statutes of 2001)

AB 487 (Aroner)

Medical professionals: conduct.

Requires all physicians to complete a mandatory continuing education course in the subjects of pain management and the treatment of terminally ill and dying patients, and requires the Medical Board of California to develop standards assuring the competent review in cases concerning the under-treatment and under-medication of a patient's pain. (Chapter 518, Statutes of 2001)

AB 536 (Bates)

Pharmacy technicians.

Increases the current one-to-one ratio of pharmacist technicians (PTs) to pharmacists to two PTs for each additional pharmacist in those pharmacies with more than one pharmacist. Permits a pharmacist to refuse to supervise a second PT if the pharmacist determines that a second PT would interfere with the effective performance of the pharmacist's responsibilities. (Chapter 352, Statutes of 2001)

AB 564 (Lowenthal)

Dentistry: oral conscious sedation.

Requires dentists to report to the Dental Board of California (Board) when patients are hospitalized as a result of dental treatment, and requires the Board to submit a report to the Legislature by January 1, 2003, regarding all reports that the Board has received on the subject of deaths or hospitalizations as a result of dental treatment. (Chapter 308, Statutes of 2001)

AB 586 (Nation)

Pharmacists: performance of routine patient assessment procedures and skin puncture.

Permits pharmacists to perform skin puncture and clinical laboratory tests classified as waived without operating under protocol when performing routine patient assessment procedures, as specified, and makes technical, clarifying changes to related provisions of law regulating when pharmacists are permitted to perform clinical laboratory tests. (Chapter 501, Statutes of 2001)

AB 668 (Chan)

California Dentist Loan Forgiveness Program.

Requires the Office of Statewide Health Planning and Development to report to the Legislature on the feasibility of establishing a California Dental Loan Forgiveness Program. (Chapter 249, Statutes of 2001)

AB 826 (Cohn)

Pharmaceutical practice: prescriptions.

Permits pharmacists to initiate, in addition to adjust, the drug regimen of a patient pursuant to a patient-specific protocol, and eliminates restrictions on where a pharmacist is permitted to provide clinical advice or patient consultation by eliminating a requirement that these services only be provided in licensed settings. (Chapter 262, Statutes of 2001)

AB 1026 (Oropeza)

Healing arts: dentists.

Prohibits a licensed dentist from advertising that he or she is a specialist unless the dentist meets certain conditions, including meeting the requirements of a program or organization approved by the American Dental Association or the Dental Board of California, as specified. (Chapter 313, Statutes of 2002)

AB 1045 (Firebaugh)

Healing arts: practice.

Establishes the Licensed Physicians and Dentists from Mexico Pilot Program to allow up to 30 licensed physicians and up to 30 licensed dentists from Mexico to practice medicine or dentistry in California for up to three years, and establishes a separate pilot program for international medical graduates. (Chapter 1157, Statutes of 2002)

AB 1140 (Thomson)

Nursing: workforce planning.

Requires the Board of Registered Nursing to collect and analyze work force data from its licensees for future work force planning, and to produce reports on the work force data it collects at least biennially. (Chapter 1089, Statutes of 2002)

AB 1253 (Matthews)

Nursing.

Adds to the list of providers who may be reimbursed under the Victims of Crime Program, psychiatric-mental health nurses, as defined, and revises the description of psychiatric-mental health nurses in various provisions of law to reflect the certification of clinical nurse specialists. (Chapter 420, Statutes of 2001)

AB 1347 (Pescetti)

Dementia Training Standards Act of 2001.

Establishes the Dementia Training Standards Act of 2001 which requires any certified nurse assistant employed by a skilled nursing facility or intermediate care facility to complete specified educational and training requirements regarding dementia-related diseases. (Chapter 339, Statutes of 2001)

AB 1428 (Aanestad)

Dentistry: licensure.

Permits the Dental Board of California to grant a license to practice dentistry to applicants licensed to practice dentistry in another state for at least five years without taking the licensure examination. (Chapter 507, Statutes of 2001)

AB 1444 (Maddox)

Nutritional advice.

Authorizes a nutritional professional to provide "medical nutrition therapy" upon referral by a health care provider. Establishes the title of "dietetic technician, registered" (DTR), and lists the requirements for someone who is allowed to represent themselves as a DTR. Adds the ordering of medical laboratory tests related to nutritional therapeutic treatments to the list of services defined as "medical nutritional therapy." (Chapter 628, Statutes of 2001)

AB 1586 (Negrete McLeod)

Healing arts: physicians and surgeons.

Requires physicians to report to the Medical Board of California any specialty board certification he or she holds, as specified, and his or her practice status, as defined, at the time of licensure renewal. (Chapter 509, Statutes of 2001)

AB 1616 (Wright)

Healing Arts: disciplinary actions.

Extends the statutes of limitations for accusations against licensees of the Medical Board of California, the Board of Psychology, the Respiratory Care Board, and the Board of Behavioral Sciences, currently 7 years after the alleged act or omission occurs, to 10 years after the alleged act or omission occurs when the accusation involves allegations of sexual misconduct. (Chapter 617, Statutes of 2001)

AB 1943 (Chu)

Acupuncture.

Increases the entry-level curriculum standards for acupuncturists to a minimum of 3,000 hours of study pertaining to the practice of an acupuncturist. (Chapter 781, Statutes of 2002)

AB 2020 (Correa)

Optometry.

Requires optometrists and ophthalmologists and registered dispensing opticians to provide a patient with a copy of his or her contact lens prescription, with certain exceptions, specifies the requirements of an expiration date on a prescription, and requires that out-of-state sellers of contact lenses attempt to verify the prescription with the prescriber, under specified conditions. (Chapter 814, Statutes of 2002)

AB 2045 (Matthews)

Pharmacists: disciplinary actions.

Requires the Board of Pharmacy to consider the reporting of a violation by a pharmacist-in-charge as a mitigating factor in a disciplinary action against that pharmacist for a violation committed by another person. (Chapter 562, Statutes of 2002)

AB 2165 (Strom-Martin)

Pharmacy.

Requires the Joint Legislative Sunset Review Committee to review the state's pharmacist shortage and make recommendations on a course of action to alleviate the existing problem. (Chapter 577, Statutes of 2002)

AB 2194 (Jackson)

Obstetrics and gynecology residency requirements.

Requires all residency programs in obstetrics and gynecology, subject to all other provisions of the Therapeutic Abortion Act, to comply with the program requirements for residency education in obstetrics and gynecology of the Accreditation Council for Graduate Medical Education, which requires that, in addition to education and training in in-patient care, the program in obstetrics and

gynecology be geared toward the development of competence in the provision of ambulatory primary health care for women, including, but not limited to, training in the performance of abortion services. (Chapter 384, Statutes of 2002)

AB 2196 (Lowenthal)

Podiatrists.

Permits a licensed podiatrist to use the phrases "doctor of podiatric medicine," "doctor of podiatry," and "podiatric doctor," or the initials "D.P.M.," without being in violation of provisions of law limiting the use of the word "doctor" to licensed physicians and surgeons. (Chapter 87, Statutes of 2002)

AB 2385 (Bill Campbell)

Healing arts.

This bill requires the Medical Board of California to keep original, meritorious complaints for at least seven years or until the statute of limitations for filing a disciplinary action against a physician expires. (Chapter 816, Statutes of 2002)

AB 2753 (Aanestad)

Health care: bone densitometers.

Requires the Department of Health Services (DHS) to provide for certification of any physician to operate, and supervise the operation of, a bone densitometer, if that physician provides DHS a certificate that evidences training in the use of a bone densitometer by a representative of a bone densitometer machine manufacturer. (Chapter 657, Statutes of 2002)

AB 2818 (Strom-Martin)

Registered dental hygienists.

Permits the Dental Board of California to allow dental hygienists licensed in another state to be licensed in California by credential, without having to take the required exam, if specified conditions are met. (Chapter 691, Statutes of 2002)

AB 2872 (Thomson)

Healing arts: physicians and surgeons.

Requires the Medical Board of California to convene a working group to study methods to reactivate the Fifth Pathway Program (FPP) in medical schools located in this state, and to submit a report to the Legislature by July 1, 2003, including options for the Legislature to consider in order to facilitate the establishment of one or more FPPs in medical schools located in California. (Chapter 1136, Statutes of 2002)

AB 2935 (Strom-Martin)

Health professions: education: pharmacists: scholarship and loan repayment program.

Establishes the California Pharmacist Scholarship and Loan Repayment Program to pay for the educational expense of pharmacy students and repay qualifying educational loans of pharmacists who agree to participate in medically underserved areas, and establishes a fund to implement this program, to be funded by a voluntary \$25 contribution by pharmacists and pharmacies at the time of licensure renewal. (Chapter 1138, Statutes of 2002)

SB 16 (Figueroa)

Peer review

Makes various revisions to the peer review reporting process by increasing the maximum fines for failure to file peer review reports from \$10,000 to \$100,000 for willful failures, and from \$5,000 to \$50,000 for any other failure to file, by adding a requirement to file a report when a physician withdraws or abandons his or her application for staff privileges under specified circumstances, and by making various other revisions to this body of law. (Chapter 614, Statutes of 2001)

SB 26 (Figueroa)

Professions and vocations.

Requires the Institute of Medical Quality to study peer review, requires an enforcement monitor to be appointed to monitor the Dental Board of California, and requires an independent review of the scope of practice of dental auxiliaries. Places the Osteopathic Medical Board of California under the jurisdiction of the

Department of Consumer Affairs (DCA), and makes additional technical and clarifying changes to various regulatory boards under the DCA. (Chapter 615, Statutes of 2001)

SB 50 (Machado)

Speech-language pathology assistants.

Extends the deadline, from January 1, 2001, to June 1, 2003, for a speech-language pathology aide to apply for registration as a speech-language pathology assistant based on work experience without having completed an associate of arts degree program. (Chapter 173, Statutes of 2001)

SB 111 (Alpert)

Medical assistants.

Permits a medical assistant, in addition to being able to perform specified tasks under the supervision of a physician or podiatrist in a licensed primary care clinic, to also perform these specified tasks under the supervision of a physician assistant, nurse practitioner, or nurse-midwife. (Chapter 358, Statutes of 2001)

SB 134 (Figueroa)

Dentistry.

Makes a variety of changes to the regulation of the dental profession, including requiring the next occupational analysis of dental licensees and oral and maxillofacial surgeons to include a survey of the training and practices of oral and maxillofacial surgeons. Requires registered dental assistants to complete courses in radiation safety and coronal polishing, and requires dentists to provide patients with a fact sheet specified in existing law relating to dental restoration materials. (Chapter 532, Statutes of 2001)

SB 298 (Figueroa)

Certified nurse-midwives: drugs and devices.

Permits certified nurse-midwives to furnish or order controlled substances under specified conditions, and makes legislative findings and declarations that this is intended to codify existing practice and is not intended to increase their scope of practice. (Chapter 289, Statutes of 2001)

SB 340 (Speier)

Pharmacies.

Authorizes a pharmacist, when filling a prescription, to substitute a different form of the medication with the same active ingredients of equivalent strength and duration of therapy as the prescribed form of the medication, and permits clinics and other covered entities to contract with pharmacies to provide discounted pharmaceuticals to patients of the covered entities under a federal drug pricing program. (Chapter 631, Statutes of 2001)

SB 341 (Perata)

Acupuncture.

Revises the scope of practice of licensed acupuncturists by adding the ability to perform or prescribe the use of magnets and plant, animal, and mineral products, as these products are defined. (Chapter 361, Statutes of 2001)

SB 349 (Committee on Business and Professions)

Healing arts.

Makes various changes to the laws governing licensed health care professionals, including permitting various boards to collect all accrued and unpaid renewal fees before a license may be renewed. (Chapter 435, Statutes of 2001)

SB 564 (Speier)

Healing arts: training in spousal or partner abuse treatment.

Requires applicants for licensure as marriage and family therapists, licensed clinical social workers and psychologists to complete a minimum of 15 hours of specified coursework in spousal or partner abuse assessment, abuse detection, and intervention strategies. Requires current licensees to take a one-time continuing education course. (Chapter 481, Statutes of 2002)

SB 577 (Burton)

Health: complementary and alternative health care practitioners.

Specifies that a person who complies with the requirements of this bill, and who does not perform specified actions such as puncturing the skin or prescribing drugs, is not in violation of specified provisions of the Medical Practice Act. Requires a person who provides services pursuant to this bill to provide specified information to the client in a written statement using plain language, including that he or she is not a licensed physician. (Chapter 820, Statutes of 2002)

SB 724 (Committee on Business and Professions)

Business.

