

MHAC Bill Report

Monday, March 11, 2019

[AB 4](#)

(Arambula D) Medi-Cal: eligibility.

Current Text: Introduced: 12/3/2018 [html](#) [pdf](#)

Status: 12/4/2018-From printer. May be heard in committee January 3.

Location: 12/3/2018-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptured
1st House				2nd House							

Summary: Current law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. Federal law prohibits payment to a state for medical assistance furnished to an alien who is not lawfully admitted for permanent residence or otherwise permanently residing in the United States under color of law. This bill would extend eligibility for full-scope Medi-Cal benefits to individuals of all ages, if otherwise eligible for those benefits, but for their immigration status. The bill would delete provisions delaying eligibility and enrollment until the director makes the determination as specified.

Position

Support

[AB 8](#)

(Chu D) Pupil health: mental health professionals.

Current Text: Amended: 3/4/2019 [html](#) [pdf](#)

Last Amend: 3/4/2019

Status: 3/5/2019-Re-referred to Com. on ED.

Location: 1/17/2019-A. ED.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptured
1st House				2nd House							

Summary: Would require, on or before December 31, 2022, a school of a school district or county office of education and a charter school to have at least one mental health professional, as defined, for every 400 pupils generally accessible to pupils on campus during school hours. The bill would require, on or before December 31, 2022, a school of a school district or county office of education and a charter school with fewer than 400 pupils to have at least one mental health professional generally accessible to pupils on campus during school hours, to employ at least one mental health professional to serve multiple schools, or to enter into a memorandum of understanding with a county agency or community-based organization for at least one mental health professional employed by the agency or organization to provide services to pupils.

Position

Sponsor

[AB 34](#)

(Ramos D) Pupils: bullying.

Current Text: Introduced: 12/3/2018 [html](#) [pdf](#)

Status: 12/4/2018-From printer. May be heard in committee January 3.

Location: 12/3/2018-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptured
1st House				2nd House							

Summary: Would express the intent of the Legislature to enact legislation that would address social bullying in order to provide a safe and supportive learning environment for all pupils.

Position

Watch

Notes 1: Spot Bill

[AB 43](#)

(Gloria D) Mental health.

Current Text: Introduced: 12/3/2018 [html](#) [pdf](#)

Status: 12/4/2018-From printer. May be heard in committee January 3.

Location: 12/3/2018-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptured
1st House				2nd House							

Summary: Current law, the Mental Health Services Act (MHSA), an initiative measure enacted by the voters as Proposition 63 at the November 2, 2004, statewide general election, establishes the continuously appropriated Mental Health Services Fund to fund various county mental health programs. This bill would state the intent of the Legislature to enact legislation to ensure that Mental Health Services Act funds are used in accordance with the provisions of the act and that there is adequate oversight of excess unspent funds.

Position

Watch

Notes 1: Spot Bill

AB 45

(Stone, Mark D) Inmates: medical care: fees.

Current Text: Amended: 2/20/2019 [html](#) [pdf](#)

Last Amend: 2/20/2019

Status: 3/6/2019-In committee: Set, first hearing. Referred to suspense file.

Location: 2/26/2019-A. APPR.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would prohibit the director or a sheriff, chief or director of corrections, or chief of police from charging a fee for an inmate-initiated medical visit of an inmate of the state prison or a county or city jail, and would make a conforming change. The bill would also prohibit those officials from charging an inmate of the state prison or a city or county jail a fee for durable medical equipment or medical supplies, as defined.

Position

Support

AB 46

(Carrillo D) Individuals with mental illness: change of term.

Current Text: Introduced: 12/3/2018 [html](#) [pdf](#)

Status: 12/4/2018-From printer. May be heard in committee January 3.

Location: 12/3/2018-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law refers to an insane or mentally defective person in provisions relating to, among other things, criminal proceedings, correctional facilities, and property tax exemptions. This bill would state the intent of the Legislature to enact legislation to replace derogatory terms, including, but not limited to, "insane" and "mentally defective," with more culturally sensitive terms when referring to individuals with mental illness.

Position

Support

AB 50

(Kalra D) Medi-Cal: Assisted Living Waiver program.

Current Text: Introduced: 12/3/2018 [html](#) [pdf](#)

Status: 1/17/2019-Referred to Com. on HEALTH.

Location: 1/17/2019-A. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require the State Department of Health Care Services to submit, in 2019, to the federal Centers for Medicare and Medicaid Services a request for renewal of the Assisted Living Waiver program with specified amendments. The bill would require, as part of the amendments, the department to increase the number of participants in the program, as specified, in the 15 existing waiver counties, expansion of the program beyond those counties on a regional basis, and modification to the provider reimbursement tiers while also maintaining the program's budget-neutral provisions.

Position

Watch

AB 67

(Rivas, Luz D) Individuals or families who are homeless or at risk of homelessness: definition.

Current Text: Amended: 2/26/2019 [html](#) [pdf](#)

Last Amend: 2/26/2019

Status: 2/27/2019-Re-referred to Com. on H. & C.D.