Makes various changes to the laws regulating various licensed health care professionals. (Chapter 728, Statutes of 2001)

SB 826 (Margett)

Peace officers: Dental Board of California.

Extends the authorization for seven additional peace officer positions assigned to the Dental Board of California (DBC) until January 1, 2004, requires DBC to contract for a study to refine the findings of an earlier study, and appropriates \$75,000 from the State Dentistry Fund for the purposes of this study. (Chapter 859, Statutes of 2001)

SB 993 (Figueroa)

Nursing.

Deletes the Nurse Midwifery Practicing Act restriction on the furnishing of drugs or devices applicable to a nurse-midwife in solo practice. (Chapter 764, Statutes of 2002)

SB 1080 (Bowen)

Medical care providers: gynecological cancers.

Adds an existing law requirement that specified medical care providers provide patients during their annual gynecological examination a summary of the

symptoms and methods of diagnoses for gynecological cancers to the specific provisions of laws governing physicians (Medical Practice Act), and specifies that a violation of this requirement is subject to a citation and fine. (Chapter 730, Statutes of 2001)

SB 1169 (Alpert)

Pharmacy.

Permits a pharmacist to initiate emergency contraception drug therapy in accordance with standardized procedures or protocols developed by the pharmacist and an authorized prescriber. (Chapter 900, Statutes of 2001)

SB 1174 (Polanco)

Clinical laboratory technology: performance of blood glucose tests by certified emergency medical technicians and licensed paramedics.

Exempts from the laws regulating clinical laboratories those certified emergency medical technicians and licensed paramedics providing basic life support services or advanced life support services, as defined, who perform only blood glucose tests that are classified as waived clinical laboratory tests under the federal Clinical Laboratory Improvement Amendments of 1988, if the provider of those services obtains a valid certificate of waiver and complies with all other requirements for the performance of waived clinical laboratory tests under applicable federal regulations. (Chapter 640, Statutes of 2001)

SB 1244 (Figueroa)

Professions and vocations.

Makes various changes to professional and vocational boards within the Department of Consumer Affairs. (Chapter 1079, Statutes of 2002)

SB 1379 (O'Connell)

Speech-language pathologists: endoscopies.

Expands the scope of practice of speech-language pathologists to specifically include swallowing disorders in addition to speech, voice and language disorders, and to include the use of rigid and flexible endoscopes, under specified conditions,

as part of the methods for measurement and screening related to the development and disorders of speech, voice, language or swallowing. In a line item veto message, the Governor vetoed language authorizing the Medical Board of California to expend the first \$300,000 deposited in the Contingent Fund of the Medical Board of California in the 2002-2003 fiscal year. The Governor stated that existing law already requires the Board to complete the peer review study for which this funding would be provided and he does not support appropriating additional funds for this purpose, especially given the already insecure fiscal condition of the fund. (Chapter 485, Statutes of 2002)

SB 1402 (Murray)

Occupational therapy.

Makes changes to the Occupational Therapy Act as it relates to the ability of occupational therapists (OTs) to perform hand therapy services by repealing requirements that OTs must be certified by the Hand Therapy Certification Commission, and instead requires the Board of Occupational Therapy (board) to develop and adopt regulations regarding the education, training and competency requirements for advanced practices, which include hand therapy, the use of physical agent modalities; and swallowing assessment, evaluation, or intervention. (Chapter 823, Statutes of 2002)

SB 1558 (Figueroa)

Dangerous drug or dangerous device samples.

Permits a certified nurse-midwife, a nurse practitioner, or a physician assistant, functioning pursuant to standardized procedures or protocols, to request complimentary prescription drug samples, in addition to their current ability to sign for the receipt of these samples, if the drugs have been identified in the standardized procedure or protocol. (Chapter 263, Statutes of 2002)

SB 1589 (Perata)

Dentistry: dental hygienists.

Allows a registered dental hygienist in alternative practice to be a direct employee of a primary care clinic or specialty health clinic. (Chapter 811, Statutes of 2002)

SB 1642 (Soto)

Nutrition.

Limits the circumstances under which a registered dietician or other nutritional professional is authorized to order medical laboratory tests related to nutritional therapeutic treatments in a clinic where there is a registered nurse (RN) on duty, and in the absence of the referring physician at a patient visit, to require the RN to be notified that a medical laboratory test is being ordered and is afforded an opportunity to assess the patient. Repeals the ordering of medical laboratory tests from a provision of law that expressly prohibits dietetic technicians registered from providing specified services. (Chapter 325, Statutes 2002)

SB 1695 (Escutia)

Drug overdose deaths

Permits any county to develop a program to certify an Emergency Medical Technician-I to administer naloxone hydrochloride (the antidote to heroin overdose), as specified. (Chapter 678, Statutes of 2002)

SB 1809 (Machado)

Clinical laboratories.

Creates a new license category for a "medical laboratory technician," authorizes licensees to perform certain laboratory tests and examinations, specifies their licensing requirements, and provides for an application fee. (Chapter 356, Statutes of 2002)

SB 1907 (Murray)

Healing arts: referrals.

Conforms state law to federal law regulating physician referrals. (Chapter 309, Statutes of 2002)

SB 1950 (Figueroa)

Healing arts.

Requires the public disclosure of physician settlements involving more than \$30,000 under specified conditions; increases the composition of the Medical Board of California (MBC) by adding two public members; requires an independent enforcement monitor to be appointed to evaluate MBC's enforcement system; establishes a priority system for the investigation of complaints against physicians; extends the sunset date for MBC from July 1, 2003, to July 1, 2005; and makes numerous other changes to the laws regulating physicians and physician assistants. (Chapter 1085, Statutes of 2002)

SB 1951 (Figueroa)

Professional boards: acupuncture board.

Extends the sunset dates for the Acupuncture Board (Board), requests the Little Hoover Commission to conduct specified comprehensive analyses, requires the Board to conduct two specified studies, and makes other changes to the Board as recommended by the Joint Legislative Sunset Review Committee and the Department of Consumer Affairs. (Chapter 714, Statutes of 2002)

SB 1955 (Figueroa)

Professions and vocations.

Extends the sunset dates for the Board of Podiatric Medicine, the Physical Therapy Board and the Respiratory Care Board; eliminates the existing Optometry Board, creates a newly appointed State Board of Optometry (SBO), extends the sunset date for the new SBO for two years, and makes other changes to the SBO pursuant to the recommendations of the Joint Legislative Sunset Review Committee and the Department of Consumer Affairs. (Chapter 1150, Statutes of 2002)

SB 2018 (Figueroa)

Consumer boards and committees: funds subject to appropriation.

Deems money from Professional and Vocational Board fines and penalties to be not continuously appropriated, allowing licensing-related legislation that changes responsibilities or penalties to be passed by a majority vote in the Legislature, rather than a two-thirds vote. (Chapter 682, Statutes of 2002)

SB 2021 (Committee on Business & Professions)

Business and Professions.

Makes various changes to regulatory programs within the Department of Consumer Affairs. (Chapter 1011, Statutes of 2002)

SB 2022 (Figueroa)

Healing arts.

Defines the scope of practice for registered dental hygienists to include dental hygiene assessment, development, planning and implementation of a dental care plan, and oral health education, counseling, and screenings. (Chapter 810, Statutes of 2002)

SB 2025 (Committee on Business & Professions)

Professions and vocations.

Revises miscellaneous provisions of existing law regarding the Department of Consumer Affairs, regulatory boards and programs, and the review of these boards and programs by the Joint Legislative Sunset Review Committee. (Chapter 1012, Statutes of 2002)

SB 2026 (Committee on Business & Professions)

Professions and vocations.

Makes technical and clarifying amendments that enact, amend, or repeal existing provisions relating to various regulatory and consumer protection boards and programs, including the Board of Behavioral Sciences, the Contractors State Licensing Board, and the Professional Land Surveyors Act. (Chapter 1013, Statutes of 2002)

VETOED

AB 101 (Alquist)

Geriatric specialist training.

Would have required the Office of Statewide Health Planning and Development to administer a program to award scholarships and grants to students who enroll in specified programs in gerontology. (Vetoed)

SB 537 (Vasconcellos)

Alcohol and drug abuse counselors

Would have required the Department of Consumer Affairs (DCA) to conduct an occupational analysis of persons providing substance abuse counseling, to be completed by July 1, 2002, and would have required the Department of Alcohol and Drug Programs (DADP) to review its quality assurance mechanisms and licensing responsibilities regarding statewide professional standards and to survey programs to identify the type and number of counselors who currently work in each program licensed by DADP. Would have required both DCA and DADP to report to the Legislature by July 1, 2002, on specified topics concerning standards for licensure of alcohol and drug abuse counselors. (Vetoed)

SB 760 (Murray)

Medical education.

Would have established the California Health Service Corps Loan Repayment Program within the Office of Statewide Health Planning and Development to operate in conjunction with a federal loan repayment program. (Vetoed)

SB 1134 (Escutia)

Drug overdose deaths.

Would have required the Emergency Medical Services Authority to adopt regulations that would have allowed Emergency Medical Technician-I's to be trained in the administration of naloxone hydrochloride (the antidote for heroin overdose) through intramuscular injection or by means other than intravenous

administration no later than September 1, 2002. Would have required the Health and Human Services Agency (Agency) to convene a working group to develop guidelines for county medical examiners and coroners for specified purposes including promoting uniform reporting of fatal drug overdose cases. Would have established within the Agency the Drug Overdose Prevention, Recognition, and Response Program (Program) and would have required the Program to publish a report on drug overdose trends statewide. (Vetoed)

HEALTH FACILITY FINANCING, LICENSING AND REGULATION

AB 68 (Migden)

Health care providers: private duty nursing agencies.

Establishes licensing requirements for private duty nursing agencies, similar to existing requirements for home health agencies, for the provision of skilled nursing services on a shift basis at the patient's temporary or permanent place of residence. (Chapter 242, Statutes of 2001)

AB 656 (Chan)

Health Facilities: seismic safety requirements.

Requires a county-owned general acute care hospital to be deemed to have met Nonstructural Performance Category 2 seismic safety requirements if the building complies with certain conditions. (Chapter 247, Statutes of 2001)

AB 740 (Aanestad)

Public health: hospitals.

Exempts Eastern Plumas Health Care District from a prohibition on obtaining a consolidated license until January 1, 2008 or until the Sierra Valley District Hospital is annexed by the Eastern Plumas Health Care District. (Chapter 184, Statutes of 2001)

AB 828 (Cohn)

Long-term care facilities.

Requires the Department of Health Services (DHS) to establish a response unit within DHS to respond to consumer inquiries and complaints in long-term care facilities. Requires the response unit to do specified duties to assist consumers in resolving disputes about the quality of care and the quality of life in long-term care facilities upon receipt of consumer inquiries. (Chapter 680, Statutes of 2001)

AB 832 (Corbett)

Health Facilities: seismic safety

Requires all regulatory submissions made to the California Building Standards Commission by the Office of Statewide Health Planning and Development (OSHPD) to be deemed emergency regulations, revises specified seismic evaluation requirements, and clarifies provisions of law relating to OSHPD's ability to grant flexibility to hospitals in meeting seismic safety requirements by limiting these provisions to only those seismic safety provisions relating to new state responsibilities and hospital owner responsibilities. (Chapter 228, Statutes of 2001)

AB 890 (Cedillo)

Health facilities: sale of assets.

Expands existing provisions of law relating to the purchase, sale, or change in control of a non-profit public benefit corporation and the oversight of the Attorney General (AG) with these transactions, to apply also to non-profit religious and mutual benefit corporations. Expands existing factors that the AG is required to consider if they are deemed relevant to denying or providing consent to the purchase, sale, or change in control of a non-profit corporation to another non-profit corporation to include factors found in current law relating to the same types of transactions between a non-profit and for-profit corporations. (Chapter 427, Statutes of 2002)

AB 951 (Florez)

Clinics: interim license.

Requires the Department of Health Services to issue a temporary license to community clinics and free clinics under certain conditions. (Chapter 525, Statutes of 2001)

AB 1075 (Shelley)

Skilled nursing facilities: staffing ratios.

Requires the Department of Health Services (DHS) to develop regulations that become effective August 1, 2003, that establish staff-to-patient ratios for direct caregivers working in a skilled nursing facility. Requires DHS to

submit to the Legislature a status report on the implementation of this bill on April 1, 2002, April 1, 2003, and April 1, 2004. (Chapter 684, Statutes of 2001)

AB 1212 (Shelley)

Health facilities.

Makes a variety of changes to existing law relating to long-term care facilities, including long-term care facility oversight and enforcement. (Chapter 685, Statutes of 2001)

AB 1409 (Chan)

Nursing home administrators.

Transfers the authority to regulate the licensure and regulation of nursing home administrators from the Department of Consumer Affairs to the Department of Health Services and makes various technical and conforming amendments including establishing a procedure for a provisional one-year license. (Chapter 687, Statutes of 2001)

AB 1454 (Thomson)

Mental health: facilities: criminal record checks: managed care.

Allows the Department of Mental Health (DMH) to renew contracts with counties or other specified entities for managed mental health care for Medical beneficiaries for a period of up to three years, rather than one year. Requires, prior to the initial licensure of any person to operate or manage specified mental health facilities, DMH to submit fingerprint images and related information pertaining to the applicant or licensee to the Department of Justice (DOJ) for purposes of a criminal record check. Requires, upon the employment of any direct care staff, DMH to submit fingerprint images and related information pertaining to the direct care staff person to DOJ for purposes of a criminal record check. Specifies terms under which DMH is allowed or required to deny employment, licensure, or contracts pursuant to this bill. (Chapter 642, Statutes of 2002)

AB 1643 (Negrete McLeod)

Long-term care facilities: temporary staff.

Establishes standards for temporary staffing agency referrals to long-term care facilities. (Chapter 326, Statutes of 2001)

AB 1946 (Corbett)

Written materials for patients.

Requires specified printed materials that are provided to a patient by an employee or authorized agent on behalf of a general acute care hospital (GAC), a skilled nursing facility (SNF), an intermediate care facility (ICF), a nursing facility (NF), or a residential care facility for the elderly (RCF), to be printed in at least a 12-point font that is clear and legible. Requires upon admission of a patient to a SNF, an ICF, a GAC, or a NF, the facility to ask the patient if he or she would like the facility to provide the patient's next of kin or agent under a durable power of attorney for health care with materials regarding patients' rights and responsibilities. Requires upon the request of the patient, or of the patient's next of kin or agent under a durable power of attorney for health care, a representative of any facility or hospital providing patients' rights information or other documentation described in this bill to explain the materials provided. (Chapter 550, Statutes of 2002)

AB 1989 (Liu)

Care facilities: change in health status: violations: notice.

Requires nursing homes and other long-term care residential facilities to make reasonable efforts to contact specified persons within 24 hours of a significant change in a resident's health or mental status. This requirement applies to skilled nursing facilities, intermediate care facilities, congregate living facilities, and residential care facilities for the elderly. The facility must contact the designated contact person in the resident's admission agreement, or the resident's responsible person. (Chapter 272, Statutes of 2002)

AB 2271 (Aanestad)

Health facilities: licensing and certification requirements.

Requires the Department of Health Services (DHS) to waive any requirements in Title 22 of the California Code of Regulations that are in addition to, or more stringent than, the federal requirements for designation in the federal Medicare Rural Hospital Flexibility Program (MRHFP) for each hospital designated by DHS as a critical access hospital (CAH), and certified as such by the Secretary of the United States Department of Health and Human Services under the federal MRHFP, if DHS finds that it is in the public interest to do so. Permits DHS to adopt regulations to restrict or qualify the waiver of these requirements if DHS finds that it is not in the public interest to waive any requirements in Title 22 of the California Code of Regulations. (Chapter 752, Statutes of 2002)

AB 2352 (Cedillo)

Health facility financing.

Authorizes the California Health Facility Financing Authority (CHFFA) to award grants to any eligible health facility from the California Health Facilities Authority Fund. Requires CHFFA to develop selection criteria, taking into account specified criteria, and a process for awarding grants under this bill. Revises the definitions of "cost," "project," and "health facility," under the California Health Facilities Financing Authority Act (Act). (Chapter 478, Statutes of 2002)

AB 2404 (Reyes)

Mobil health care units.

Prohibits, after the initial licensure, or the initial approval to operate a mobile service unit (MSU), the Department of Health Services (DHS) from requiring each site where an MSU operates to be licensed or approved by DHS, unless the MSU will be operating outside of the proposed area or areas specified in the application to operate an MSU. Prohibits an MSU from operating at any site, unless the site has been reported by the licensee to DHS at least 15 days before the MSU's first visit to the site. Requires, prior to the operation of an MSU at any site for the first time, the licensee to report the site to local authorities for purposes of obtaining any approval required pursuant to a specified provision of law relating to site approval for an MSU. (Chapter 111, Statutes of 2002)

AB 2917 (Chan)

California Health Facility Construction Loan Insurance Law.

Permits a loan under the California Health Facility Construction Loan Insurance Program to be secured by a leasehold interest of the borrower having a term of at least 20 years, including options to renew for that duration, longer than the term of the insured loan. Makes other technical, non-substantive changes. (Chapter 93, Statutes of 2002)

AB 3050 (Committee on Health)

Health facilities.

Makes various technical changes relating to the Office of Statewide Health Planning and Development (OSHPD). Extends the operative date of provisions that require hospital and freestanding ambulatory surgery clinics to file reports containing patient and health data. Permits OSHPD to accelerate bond maturities when a borrower under the Health Facility Construction Loan Insurance Program defaults on an insured loan. (Chapter 351, Statutes of 2002)

AB 3054 (Committee on Aging & Long Term Care)

Long-term care integration pilot projects.

This bill requires the State Department of Health Services to provide at least, but not limited to, one alternative model to the Long-Term Care Integration Pilot Program. (Chapter 537, Statutes of 2002)

ABX2 69 (Bogh)

Public health emergency conditions.

Permits the Governor by executive order, or the Director of the Office of Statewide Health Planning and Development (OSHPD) to suspend enforcement of laws and regulations related to construction, or renovation of existing long-term health care facilities in specified situations. Prohibits this bill from permitting the suspension of the life safety requirements of OSHPD and the Office of the State Fire Marshal, where the suspension would pose a greater danger than the situation caused by the extraordinary condition and the proposed action the licensee seeks to use to mitigate the potential harm or danger. (Chapter 13, Statutes of 2001-02 Second Extraordinary Session)

SB 288 (Speier)

Health facilities: financing.

Includes within the definition of "participating health institution" the Regents of the University of California (UC) for purposes of the California Health Facilities Revenue Bonds (UCSF-Stanford Health Care) 1998 Series A. (Chapter 78, Statutes of 2001)

SB 339 (Ortiz)

Long-term health care facilities: status changes and patient transfers.

Adds to the existing requirements long-term care facilities transferring a patient due to a change in the status of the license or operation of a long-term care facility new requirements, including that the facility be responsible for ensuring that the resident's attending physician, if available, or a facility medical director, if available, completes the medical assessment of the resident's condition. Requires, instead of permits, the Department of Health Services (DHS) to request that the Attorney General's Office or the local district attorney's office seek injunctive relief and damages, if DHS does not provide or arrange for the provision of the necessary relocation services, and the facility refuses to provide the required relocation services. (Chapter 554, Statutes of 2002)

SB 344 (Ortiz)

Health care data reporting.

Requires, commencing March 1, 2002, the Department of Health Services to post specified information (such as Medi-Cal data tables and program applications) on its Internet web site in a manner that does not require downloading, and is likely to be understood by the general public. (Chapter 276, Statutes of 2001)

SB 492 (Scott)

Clinics: licensure exemptions.

Extends the sunset date on an existing law exemption from the prohibition on the corporate practice of medicine and from clinic licensure requirements for a non-profit clinic that meets specified requirements (which describes Huntington Medical Research Institutes) from January 1, 2003 to January 1, 2008. (Chapter 540, Statutes of 2002)

SB 587 (Soto)

Health facilities: critically or terminally ill patients: transfers.

Codifies various existing federal and state statutes and regulations relating to the transfer and discharge of patients from hospitals. Requires a hospital to provide each patient, upon admission or as soon thereafter as reasonably practical, written information regarding specified patient rights including the right to be informed of continuing health care requirements following discharge from a hospital. Requires a copy of the transfer summary that is currently required to accompany a patient upon transfer to a skilled nursing or intermediate care facility, to be given to the patient and the patient's representative, if any, prior to transfer to a skilled nursing facility or intermediate care facility. Permits a hospital to include the information required by this bill with other notices to the patient regarding patient rights.

(Chapter 691, Statutes of 2001)

SB 680 (Figueroa)

Health facility data.

Requires the Office of Statewide Health Planning and Development (OSHPD) to publish risk-adjusted outcome reports for coronary artery bypass graft surgery, requires the existing risk-adjusted outcome reports that OSHPD is required to publish to also report data by individual physician where appropriate, and makes various other changes to the provisions of law requiring OSHPD to publish risk-adjusted outcome reports. (Chapter 898, Statutes of 2001)

SB 801 (Speier)

Health: health facilities and clinics: women, infants, and children's nutrition.

Requires, for purposes of existing law requiring certain hospitals and surgical centers (facilities) to adopt a plan to reduce medication-related errors, that each facility's plan meet specific requirements, including the ability to evaluate, assess and address procedures and systems to identify weaknesses or deficiencies. Delays, by 18 months, the implementation of provisions of law requiring food coupons in the Women, Infants, and Children program to be redeemable by recipients at any authorized retail food vendor, from July 1, 2002, to January 1, 2004. (Chapter 15, Statutes of 2002)

SB 813 (Dunn)

Children's hospitals.

Defines "University of California (UC) children's hospital" as each of the UC children's programs within the five UC academic medical center campuses. (Chapter 290, Statutes of 2001)

SB 1131 (Machado)

Clinical laboratory technology.

Permits clinical laboratories to perform any test for which there is an over-the-counter test kit approved by the federal Food and Drug Administration, upon the request of any person. (Chapter 80, Statutes 2001)

VETOED

AB 1279 (Reyes)

Rural health.

Would have required the Department of Health Services to conduct an evaluation of the status of rural hospitals. Would have required the Managed Risk Medical Insurance Board to expand specified rural demonstration projects to award additional funds to participating community health care centers and other appropriate providers who provide health care services after regular business hours, including evenings or weekends. (Vetoed)

AB 2010 (Richman)

Clinics: consolidated application procedures.

Would have required the Department of Health Services (DHS) to develop a consolidated form under which an applicant for licensure as a primary care clinic is permitted to apply for licensure and for a Medi-Cal provider identification number. Would have required DHS to develop and implement a consolidated application form under which specified clinics are permitted to apply to become a provider under specified health programs. (Vetoed)

AB 2124 (Aanestad)

Skilled nursing facilities: continuous licensure

Would have authorized the Department of Health Services to retroactively suspend the canceled license of specified previously licensed skilled nursing facilities for the purpose of finding the facility to be continuously licensed and in compliance with current regulations. (Vetoed)

SB 1804 (Escutia)

Skilled nursing and intermediate care facilities: criminal record checks.

Would have applied existing provisions of law relating to background checks required for the management and direct care staff for specified intermediate care facilities, to skilled nursing facilities. Would have required background checks for facility workers newly employed at the facility either directly through a vendor, contractor, or third party. Would have required it to be unlawful for an employer to deduct from the wages earned by an employee, or to require an employee to pay, the fees associated with obtaining any required background investigation and clearance. (Vetoed)

SB 2027 (Figueroa)

Hospital licensing.

Would have prohibited the Department of Health Services from issuing a license for a new general acute care hospital to be located within the boundaries of a local health care district which meets the criteria describing Washington Township Health Care District unless the applicant's hospital agrees to meet specified criteria. These provisions would have sunset January 1, 2005. (Vetoed)

HEALTHY FAMILIES PROGRAM

AB 495 (Diaz)

Health care coverage.

Establishes the Children's Health Initiative Matching Fund and requires the Managed Risk Medical Insurance Board to administer the fund and the provisions of this bill in collaboration with the Department of Health Services for the express purpose of allowing local funds to be used to facilitate increasing the state's ability to utilize federal funds available to California. Permits specified governmental entities to submit a proposal for funding for the purpose of providing comprehensive health insurance coverage to any child who meets specified criteria, including the child's family income being at or below 300 percent of the federal poverty level in specific geographic areas, as published quarterly in the Federal Register by the Department of Health and Human Services. (Chapter 648, Statutes of 2001)

SB 59 (Escutia)

Healthy Families Program.

Requires the Managed Risk Medical Insurance Board (MRMIB) to report to the Legislature recommendations on innovative methods for addressing health needs of vulnerable children. Requires MRMIB to seek input from the Healthy Families Advisory Panel and stakeholder organizations. Requires federal financial participation for implementation. (Chapter 800, Statutes of 2002)

SB 283 (Speier)

Health families program.

Expands the role of health plans in providing application assistance to Medi-Cal and Healthy Families Program applicants and in assisting in beneficiary retention. (Chapter 667, Statutes of 2002)

SCR 35 (Perata)

Children's Health Insurance Month.

Proclaims September 2001 as Children's Health Insurance Month, and encourages outreach to increase enrollment of children in the Healthy Families Program and the Medi-Cal Program in order to help California attain the goal of providing health care to every eligible child. (Resolution Chapter 104, Statutes of 2001)

VETOED

SB 336 (Ortiz)

Health care programs: eligibility

Would have limited independent documentation by Medi-Cal and Healthy Families Program (HFP) applicants and recipients to that required by federal law with specified exceptions. Would have revised the definition of an unemployed parent for purposes of Medi-Cal eligibility. And would have required implementation of most provisions of this bill upon implementation of the HFP parent expansion waiver. (Vetoed)

HIV/AIDS AND COMMUNICABLE DISEASES

AB 453 (Correa)

Department of Justice: DNA testing: infectious disease: employee contact.

Permits a forensic scientist who comes into contact with blood or other bodily fluids while handling forensic evidence, to petition the court to have the existing forensic evidence tested for HIV and other communicable diseases. (Chapter 482, Statutes of 2001)

AB 1046 (Migden)

Sharps injury prevention.

Requires the Department of Health Services to maintain a Sharps Injury Control program that meets specified requirements. (Chapter 370, Statutes of 2001)

AB 1263 (Migden)

Aids: HIV rapid testing programs.

Permits DHS, through the Office of AIDS, to participate in and implement rapid human immunodeficiency virus test (Rapid HIV test) research program. Requires one or more additional independent tests to be performed for those patients who test reactive to an initial Rapid HIV test made pursuant to this bill. (Chapter 324, Statutes of 2001)

AB 2064 (Cedillo)

Human immunodeficiency virus tests: counselors: training.

Requires the Department of Health Services to authorize the establishment of training programs throughout the state for counselors for publicly funded human immunodeficiency virus (HIV) testing programs, and requires the training programs to be conducted by community-based, nonprofit organizations with demonstrated expertise in providing free, anonymous or confidential HIV testing services. (Chapter 273, Statutes of 2002)

AB 2423 (Cardenas)

Health: exposure to communicable diseases: first responders.

Expands provisions of law permitting available samples of blood of a source patient to be tested for human immunodeficiency virus (HIV) when an individual is exposed to the blood of a source patient in the course of providing health care services by broadening the definition of "available sample" of blood, and by allowing the available sample to be tested for communicable diseases, as defined, rather than just for HIV. (Chapter 342, Statutes of 2002)

AB 2994 (Wright)

Human immunodeficiency virus (HIV) reporting requirements

Requires the Department of Health Services (DHS) to determine whether California's HIV reporting system complies with standards necessary to ensure continued federal funding. Requires DHS to inform the Legislature of its determination by December 31, 2005, and to report all communications from the federal Centers for Disease Control and Prevention that indicate California's HIV reporting system will not meet the federal standards for an HIV reporting system. (Chapter 926, Statutes of 2002)

VETOED

AB 2930 (Wright)

Human immunodeficiency virus (HIV): maternal and newborn health.

Would have required the blood specimen obtained from a pregnant patient pursuant to existing law to be tested for HIV, and would have required the attending provider, prior to obtaining the blood specimen, to ensure that the woman is informed of the intent to perform a test for HIV and that the woman has a right to refuse this testing. (Vetoed)

LONG-TERM CARE INSURANCE

SB 1613 (Dunn)

Long-term care insurance

Makes various non-controversial conforming amendments relating to long-term care insurance including prohibiting anything in a specified provision of law relating to insurer filing requirements for premium rate schedules and new policy forms for long-term care insurance policies, from being construed as prohibiting an insurer from filing new policy forms, or from relieving an insurer of the obligation to file these forms, with the Insurance Commissioner after January 1, 2003. (Chapter 675, Statutes of 2002)

VETOED

AB 1451 (Liu)

Long-term care insurance.

Would have required the Secretary of the California Health and Human Services Agency to establish and chair a Long-term Care Financing Task Force (task force) and would have required the task force to report to the Legislature by September 1, 2002 on alternatives to long-term care insurance for individuals to finance long-term care. (Vetoed)

MANAGED CARE AND HEALTH INSURANCE

AB 207 (Matthews)

Health insurance: prescription drug benefits: identification cards.

Requires health plans that cover prescription drug benefits to issue a uniform prescription identification card, if the health plan issues a card for claims processing purposes. (Chapter 622, Statutes of 2001)

AB 424 (Thomson)

Health insurance: conversion coverage.

Sunsets specified existing Insurance Code requirements for conversion coverage September 1, 2003 if AB 1401 (Thomson) and AB 424 are both enacted on or before January 1, 2003. (Chapter 799, Statutes of 2002)

AB 532 (Cogdill)

Health care service plans: operation in rural areas.

Requires the Legislative Analyst's Office (LAO) to study the operation of health care service plans in rural areas of this state, and requires the LAO to report to the Legislature and the Department of Managed Health Care on or before July 1, 2002 regarding the reasons health care service plans have discontinued their operations in those areas and recommending incentives for health care service plans to resume operating in rural areas. (Chapter 208, Statutes of 2001)

AB 938 (Cohn)

Health care service plans: contracting providers: lists.

Requires a health care service plan (health plan) to provide, upon request, a list of specified contracting health care providers within the enrollee's or prospective enrollee's general geographic area, and adds additional information that health plans must provide on an existing disclosure form. (Chapter 817, Statutes of 2001)

AB 1178 (Calderon)

Insurance: Senior Citizens.

Requires disability insurers that issue policies or certificates using direct response methods to include questions in the application to determine if the prospective insured is 65 years of age or older, and whether that individual is covered by Medi-Cal or a Medicare supplement policy. Requires these insurers to provide a comparison with the prospective insured's existing health coverage, and a specified informational brochure, as early in the transaction as possible, but not later than the delivery of the policy or certificate. (Chapter 51, Statutes of 2001)

AB 1282 (Cardoza)

Health care service plans

Requires the Department of Managed Health Care to adopt regulations that establish an extended geographic accessibility standard for access to health care providers served by a health care service plan (health plan) in counties with a population of 500,000 or less. Requires a health plan to hold a public meeting in a county with a population of 500,000 or less from which it intends to withdraw. (Chapter 549, Statutes of 2002)

AB 1401 (Thomson)

Health benefit coverage.

Provides 36 months of Cal-COBRA coverage to individuals with less than that length of coverage under COBRA or Cal-COBRA, and creates a four-year pilot program to provide coverage to the medically uninsurable by implementing changes in the Major Risk Medical Insurance Program and the private individual health insurance market. (Chapter 794, Statutes of 2002)

AB 1503 (Nation)

Health care service plans: mental health.

Requires health plans that offer mental health services to file with the Department of Managed Health Care a written policy describing how the health plan facilitates the continuity of care for new enrollees who have been receiving services for an acute, serious, or chronic condition from a nonparticipating mental health

professional when the enrollee's employer has changed health plans, and requires the written policy to allow the new enrollee a reasonable transition period to continue his or her course of treatment with the nonparticipating provider prior to transferring to another participating provider. (Chapter 531, Statutes of 2001)

AB 1996 (Thomson)

University of California: analysis of legislation mandating health care benefits and services.

Requests the University of California (UC) to assess legislation proposing a mandated benefit or service, and to prepare a written analysis with relevant data on the public health, medical and economic impact of proposed health care service plan (health plan) and health insurance benefit mandate legislation. Requires, for fiscal years 2002-03 to 2005-06, health plans and insurers to be assessed an annual fee in an amount determined through regulation to fund the actual and necessary expenses of UC in implementing this bill, and caps the total annual assessment on health plans and insurers at \$2 million. Sunsets the provisions of this bill January 1, 2007. (Chapter 795, Statutes of 2002)

AB 2052 (Goldberg)

Health care service plans and health insurance: group contract or policy rate changes.

Prohibits a group health care service plan or a group health insurer from changing the premium rates or applicable co-payments or deductibles upon renewal of an in-force contract for the length of the contract after certain circumstances have been met, except as specified. (Chapter 336, Statutes of 2002)

AB 2085 (Corbett)

Health care.

Requires every health care service plan (health plan) with a Web site to provide an online form through its Web site that subscribers or enrollees can use to file with the plan a grievance online. Requires every health plan to provide for a written acknowledgment within five calendar days of the receipt of a grievance, except as specified. (Chapter 796, Statutes of 2002)

AB 2178 (Goldberg)

Health care.

Extends the requirements placed on health care service plans and health insurers (health plans) selling to small employers, which currently apply to health plans selling to employers with two to 50 eligible employees, to health plans selling to an employer subject to a local living wage law. (Chapter 649, Statutes of 2002)

AB 2179 (Cohn)

Health care coverage.

Requires the Department of Managed Health Care and the Department of Insurance to develop and adopt regulations to ensure that enrollees have access to needed health care services. (Chapter 797, Statutes of 2002)

AB 2420 (Richman)

Health care service plans.

Prohibits a health care service plan (health plan) contract from requiring or allowing a health care provider to assume or be at any financial risk for specified medications. Permits a health care provider to assume financial risk for those same specified medications after making the request in writing at the time of negotiating an initial contract or renewing a contract with a health plan. (Chapter 798, Statutes of 2002)

AB 2551 (Nation)

Health care: mental health.

Clarifies prior legislation relating to continuity of mental health care when an enrollee's employer changes health plans. (Chapter 276, Statutes of 2002)

AB 2907 (Cohn)

Provider contracts.

Establishes a "Health Care Providers Bill of Rights." Prohibits certain provisions in contracts between a health care service plan or a health insurer and a health care provider. (Chapter 925, Statutes of 2002)

AB 3048 (Committee on Health)

Health care.

Conforms the pre-existing condition exclusion provisions used in the Major Risk Medical Insurance Program (MRMIP), which currently apply to health plans and insurers in the private health insurance market, to MRMIP. (Chapter 760, Statutes of 2002)

AJR 27 (Oropeza)

Social HMO's.

Urges the President and Congress, the federal Department of Health and Human Services, and the Centers for Medicare and Medicaid Services to perform specified actions including affirming the intent of the social HMO (S/HMO) program to provide services for frail and chronically ill seniors, and fully supporting the transition of the S/HMO demonstration into a permanent benefit option as part of Medicare+Choice. (Resolution Chapter 29, Statutes of 2002)

SB 37 (Speier)

Health insurance: coverage for clinical trials.

Requires health plans, health insurers and Medi-Cal to provide coverage for all routine patient care costs related to a clinical trial for an individual diagnosed with cancer who is accepted into a Phase I, Phase II, Phase III, or Phase IV cancer clinical trial. (Chapter 172, Statutes of 2001)

SB 398 (Chesbro)

Health care service plans: bankruptcy

Requires a health care service plan to meet and confer with the Department of Managed Health Care (DMHC) prior to filing a petition commencing a case for bankruptcy under Title 11 of federal law. Incorporates the provisions of AB 1282 (Cardoza), with certain exceptions. (Chapter 928, Statutes of 2002)

SB 446 (Vasconcellos)

Health care coverage: AIDS vaccine.

Requires every individual or group health plan contract that is issued, amended, or renewed on or after January 1, 2002, that covers hospital, medical, or surgery expenses and a CalPERS plan or contract to provide coverage for a vaccine for acquired immune deficiency syndrome that is approved for marketing by the federal Food and Drug Administration and that is recommended by the United States Public Health Service. (Chapter 634, Statutes of 2001)

SB 454 (Committee on Insurance)

Insurance.

Defines the term "health insurance" as a disability insurance policy that provides coverage for hospital, medical, or surgical benefits but does not include certain kinds of insurance. (Chapter 277, Statutes of 2001)

SB 455 (Committee on Insurance)

Health care. Cleanup legislation.

Makes various technical and conforming amendments relating to changes made by various statutes from the 1999-2000 session, including requiring the Department of Insurance (Department) to report a business, and any physician and surgeon suspected of knowingly providing medical services for that business to the appropriate regulatory agency if the Department has evidence that the business is being operated in violation of specified current law relating to the ownership and operation of medical entities and professional corporations and false or fraudulent insurance claims. (Chapter 328, Statutes of 2001)

SB 686 (Ortiz)

Health care service plans.

Changes the statutory assessment formula used to fund the Department of Managed Health Care beginning July 1, 2003. (Chapter 790, Statutes of 2002)

SB 842 (Speier)

Health care: prescription drug benefits.

Makes a legislative finding that in enacting specified provisions of existing law requiring health plans to cover prescription drugs for specific conditions that it did not intend to limit the Department of Managed Health Care's (DMHC) authority to regulate the provision of medically necessary prescription drug benefits to the extent that the plan provides coverage for those benefits. Requires DMHC to develop a regulation outlining the standards to be used in reviewing a health plan's request for approval of its proposed copayment, deductible, limitation, or exclusion on its prescription drug benefits. (Chapter 791, Statutes of 2002)

SB 1092 (Sher)

Health care service plans

Requires the adoption of regulations by the director of the Department of Managed Health Care to establish the Consumer Participation Program, which would allow the awarding of reasonable advocacy and witness fees to any person who meets specified criteria who has made a substantial contribution on behalf of consumers to the adoption of any regulation, order or decision made by the director. Sunsets this bill January 1, 2007. (Chapter 792, Statutes of 2002)

SB 1219 (Romero)

Health coverage: cervical cancer screening test.

Requires the coverage for an annual cervical cancer screening test provided pursuant to existing law to include the conventional Pap test and the option of any cervical cancer screening test approved by the federal Food and Drug Administration. (Chapter 380, Statutes of 2001)

SB 1411 (Speier)

Health care coverage: maternity services.

Prohibits a health care service plan and a health insurance contract that provides maternity coverage from containing a copayment or deductible for inpatient hospital, or ambulatory care maternity services that exceeds the most common

amount of the copayment or deductible contained in the contract for inpatient or ambulatory care services provided for other covered medical conditions. (Chapter 880, Statutes 2002)

SB 1531 (Speier)

Health care coverage.

Expands open enrollment requirements for Medicare supplemental insurance policies and plans (Medigap policies), including Medicare Select. (Chapter 555, Statutes of 2002)

SB 1877 (Johnson)

Health care.

Makes permanent in the body of law regulating health insurers and health care service plans (health plans) that provide coverage to small employers a provision authorizing health plans to contract with a qualified association that meets certain criteria under which the association or its third-party administrator may assume responsibility for performing specific administrative services, subject to various restrictions. Under existing law, the authorization for contracting with qualified associations sunsets January 1, 2003. (Chapter 227, Statutes of 2002)

SB 1880 (Machado)

Insurance: multiple employer welfare arrangements.

Makes permanent the body of law requiring self-funded or partially self-funded multiple employer welfare arrangements (MEWAs) to receive a certificate of compliance from the Insurance Commissioner and that requires MEWAs to meet other specified requirements. Increases the surplus MEWAs must maintain to \$4 million by January 1, 2007. (Chapter 357, Statutes of 2002)

SB 1913 (Committee on Insurance)

Department of Managed Health Care and Department of Insurance: joint working group.

Requires the Department of Managed Health Care and the California Department of Insurance to maintain a joint senior level working group. (Chapter 793, Statutes of 2002)

SB 1914 (Committee on Insurance)
Health.

Authorizes the Office of HIPAA Implementation to determine which provisions of state law related to personal medical information are pre-empted by the federal Health Insurance Portability and Accountability Act. (Chapter 489, Statutes of 2002)

VETOED

AB 142 (Richman)
Health care service plans.

Would have prohibited a health care service plan contract from requiring or allowing a health care service provider to assume or be at any financial risk for any specified medications and adult vaccines, when covered under the applicable plan contract. (Vetoed)

AB 937 (Koretz)
Health care: HIV treatment: reimbursement.

Would have required health care service plans that cover hospital, medical and surgical expenses, (health plans) to consider specified factors when developing rates for the reimbursement of providers and primary case management programs for the treatment of enrollees infected with human immunodeficiency virus HIV. Would have required the Department of Health Services for the Medi-Cal program, to develop risk-adjusted, capitated provider reimbursement rates for the treatment of HIV infected enrollees. (Vetoed)

AB 2739 (Chan)
Health care coverage: multilingual information and services.

Would have required the Managed Risk Medical Insurance Board (MRMIB), in the case of the Healthy Families Program (HFP), and the Department of Health Services (DHS), in the case of Medi-Cal managed care (MCMC), to ensure that each contracting health plan provides language assistance services. Would have

required each health plan that contracts with HFP or MCMC to develop and implement specified policies and procedures for ensuring access to interpretation services for all limited English proficient beneficiaries, and would have required compliance by any subcontracted providers with these requirements. Would have required annual reports from each contracting health plan to MRMIB. (Vetoed)

SB 117 (Speier)

Health care service plans. Reimbursement of provider claims.

Would have modified an existing requirement when a health plan fails to pay an uncontested completed claim within 30 or 45 working days by requiring the plan to pay the greater of \$15 each 365-day period or portion thereof or interest at the rate of 15% per annum, each of these time periods. (Vetoed)

MEDICAL INFORMATION AND PRIVACY

AB 213 (Nation)

Mental health: records: licensed marriage and family therapists.

Adds licensed marriage and family therapists to the list of providers who may approve the disclosure of information and records relating to services provided to mentally disordered and developmentally disabled patients, in instances when the provider's patient designates persons to whom information or records may be released. (Chapter 37, Statutes of 2001)

AB 1311 Goldberg

Medical records: access.

Requires any patient to be entitled to a copy, at no charge, of the patient's medical records, upon presenting to the provider a written request and proof that the records are needed to support a claim or appeal regarding eligibility for public benefit programs. Requires health care providers to ensure that the copies are transmitted within 30 days of receiving the request. (Chapter 325, Statutes of 2001)

AB 1490 (Thomson)

Health records: delivery of laboratory test results by Internet posting.

Permits the results of laboratory tests to be provided to the patient by Internet posting, if requested by the patient and if deemed most appropriate by the health care professional who requested the test. (Chapter 590, Statutes of 2001)

AB 1872 (Canciamilla)

Vital records: certificate of death: mass fatalities incident.

Establishes an expedited process for obtaining death certificates for victims in the event of a mass fatality incident. Defines a mass fatalities incident to mean a situation in which any of the conditions specified by the bill exist including there are more dead bodies than can be handled using local resources. (Chapter 717, Statutes of 2002.)

AB 2191 (Migden)

Medical records: confidentiality.

Expands the Confidentiality of Medical Information Act to include pharmaceutical companies in the same manner and to the same extent as it includes providers of health care and health care service plans. (Chapter 853, Statutes of 2002)

AB 2550 (Nation)

Electronic death registration.

Requires, on or before January 1, 2005, the Department of Health Services to implement an Internet-based electronic death registration system. (Chapter 857, Statutes of 2002)

SB 683 (Ortiz)

Public health information confidentiality.

Provides for the confidentiality of information reported to the California Cancer Registry and the Birth Defects Monitoring Program. (Chapter 444, Statutes of 2001)

SJR 3(Karnette)

Reproductive rights: Roe v. Wade.

Memorializes the President and Congress of the United States to take necessary action to preserve the integrity of the United States Supreme Court decision in Roe v. Wade. (Resolution Chapter 112, Statutes of 2001)

MEDI-CAL PROGRAM

AB 59 (Cedillo)

Health programs: eligibility.

Requires the Department of Health Services, to deem any child who is less than six years of age and who has been determined to be eligible for free meals under the National School Lunch Program (SLP) to have met the income eligibility requirements for participation in the Medi-Cal program, without a share of cost. Establishes a statewide pilot project to expedite Medi-Cal enrollment for children receiving free lunches through the National SLP. Permits, effective July 1, 2002, school districts and county superintendents of schools to implement a process to share information provided on the National SLP application with the local agency that determines eligibility under the Medi-Cal program. Establishes various requirements regarding the sharing and use of this information. (Chapter 894, Statutes of 2001)

AB 275 (Aroner)

Medi-Cal: developmentally disabled: dental care.

Requires information to be provided to the fiscal and policy committees of the Legislature by the Department of Health Services describing the characteristics of dental services received by Medi-Cal beneficiaries who are eligible to receive dental services under the Lanterman Developmental Disability Services Act. (Chapter 522, Statutes of 2002)

AB 574 (Salinas)

Medi-Cal: overpayment forgiveness.

Authorizes the Department of Health Services to forgive Medi-Cal overpayment liabilities and negotiate Medi-Cal overpayment settlements, for a hospital that meets specified criteria, including being located in either Kern or Monterey County. (Chapter 649, Statutes of 2001)

AB 915 (Frommer)

Medi-Cal provider reimbursement

Allows local public agencies and public health facilities to use local funds to obtain federal financial participation for supplemental Medi-Cal reimbursements for hospital outpatient services and adult day health services. (Chapter 747, Statutes of 2002)

AB 963 (Cardoza)

Medi-Cal Reimbursement: County Owned Clinics.

Requires a Stanislaus County-operated community clinic that is exempt from licensure and which was prior to November 30, 1997, a county-operated hospital with an outpatient department to receive Medi-Cal payments for the use of its examining and treatment rooms. Permits Stanislaus County to establish a program for an all-inclusive rate payment process for Medi-Cal outpatient services rendered by the county, and requires the Department of Health Services (DHS) to enter into appropriate contracts to implement the program. (Chapter 526, Statutes of 2001)

AB 1914 (Kehoe)

Hearing aids

Codifies Medi-Cal regulations relating to the coverage of hearing aids, and requires Medi-Cal coverage to include one hearing aid assessment within a 12-month period as a covered benefit. (Chapter 704, Statutes of 2002)

AB 2132 (Matthews)

Medi-Cal: medical supplies: contracts.

Requires Department of Health Services to enter into demonstration contracts with manufacturers of medical supplies for four items of medical supplies for the Medi-Cal program. (Chapter 751, Statutes of 2002)

AB 2197 (Koretz)

Medi-Cal: benefits for persons infected with HIV who are not disabled.

Requires the Department of Health Services (DHS) to expand eligibility for Medi-Cal benefits, with the exception of prescription drug benefits provided by the AIDS Drug Assistance Program (ADAP) to persons with HIV who are, and remain, enrolled in ADAP and who are not disabled, but who, if disabled, would qualify for Medi-Cal benefits. Requires DHS to develop an allocation method so that eligible individuals can be enrolled in this program on a first-come, first-served basis. (Chapter 684, Statutes of 2002)

AB 2364 (Negrete-McLeod)

Medi-Cal: study.

Requires the Legislature to commission a study on how the administration of the Medi-Cal program might be simplified. (Chapter 452, Statutes of 2002)

AB 2674 (Chu)

Medi-Cal: federally qualified health centers: primary care providers.

Requires any Medi-Cal Managed Care enrollee who selects, or is assigned to, a federally qualified health center (FQHC) or rural health clinic (RHC), or to an employee of either, to be assigned directly to the FQHC or RHC, and not to any individual provider performing services on behalf of the FQHC or RHC. Requires reports related to participation of FQHCs and RHCs in Medi-Cal Managed Care. (Chapter 756, Statutes of 2002)

AJR 43 (Robert Pacheco)

Federal Medicaid Assistance Percentages.

Memorializes the President and Congress to take into consideration the significant numbers of low-income Californians and to alter the current formula for calculating the federal share of Medicaid costs allocated to each state under the federal Medicaid Assistance Percentages (FMAP). (Resolution Chapter 100, Statutes of 2002)

SB 231 (Ortiz)

Medi-Cal: local education agency services.

Requires the Department of Health Services (DHS) to amend the Medicaid state plan with respect to the billing option for services by Local Education Agencies to ensure that schools are reimbursed for all eligible services they provide that are not precluded by federal requirements. Requires DHS to regularly consult with specified entities to assist in the formulating of the state plan amendments. Permits DHS to enter into a sole source contract to comply with the requirements of this bill. Authorizes DHS to undertake all necessary activities to recoup matching funds from the federal government for reimbursable services that have already been provided in the state's public schools. (Chapter 655, Statutes of 2001)

SB 493 (Sher)

Health programs.

Requires the Department of Health Services, in conjunction with the Department of Social Services, to implement a simplified eligibility process as part of the Food Stamps Program to expedite Medi-Cal and Healthy Families enrollment. Requires county welfare departments to develop a data list of individuals on food stamps who are eligible but not enrolled in Medi-Cal or Healthy Families, and send a notice to the individuals at the time of annual recertification. Requires county welfare departments to make a Medi-Cal eligibility determination by utilizing the information in the food stamp recipient's case file, upon return of a signed and dated notice requesting application to Medi-Cal. Requires information pertinent to the food stamp recipient's eligibility for the Healthy Families Program (HFP) to be forwarded to the HFP administrator for processing, if the food stamp recipient is determined to be eligible for Medi-Cal with a share of cost or ineligible for Medi-Cal. (Chapter 897, Statutes of 2001)

SB 613 (Alarcon)

Medi-Cal: notifications to managed care plans.

Requires the Department of Health Services (DHS) to prospectively notify a Medi-Cal managed care plan of the date of the regularly scheduled annual redetermination of a Medi-Cal beneficiary in a disabled aid category who is enrolled in that plan and where eligibility redetermination is the responsibility of DHS. Prohibits anything in this bill from providing a beneficiary with additional

Medi-Cal coverage due to DHS's failure to provide this notice. (Chapter 742, Statutes of 2001)

SB 1493 (Alpert)

Medi-Cal: reimbursement procedures.

Permits the Department of Health Services (DHS) to negotiate or renegotiate settlements with any acute care in San Diego County that has a distinct part pediatric convalescent facility and that has violated any Medi-Cal reimbursement policy or procedure governing the operation of acute care hospitals (intended to describe San Diego Children's Hospital and Health Care Center). Permits DHS to waive all or part of any overpayment made to any acute care hospital above that would otherwise be reimbursable to DHS by that acute care hospital in any settlement negotiated or renegotiated pursuant to this bill. Takes effect immediately as an urgency statute. (Chapter 486, Statutes 2002)

SB 1633 (Soto)

Medi-Cal: transfer of property interest: notice.

Requires the Department of Health Services to provide any applicant who is aged, blind or disabled, at the time of application, a clear and simple disclosure statement that explains the circumstances in which a Medi-Cal beneficiary can transfer home ownership for less than fair market value without affecting Medi-Cal eligibility. (Chapter 556, Statutes 2002)

VETOED

AB 843 (Chan)

Medi-Cal: newborn children: electronic enrollment.

Would have required the Department of Health Services, when sufficient funding is available, to develop an electronic process to confirm information regarding the Medi-Cal eligibility of a newborn child whose mother was receiving Medi-Cal benefits on the newborn's date of the birth. Would have created the Newborn Children Electronic Confirmation Fund in the State Treasury to receive non-state funds for purposes of funding the provisions of this bill. (Vetoed)

AB 2305 (Mountjoy)

Medi-Cal: information for beneficiaries.

Would have required the Department of Health Services (DHS) to provide all applicants for benefits under the Medi-Cal program with clear information as to the coverage and services provided under the Medi-Cal program and of the requirements necessary to access those services. Would have required DHS to inform applicants of potential liabilities that may accrue against the beneficiary's estate, upon his or her death, for services and benefits under the Medi-Cal program. (Vetoed)

AB 2795 (Salinas)

Medi-Cal: prior authorization.

Would have required the Department of Health Services (DHS), when DHS denies a treatment authorization request for inpatient acute hospital services, to cite in the written denial notice the medical criteria used, how the criteria were applied, and how the denial was determined. Would have required DHS to include sufficient clinical rationale to provide the basis for a response by the health care provider if an appeal is made of the denial. Would have prohibited DHS from citing only that the services were not medically necessary. Would have required DHS, when relevant, to cite the discharge criteria used to determine that a patient no longer needs acute care. Stated that this bill not be interpreted to change the scope of Medi-Cal program benefits or coverage and not be applied to Medi-Cal managed care. And would have required DHS to investigate other options for streamlining the Medi-Cal prior authorization process. (Vetoed)

SB 833 (Ortiz)

Medi-Cal program: eligibility.

Would have required the Department of Health Services, by March 1, 2002, to submit a state plan amendment basing the definition of unemployment for purposes of Medi-Cal eligibility on the net nonexempt earned income of the principal wage earner only, and increasing the income level to 200 percent of the federal poverty level for the family size. (Vetoed)

SB 1413 (Chesbro)

Medi-Cal.

Would have enacted into law requirements for the Department of Health Services to implement specified Medi-Cal payment methodologies for federally qualified health centers and rural health clinics that comply with federal law. (Vetoed)

SB 1418 (Johannessen)

Medi-Cal: applications.

Would have required the Department of Health Services to approve or deny a provider's Medi-Cal application for enrollment or certification within 120 days after receiving a completed application. (Vetoed)

SB 1644 (Poochigian)

Medi-Cal: annual review of rates.

Would have required the Department of Health Services, when performing its annual Medi-Cal physician reimbursement levels, to take into account, in addition to other required factors, the adequacy of Medi-Cal reimbursement rates for physician and dental services in communities that serve disproportionately higher Medi-Cal populations than the average community. (Vetoed)

SB 1767 (Perata)

Medi-Cal: plan enrollment eligibility.

Would have permitted the Department of Health Services to undertake efforts to provide opportunities for voluntary enrollment in managed care plans and primary care case management plans for any individual who is eligible for share-of-cost Medi-Cal, notwithstanding any other provision of law. (Vetoed)

MEDICARE

ACR 202 (Corbett)

Seniors bill of rights.

Resolves that the goal of the Legislature is to assure that every senior in California receive the best health care possible, and specifies various health care rights for seniors to this end. (Resolution Chapter 119, Statutes of 2002)

AJR 49 (Aroner)

Home health care.

Memorializes the President and the Congress of the United States to enact legislation to ensure that Medicare home health care recipients are guaranteed the best care, and that home health providers are not further harmed by regulation and administrative changes. States that the Legislature opposes the 15% cut in home health payments scheduled for October 1, 2002. (Resolution Chapter 149, Statutes of 2002)

SJR 34 (Speier)

Oral cancer drugs.

Memorializes the President and Congress to adopt legislation requiring the Medicare program to cover all oral anticancer drugs. (Resolution Chapter 55, Statutes of 2002)

MENTAL HEALTH

AB 328 (Salinas)

Mental health realignment: reports

Requires the Department of Mental Health to work cooperatively with the California Mental Health Directors Association and other relevant parties to submit specified data on the current status of the county mental health programs. (Chapter 367, Statutes of 2001)

AB 334 (Steinberg)

Mental health funding: local grants.

Expands what may be included as outreach to families in Department of Mental Health (DMH) service standards for county mental health programs and includes outreach to adults voluntarily or involuntarily hospitalized due to a severe mental illness. Requires specified individuals to be considered as early intervention clients, and requires them to be served in a special program. Defines the training, consultation, and technical assistance that DMH is currently required to provide to counties. Requires the evaluation DMH is currently required to report to the Legislature to include information regarding the effectiveness and success of the strategies in providing outreach and reducing homelessness. Requires a proposal by a city or county to establish or expand a program be reviewed by a "local advisory committee". Requires the "local advisory committee" to include specified individuals. (Chapter 454, Statutes of 2001)

AB 590 (Vargas)

Mental health: adults and older adults.

Encourages the Department of Mental Health to provide a mental health care provider with training and experience in geriatrics to oversee, monitor, and provide advice to participating counties regarding services for older adults under the counties' mental health system of care developed under the Adult and Older Adults Mental Health Systems of Care Act. (Chapter 677, Statutes of 2001)

AB 1421 (Thomson)

Mental health: involuntary treatment.

Permits counties to provide court-ordered outpatient treatment services for people with serious mental illnesses when a court finds that a person's recent history of hospitalizations or violent behavior, coupled with noncompliance with voluntary treatment, indicate the person is likely to become dangerous or gravely disabled without the court-ordered outpatient treatment. Sunsets this bill January 1, 2008. (Chapter 1017, Statutes of 2002)

AB 1424 (Thomson)

Mental health: involuntary treatment.

Makes various changes to the Lanterman-Petris-Short Act and prohibits health plans and disability insurers from using the voluntary or involuntary status of a psychiatric inpatient admission in determining eligibility for claim reimbursement. (Chapter 506, Statutes of 2001)

AB 2044 (Salinas)

Mental health realignment: reports.

Extends the deadline of a report that the Department of Mental Health is currently required to prepare relating to the current structure and status of the financing of mental health services through realignment, from April 1, 2002 to October 1, 2002. Declares this bill as an urgency measure to go into immediate effect. (Chapter 648, Statutes of 2002)

AB 2057 (Steinberg)

Mental health services.

Requires the Department of Mental Health, in its annual May 1st report to the Legislature on demonstration grant programs for mentally ill homeless adults, to evaluate the effect of these programs on the utilization of medical services. (Chapter 337, Statutes of 2002)

ACR 172 (Koretz)

Postpartum Mood and Anxiety Disorder Awareness Month.

Proclaims the month of May 2002 as "Postpartum Mood and Anxiety Disorder Awareness Month" in California. (Resolution Chapter 91, Statutes of 2002)

SB 639 (Ortiz)

Alzheimer's disease and related disorders: demonstration projects.

Requires the Health and Human Services Agency (HHS) to develop a strategic plan for improving access to mental health services for people with Alzheimer's Disease or related dementia.

Would have appropriated \$85,000 from the General Fund to HHSA to develop the strategic plan and specified that this bill is only to be implemented to the extent that funds are appropriated for this purpose, but the Governor line item vetoed this funding and directed HHS to develop the strategic plan within existing resources. (Chapter 692, Statutes 2001)

SB 1448 (Chesbro)

Deceased residents of state hospitals and developmental centers.

Requires the Department of Mental Health (DMH) to perform specified actions in coordination with the task force established by this bill, and other specified entities, including conducting and completing inventories of all materials and records necessary to create the most complete record of persons who died while residing at any state hospital, or any developmental center. Requires DMH to establish a task force to provide leadership and direction in carrying out the activities described in this bill. (Chapter 440, Statutes 2002)

SB 1911 (Ortiz)

Children's mental health.

Requires the Department of Mental Health to develop, in consultation with specified entities an analysis of the increased federal funding, savings to the General Fund and the county mental health system, and improvements that could

be realized to specified programs for the provision of mental health services by applying for a federal medicaid waiver or by adopting a state option to provide home-and community-based services, to children with mental health care needs. (Chapter 887, Statutes of 2002)

VETOED

AB 1156 (Aroner)

Mental health: community treatment facilities: program standards: seclusion and restraints.

Would have aligned regulations governing emergency interventions for Community Treatment Facilities with those that exist for foster care group homes. (Vetoed)

AB 1422 (Thomson)

Mental health advocacy.

Would have created the California Mental Health Advocacy Commission for five years to promote improved access to mental health services and combat stigma and discrimination against people with mental illness. (Vetoed)

AB 2296 (Simitian)

Mental health: simplification of accounting and reporting requirements.

Would have required the Department of Mental Health (DMH) to examine problematic reporting requirements imposed by local mental health agencies and DMH on community mental health service providers. (Vetoed)

AB 2740 (Chan)

Children's mental health: county grant program.

Would have required the Department of Mental Health to develop and implement a grant program to encourage each county to voluntarily develop a plan to identify and address any children's mental health services that are needed in that county. (Vetoed)

ORGANS, BLOOD AND TISSUES

SB 1135 (Polanco)

Tissue banks.

Requires the Department of Health Services to adopt regulations governing tissue banks engaged in the collection of specified tissue, skin and veins on or before July 1, 2004. (Chapter 929, Statutes 2002)

PRESCRIPTION DRUGS/DIETARY SUPPLEMENTS

AB 809 (Salinas)

Automated drug delivery systems.

Permits an automated drug delivery system, as defined, to be located in specified clinics licensed by the Board of Pharmacy. (Chapter 310, Statutes of 2001)

AB 1589 (Simitian)

Healing arts: electronic transmission of prescriptions.

Requires the Medical Board of California, in consultation with the Board of Pharmacy, to conduct a study on the electronic transmission of prescriptions by physicians and other health care providers, and report its results to the Legislature by January 1, 2003. (Chapter 464, Statutes of 2001)

AB 2655 (Matthews)

Controlled substances.

Extends the sunset date of the Controlled Substance Utilization Review and Evaluation System (CURES) program, which monitors the dispensing of Schedule II controlled substances such as oxycontin and morphine, until July 1, 2008. Permits a health care practitioner eligible to obtain triplicate prescription forms or a pharmacist to make a written request of the Department of Justice for the history of controlled substances dispensed to an individual under his or her care based on data contained in CURES. (Chapter 345, Statutes of 2002)

SB 293 (Torlakson)

Pharmacies: injectable sterile drug products.

Requires the Board of Pharmacy (Board), in order to compound sterile drug products, to obtain a license to compound injectable sterile drug products. Would have appropriated \$580,000 from the Pharmacy Board Contingent Fund to the Board for the costs associated with the implementation of this bill, but the funding in the bill was deleted by the Governor via a line item veto. (Chapter 827, Statutes of 2001)

SB 696 (Speier)

Pharmacies: prescription benefits: Medicare beneficiaries.

Establishes the Golden Bear State Pharmacy Assistance Program, which requires the Department of Health Services to attempt to negotiate rebate amounts with drug manufacturers for all prescription drugs purchased by Medicare beneficiaries, in order to provide a prescription drug discount to Medicare beneficiaries. Specifies that participation by both manufacturers and pharmacies is voluntary. (Chapter 693, Statutes of 2001)

SB 1278 (Speier)

Pharmacies: prescription benefits: Medicare beneficiaries

Makes permanent a provision in existing law relating to prescription discounts for Medicare recipients. (Chapter 542, Statutes of 2002)

SB 1315 (Sher)

Pharmaceuticals: purchasing.

Permits the Department of General Services to enter into contracts on behalf of state and local agencies with manufacturers and suppliers of prescription drugs. Permits these contracts to include price discounts, rebates, refunds, or other strategies aimed at managing escalating prescription drug prices. (Chapter 483, Statutes 2002)

SB 1884 (Speier)

Dietary supplements.

Prohibits the sale or distribution of any dietary supplement product containing ephedrine group alkaloids or steroid hormone precursors, unless the product label contains a warning statement, as specified, and requires these products to clearly and conspicuously display the federal Food and Drug Administration's (FDA) MedWatch number for consumers to report adverse events. Prohibits the sale of these products to minors. (Chapter 1005, Statutes of 2002)

SB 1948 (Figueroa)

Dietary supplements: warning labels and advertisements.

Requires, whenever a warning label is included on any dietary supplement that is manufactured or distributed in this state, the warning label to be clear and conspicuous. (Chapter 1006, Statutes of 2002)

VETOED

SB 1000 (Johannessen)

Schedule II controlled substances: prescription requirements.

Would have allowed a practitioner eligible to obtain triplicate prescription forms for Schedule II controlled substances (e.g., a physician) or a pharmacist to request the history of controlled substances dispensed to an individual under his or her care based on data contained in the Controlled Substance Utilization Review and Evaluation System. (Vetoed)

PUBLIC HEALTH, IMMUNIZATIONS AND BIOTERRORISM

AB 945 (Wright)

Lead inspections: certified industrial hygienists.

Requires certified industrial hygienists to be eligible to provide environmental investigative services as a part of the Childhood Lead Poisoning Prevention Program. (Chapter 524, Statutes of 2001)

AB 1452 (Cox)

Vaccinations: meningococcal disease.

Requires the Department of Health Services (DHS) to develop information about meningococcal disease containing specified information, and requires public postsecondary institutions that provide on-campus housing to provide the information to each incoming freshman. Requires students to return a form with a response as to whether or not the person chooses to receive the vaccination for meningococcal disease, and requires the educational institutions to maintain the completed forms received from students. (Chapter 372, Statutes of 2001)

AB 2831 (Simitian)

Health records: delivery of laboratory test results by Internet posting.

Exempts direct communication by electronic means between the treating health care professional who ordered a laboratory test and the patient from a provision of law requiring patients to give written consent, as specified, in order to receive his or her laboratory results by electronic means, and permits certain test results that are otherwise prohibited from being conveyed to the patient electronically to be conveyed by electronic means if there is no malignancy revealed in the test results. (Chapter 128, Statutes of 2002)

AB 3049 (Committee on Health)

Public health.

Exempts "drop in" day care centers from immunization and tuberculosis verification requirements. Repeals an obsolete appropriation. Adds Yolo and

Marin to counties authorized to incorporate services covered by the California Children's Services Program into Medi-Cal managed care contracts. (Chapter 536, Statutes of 2002)

SB 108 (Speier)

Organ and tissue donor registry.

Enacts the Organ and Tissue Donor Registry Act of 2001, which would establish under the Uniform Anatomical Gift Act, an Organ and Tissue Donor Registry in the Health and Human Services Agency. Requires the Department of Motor Vehicles to provide information and a standardized form containing specified information, to be completed by driver's license and identification card applicants who desire to be organ donors. (Chapter 740, Statutes of 2001)

SB 212 (Oller)

Meningococcal disease.

Requires the Department of Health Services (DHS), in consultation with the Department of Education, local public health agencies, and postsecondary educational institutions, to develop a Meningococcal Disease Strategic Prevention Plan. Appropriates \$100,000 from the General Fund to DHS for the purpose of developing the Plan. (Chapter 374, Statutes of 2001)

SB 406 (Ortiz)

Bioterrorism preparedness and other public health threats: federal funding.

Establishes the procedures by which federal funding may be allocated and expended by local health jurisdictions for the prevention of, and response to, bioterrorist attacks and other public health emergencies, pursuant to the federally approved collaborative state-local plan. (Chapter 393, Statutes of 2002)

SB 843 (Perata)

Omnibus Tuberculosis Control and Prevention Act of 2002.

Permits, until January 1, 2006, any city or county public health department to certify tuberculin skin test technicians to place and measure tuberculosis (TB) skin tests. Requires the Department of Corrections to notify assigned parole agents, or

regional parole administrators when a person released on parole has known or suspected active TB and when a parolee ceases treatment for TB. (Chapter 763, Statutes of 2002)

SB 1298 (Ortiz)

Public health emergencies: state aid: local health administration.

Expands the required uses of funds provided to local health jurisdictions. (Chapter 1114, Statutes 2002)

VETOED

SB 1734 (Vasconcellos)

Drug paraphernalia: clean needle and syringe exchange projects.

Would have extended existing immunity from prosecution for distributing syringes and needles at clean syringe and needle exchange programs to the distribution also of any device or substance necessary to ensure the safety and cleanliness of those needles or syringes. Would have specified that such immunity be pursuant to a declaration of a local emergency annually due to the existence of a critical local public health crisis. (Vetoed)

SB 1785 (Vasconcellos)

Hypodermic needles and syringes.

Would have permitted a pharmacist or physician to furnish hypodermic needles and syringes for human use without a prescription. Would have permitted a person who is 18 years of age or older to purchase up to 30 hypodermic needles or syringes per transaction without a prescription for personal use. (Vetoed)

SB 2047 (Machado)

Health services: chronic disease

Would have created the Chronic Disease Prevention Council in the Department of Health Services to coordinate and prioritize disease prevention programs. (Vetoed)

RESEARCH

AB 480 (Robert Pacheco)

Cancer.

Requires the Cancer Research Fund (Fund) for the Cancer Research Program to consist of money accepted by the Department of Health Services (DHS) from grants and donations from private entities and of public moneys transferred to the Fund. Requires that moneys in the Fund be made available for expenditure by DHS only upon appropriation by the Legislature. (Chapter 246, Statutes of 2001)

AB 1205 (Ashburn)

Valley Fever Research.

Appropriates \$3 million to the Department of Health Services (DHS) for continuation of the Valley Fever Vaccine Project. (Chapter 751, Statutes of 2001)

AJR 13 (Runner)

Autism.

Urges the President and Congress of the United States to fully support the Coalition for Autism Research and Education and the additional federal funding needed for advanced autism research. (Resolution Chapter 88, Statutes of 2001)

AJR 28 (Robert Pacheco)

Pancreatic Cancer.

Urges the President and Congress to expand federally funded research efforts aimed at developing a reliable means of detecting pancreatic cancer in its early stages. (Resolution Chapter 24, Statutes of 2002)

SB 253 (Ortiz)

Stem cells: human tissue: research.

Requires the policy of California to be that research involving the derivation and use of human embryonic stem cells, human embryonic germ cells, and human adult stem cells, from any source including somatic cell nuclear transplantation is

required to be permitted and that full consideration of the ethical and medical implications of this research be given. Requires a physician, surgeon or other health care provider delivering fertility treatment to provide his or her patient timely, relevant, and appropriate information to allow the individual to make an informed and voluntary choice regarding the disposition of any human embryos remaining following the fertility treatment. (Chapter 789, Statutes of 2002)

SB 1230 (Alpert)

Human Cloning.

Makes various provisions of law relating to prohibitions against cloning a human being, and purchasing or selling an ovum, zygote, embryo, or fetus for the purpose of cloning a human being permanent, by repealing their sunset dates. Requires the Department of Health Services to establish an advisory committee for purposes of advising the Legislature and the Governor on human cloning and other issues relating to human biotechnology. (Chapter 821, Statutes 2002)

SCR 55 (Ortiz)

Stem cell research.

Resolves that there is hereby established a panel to advise the Legislature on stem cell research, and resolves that the advisory panel be required to evaluate the medical, social, legal, and ethical implications of stem cell research, the appropriate policy for California, and ways in which the state can support existing efforts to fulfill the promise of stem cell research. (Resolution Chapter 153, Statutes of 2002)

SCR 76 (Ackerman)

Autism Treatment Awareness Month.

Proclaims April 2002 as Autism Treatment Awareness Month, and acknowledges the contributions made in the area of early autism intervention treatment by experts in the field and the families involved. Resolves that the Legislature continues to support research into the causes and treatments of autism at the UC Davis M.I.N.D. Institute. (Resolution Chapter 53, Statutes of 2002)

SJR 37 (Romero)

Alzheimer's disease.

Memorializes the President and Congress to immediately invest in various activities to prevent Alzheimers disease. (Resolution Chapter 69, Statutes of 2002)

SJR 38 (Ortiz)

Stem cell research.

Memorializes the President and Congress of the United States to reject legislation that inappropriately impedes the progress of medical science by impeding stem cell and therapeutic cloning research. (Resolution Chapter 163, Statutes of 2002)

SCHOOL HEALTH

AB 559 (Wiggins)

Emergency medical services.

Permits school districts or county offices of education to provide emergency epinephrine auto-injectors to trained personnel, and permits trained personnel to utilize these auto-injectors to provide emergency medical aid to persons suffering from an anaphylactic reaction. Requires the Superintendent of Public Instruction to establish minimum training standards for the administration of epinephrine auto-injectors. (Chapter 458, Statutes of 2001)

SB 19 (Escutia)

Pupil health.

Requires the reimbursement a school receives for free and reduced-price meals sold or served to pupils in elementary or middle schools to be increased to \$0.23. Establishes various limitations and prohibitions on the sale of beverages and foods to pupils in elementary and middle schools. Requires the Department of Education to establish a pilot program in which not less than 10 high schools, middle schools, or any combination thereof, voluntarily adopt the provisions of this bill. Permits a school district maintaining at least one elementary school or middle school, or high school that is participating in the pilot program established by this bill, to convene a Child Nutrition and Physical Activity Advisory Committee. Would have appropriated \$5.5 million from the General Fund to SDE, but this funding was line item vetoed by the Governor, who stated that it is premature to allocate General Fund without first exploring the use of federal funds for this purpose. (Chapter 913, Statutes of 2001)

SB 56 (Escutia)

Pupil health: nutrition.

Makes clarifying and technical corrections to SB 19 (Escutia), Chapter 913, Statutes of 2001. (Chapter 361, Statutes of 2002)

VETOED

AB 481 (Firebaugh)

Education: pupil health: diabetes

Would have required a credentialed school nurse to provide assistance to pupils with diabetes, in accordance with instructions set forth by the pupil's physician, if the pupil is unable to perform these tasks. Would have required in the absence of a credentialed school nurse or other licensed nurse onsite, other designated school personnel to administer assistance to pupils with diabetes in accordance with guidelines established pursuant to this bill and the instructions set forth by the pupil's physician, if the pupil is unable to perform these tasks. Would have defined "designated school personnel" to mean teachers who have volunteered and administrators of the school that are onsite fulltime and have received adequate training to provide assistance to pupils with diabetes. (Vetoed)

AB 1061 (Dickerson)

Pupil health.

Would have permitted any pupil, with the assistance of the school nurse, to take or apply, during the regular school day nonprescription medication, as specified. (Vetoed)

AB 1905 (Longville)

Type 2 diabetes mellitus: pupil screening.

Would have established a three-year pilot program that screens pupils for the risk of developing Type 2 Diabetes Mellitus (DM2). (Vetoed)

SUBSTANCE ABUSE

AB 289 (Oropeza)

Healing arts.

Permits licensed narcotic treatment program clinics, notwithstanding the prohibition against the corporate practice of medicine, to employ physicians and charge for professional services rendered by these physicians. Prohibits these clinics from interfering with, controlling, or otherwise directing a physician's professional judgment in a manner prohibited by the law against the corporate practice of medicine, or any other provision of law. (Chapter 321, Statutes of 2001)

SB 1447 (Chesbro)

Treatment of addicts: drug treatment programs.

Deletes methadone and Levoalphacetylmethadol treatment limitations on physicians providing drug abuse treatment. Makes a number of revisions relating to reimbursement rates for specified services. (Chapter 543, Statutes 2002)

VETOED

AB 2514 (Bates)

Substance abuse review committee.

Would have required the Department of Social Services, in consultation with the Department of Alcohol and Drug Programs, to establish a joint committee to study issues relating to substance abuse in families in child welfare programs. Would have required the committee to develop a strategic plan to address issues of substance abuse facing families in child welfare programs. (Vetoed)

MISCELLANEOUS

AB 548 (Runner)

Specialty care for low-income persons.

Requires the Office of Statewide Health Planning and Development in consultation with the Department of Health Services to establish a program to defray the cost of care provided by pediatric and adult specialty care providers in underserved areas. Establishes the Specialty Care Fund to support the provision of specialty medical care to those who have problems accessing medical specialists. (Chapter 520, Statutes of 2001)

AB 925 (Aroner)

Employment of persons with disabilities.

Revises and expands programs for working persons with disabilities. (Chapter 1088, Statutes of 2002)

AB 1049 (Robert Pacheco)

L.A. Care Board: technical advisory committee: children's health consultant advisory committee.

Repeals the requirement that members of the technical advisory committee include a medical school representative, an epidemiologist, a pharmacist, a representative of a nursing association, a Visiting Nurse Association representative, a long-term care provider, a mental health care provider, a medical rehabilitation provider, and an expert on quality assurance monitoring. Requires the governing body to establish a children's health consultant advisory committee to provide the governing body with expertise on child, adolescent, and maternal health issues. (Chapter 528, Statutes of 2001)

AB 1139 (Thomson)

Death certificates: forms.

Requires the second section of the death certificate, which contains items relating to medical and health data, to include information indicating whether the decedent was pregnant at the time of death, or within the year prior to death, if known. (Chapter 827, Statutes of 2002)

AB 1379 (Thomson)

Family planning services.

Authorizes the Office of Family Planning (Office) within the Department of Health Services (DHS) to award grants to, as opposed to enter into contracts under current law with, individuals and specified entities for the provision of family planning services. Requires family planning services to be provided by a grantee pursuant to a grant awarded by the Office to the extent these services are not available under the Medi-Cal program, as opposed to through contracts between authorized public or private agencies offering family planning services and DHS. Exempts grants awarded by the Office for family planning services from current provisions of law relating to contracts entered into by the state. Requires DHS to award grants, as oppose to enter into contracts under current law, to provide family planning services pursuant to current law relating to family planning. Makes various other conforming, non-substantive amendments. (Chapter 641, Statutes of 2002)

AB 1425 (Thomson)

Persons with disabilities: community living support services.

Defines "community living support services" as services designed to develop and improve independent living and problem solving skills, education and training, assistance with arrangements to meet individuals' basic needs. Defines "supportive housing" as rental housing that is affordable to persons with disabilities, and independent housing in which each tenant holds a lease or rental agreement, is individually responsible for shared tenancy, and participation in services is not required as a condition of tenancy. (Chapter 428, Statutes of 2002)

AB 1657 (Hertzberg) (S)

County health care. State Auditor.

Requires the State Auditor to evaluate the financial capacity of the Los Angeles County Department of Health Services to render health care services to Los Angeles County residents. (Chapter 195, Statutes of 2001)

AB 2143 (Matthews)

Health: cancer programs.

Permits the Department of Health Services (DHS) to contract with public and private entities, or utilize existing health care service provider enrollment and payment mechanisms, including the Medi-Cal program's fiscal intermediary (FI), to implement the federal breast and cervical cancer early detection program (BCCEDP), the Prostate Cancer Screening Program (PCSP), and the Breast Cancer Control Program (BCCP). Requires the Medi-Cal program's FI to be utilized only if services provided under the programs are specifically identified and reimbursed in a manner that does not claim federal financial reimbursement. Exempts any contracts with, and the utilization of, the Medi-Cal program's FI from current law relating to public contracts and the acquisition of information technology goods and services. Exempts contracts to implement the BCCEDP, PCSP, and BCCP entered into by DHS with entities other than the Medi-Cal program's fiscal intermediary from current law that regulates contracting by state agencies. (Chapter 274, Statutes of 2002)

AB 2328 (Wayne)

Medical experiments.

Permits, for purposes of obtaining informed consent required for certain medical experiments in specified institutions, if a person is unable to consent and does not express dissent or resistance to participation, surrogate informed consent to be obtained from a surrogate decision maker, as specified. (Chapter 477, Statutes of 2002)

AB 2459 (Diaz)

Physicians and surgeons: prostate cancer.

Requires the Department of Health Services to approve and send an updated copy of the standardized written summary on alternative methods of treatment for prostate cancer to the Medical Board of California (MBC) every time the summary is modified and requires MBC to make the updated summary available to licensed physicians and surgeons. Requires both DHS and MBC to update their websites every time the summary is modified. (Chapter 531, Statutes of 2002)

SB 185 (Bowen)

Battered women's shelters.

Requires the Maternal and Child Health Branch of the Department of Health Services to conduct a minimum of one site visit per grant term to each agency funded to provide shelter-based services to battered women and their children. Requires the purpose of the site visit to be a performance assessment of, and technical assistance for, each agency visited, and requires the performance assessment to include a review of specified items, including the progress in meeting program goals and objectives. (Chapter 439, Statutes of 2001)

SB 456 (Speier)

Health Insurance Portability and Accountability Act of 2001: compliance activities.

Requires the Office of Health Insurance Portability and Accountability Act (HIPAA) Implementation (Office) in the Health and Human Services Agency (HHS) to assume statewide leadership, coordination, policy formulation, direction and oversight responsibilities for HIPAA implementation, and exercise full authority relative to state entities to establish policy, provide direction to state entities, monitor progress, and report on implementation efforts. Requires the director of the Office to establish an advisory committee to obtain information on statewide HIPAA implementation activities. Requires all state entities subject to HIPAA to complete an assessment prior to January 1, 2002 to determine the impact of HIPAA on their operations, and requires the Office to report the results of the assessment to the Legislature by May 15, 2002. Sunsets the provisions of this bill on January 1, 2008. (Chapter 635, Statutes of 2001)

SB 720 (Margett)

County administration of health services.

Revises the statute outlining the LA Care Health Plan governing board conflict of interest exemptions and makes clarifying changes to the composition of the governing board. (Chapter 143, Statutes of 2001)

SB 1162 (Polanco)

University of California: Charles R. Drew/UCLA Undergraduate Medical Education Program.

Requests the Regents of the University of California (UC), as a component of the current assessment of the UC medical education program, to consider the expansion of the joint Charles R. Drew/UCLA Undergraduate Medical Education Program. (Chapter 1140, Statutes 2002)

SB 1188 (Committee on Health and Human Services)

Exemption from Medical Experimentation Act

Reenacts a provision of law that provides an exception to the prohibition in current law against an individual being subjected to a medical experiment unless informed consent is obtained. (Chapter 122, Statutes of 2001)

SB 1226 (Committee on Health and Human Services)

Environmental specialists: food safety.

Revises the definitions of "infant formula" and "medical food" to require a review by the Department of Health Services before changes in the federal definitions of these terms are incorporated by reference. (Chapter 641, Statutes of 2001)

SB 1529 (Johnson)

Conflicts of interest: special commissions.

Exempts any county organized health system (COHS) from a specified provision of law that prohibits specified individuals from being financially interested in any contract made by them in their official capacity, or by any body or board of which they are members. Specifies that this exemption does not apply if the contract or grant directly relates to services to be provided by any member of the commission, or financially benefits the member, and the member fails to recuse himself or herself from making, participating in making, or in any way attempts to use his or her official position to influence a decision on the contract or grant. Takes effect immediately as an urgency measure. (Chapter 262, Statutes 2002)

SB 1699 (Ortiz)

Health care programs: denial of continued enrollment, suspension, and withholding of payment.

Permits the Department of Health Services (DHS) to suspend a provider from any program administered by DHS when that provider has been suspended, based on evidence of fraud or abuse, from another program administered by DHS. (Chapter 768, Statutes of 2002)

SB 1894 (Escutia)

Domestic violence programs.

Requires the Maternal and Child Health Branch of the Department of Health Services to fund domestic violence programs that have previously received funding, but were not selected for funding in 2000 using funds appropriated in the Budget Act of 2002 in Item 4260-111-0642, payable from the Domestic Violence Training and Education Fund, for payment to Item 4260-111-0001. (Chapter 834, Statutes of 2002)

SJR 35 (Brulte)

Federal Indian Health Care Improvement Act.

Memorializes the President and Congress of the United States to pass the Indian Health Care Improvement Act in the 107th Session of Congress. (Resolution Chapter 56, Statutes of 2002)

SB 2098 (Committee on Health and Human Services)

Health.

Prohibits specified requirements for landlords and tenants, relating to the presence of mold in commercial or industrial real property, from applying until the first January 1 or July 1 that occurs at least six months after the Department of Health Services adopts specified standards and guidelines. Expands an exception to the requirement that cooperative agreements be subject to review and approval by the Department of General Services for allowable cost agreements, by increasing the permissible changes in line item budgets. (Chapter 386, Statutes of 2002)

VETOED

AB 194 (Longville)

Vital records: change of sex.

Would have permitted a person born in California who has surgically altered their sexual characteristics to those of the opposite sex to petition for a new birth certificate reflecting the change of gender and any change of name in the county where the petitioner was born, in addition to the county where the person resides. (Vetoed)

AB 1147 (Thomson)

County maternal and child health services: funding.

Would have appropriated \$2.6 million from the General Fund to the Department of Health Services (DHS) in augmentation of a specific item of the Budget Act of 2001 (Chapter 106, Statutes of 2001) for allocation by DHS in support of county maternal and child health services. (Vetoed)

AB 1547 (Vargas)

Health care access: San Diego County: demonstration project.

Would have authorized the San Diego Business Health Care Connection Demonstration Project (Demonstration Project) in San Diego County under the oversight of the Department of Health Services. Would have required the Demonstration Project to provide various services including establishing an outreach program to provide employers and employees with onsite education, and eligibility and enrollment assistance for both public and private health care coverage programs. (Vetoed)

AB 2721 (Chan)

Dental health: study.

Requires the Department of Health Services to conduct a study on expanding access to dental health services for children, subject to the receipt of private funding to undertake the study. (Vetoed)

SB 30(Chesbro)

Mental health: Realignment Review Task Force.

Would have required the Health and Human Services Agency to establish a Realignment Review Task Force composed of specified members including the Secretary of the Health and Human Services Agency or his or her designee. Would have required the Realignment Review Task Force to present options regarding realignment to the Governor and the Legislature on or before April 1, 2003.

(Vetoed)

SB 396 (Kuehl)

Corrections: medical services.

Would have prohibited medical technical assistants who are licensed vocational nurses from making any decision concerning access to care for inmates, and would have required the Department of Corrections to report to the Legislature on the cost and benefits of charging a \$5 co-payment for each inmate-initiated medical visit.

(Vetoed)

SB 1041 (Ortiz)

Health care: Donated Dental Services Program.

Would have established the Donated Dental Services Program (DDSP) within the Department of Developmental Services (Department), and required the DDSP to increase access to dental services for special populations by encouraging the delivery of volunteer dental services for the disabled and elderly by California's practicing dentists. Would have appropriated \$125,000 from the General Fund to the Department for purposes of implementing the DDSP during the 2001-02 fiscal year (FY). (Vetoed)

SB 1751 (Burton)

Homeless individuals: reporting of deaths.

Would have required each county to submit an annual report on the number of homeless individuals who died during the previous calendar year to the Department of Health Services (DHS). Would have required DHS to report annually on the number of deaths of homeless persons statewide. (Vetoed)

SB 2097 (Committee on Health & Human Services)

Lyme disease,

Would have expanded the membership and responsibilities of the Lyme Disease Advisory Committee in the Department of Health Services. (Vetoed)