Location: 1/17/2019-A. H. & C.D.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: The McKinney-Vento Homeless Assistance Act establishes various programs and grants to provide a range of services to homeless individuals and families, and defines the terms "homeless," "homeless individual," and "homeless person" to mean, among other things, an individual or family who lacks a fixed, regular, and adequate nighttime residence or an individual who resided in a shelter or place not meant for human habitation and who is exiting an institution where the individual temporarily resided. This bill would require the coordinating council to compile a list of federal, state, and local funding sources, programs, and services for addressing homelessness, and the definitions of "homeless" and "at risk of homelessness" used for those purposes, and would require state and local

governmental entities that provide programs and services to individuals and families who are homeless or at risk of homelessness, or funding for those programs and services, to provide the coordinating council with the existing definitions of those terms.

Position

[AB 70](#)

(Berman D) Mental health in schools.

Current Text: Introduced: 12/3/2018 [html](#) [pdf](#)

Status: 12/4/2018-From printer. May be heard in committee January 3.

Location: 12/3/2018-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would state the intent of the Legislature to enact legislation that would support youth mental health in schools.

Position

Watch

[AB 136](#)

(Quirk-Silva D) Alcohol and drug programs: residential recovery and treatment ombudsman: pilot program.

Current Text: Introduced: 12/5/2018 [html](#) [pdf](#)

Status: 1/24/2019-Referred to Com. on HEALTH.

Location: 1/24/2019-A. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require the State Department of Health Care Services to establish the Office of the State Ombudsman for Substance Abuse Residential Recovery and Treatment as a one-year pilot project, from January 1, 2021, to December 31, 2021, inclusive. The bill would require the office to work in concert with participating counties to collaborate in investigations of complaints received by the counties against alcoholism or drug abuse recovery or treatment facilities and recovery residences. The bill would require each participating county, by July 1, 2022, to report to the Legislature on the results of the county's collaboration with the pilot program.

Position

[AB 163](#)

(Garcia, Cristina D) Group homes: foster family agencies: unaccompanied undocumented minors.

Current Text: Introduced: 1/7/2019 [html](#) [pdf](#)

Status: 1/24/2019-Referred to Com. on HUM. S.

Location: 1/24/2019-A. HUM. S.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require a group home or foster family agency that houses unaccompanied undocumented minors, as defined, who are under the custody of the federal Office of Refugee Resettlement, to, among other things, report the number of unaccompanied undocumented minors under the custody of the federal Office of Refugee Resettlement who are placed in the group home or placed by the foster family agency with a resource family and their length of placement, and arrange a meeting for those minors to meet with a specified organization providing certain legal services.

Position

[AB 216](#)

(Weber D) Special education: behavioral interventions.

Current Text: Introduced: 1/15/2019 [html](#) [pdf](#)

Status: 1/16/2019-From printer. May be heard in committee February 15.

Location: 1/15/2019-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law authorizes the use of emergency interventions against an individual with exceptional needs, as defined. Current law prohibits a local educational agency or nonpublic, nonsectarian school or agency serving individuals with exceptional needs from authorizing, ordering, consenting to, or paying for specified interventions, including restrictive interventions that employ a device, material, or objects that simultaneously immobilize all four extremities, including the procedure known as prone containment, with the exception that trained personnel are authorized to use prone containment or similar techniques as a limited emergency intervention. This bill would make nonsubstantive changes to these provisions.

Position

Watch

Notes 1: Spot Bill

[AB 236](#) ([Garcia, Eduardo D](#)) **Special education programs: Family Empowerment Centers on Disability.**

Current Text: Introduced: 1/18/2019 [html](#) [pdf](#)

Status: 2/7/2019-Referred to Com. on ED.

Location: 2/7/2019-A. ED.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would revise and recast the provisions related to Family Empowerment Centers on Disability, including requiring the State Department of Education to give priority to grant applicants in those of the 32 regions in the state that do not have a center, increasing the minimum base rate for each center awarded a grant from \$150,000 to \$223,000 commencing with the start of the fiscal year after a center has been established in each of the 32 regions, and, commencing with the 2021-22 fiscal year, providing for an annual cost-of-living adjustment of the grant amount, as specified.

Position

[AB 258](#) ([Jones-Sawyer D](#)) **Pupil health: School-Based Pupil Support Services Program Act.**

Current Text: Introduced: 1/23/2019 [html](#) [pdf](#)

Status: 2/7/2019-Referred to Coms. on ED. and HEALTH.

Location: 2/7/2019-A. ED.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: The Healthy Start Support Services for Children Act requires the Superintendent of Public Instruction to award grants to local educational agencies or consortia to fund programs in qualifying schools that provide support services, which include case-managed health, mental health, social, and academic support services, to eligible pupils and their families. This bill would state the intent of the Legislature to enact legislation that would increase in-school support services to pupils in order to break down barriers to academic success.

Position

Watch

[AB 306](#) ([Ramos D](#)) **Mental Health Services Fund.**

Current Text: Introduced: 1/29/2019 [html](#) [pdf](#)

Status: 1/30/2019-From printer. May be heard in committee March 1.

Location: 1/29/2019-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law, the Mental Health Services Act, an initiative measure enacted by the voters as Proposition 63 at the November 2, 2004, statewide general election, funds a system of county mental health plans for the provision of mental health services, as specified. The act establishes the Mental Health Services Fund, which is continuously appropriated to, and administered by, the State Department of Health Care Services to fund specified county mental health programs. This bill would make technical, nonsubstantive changes to those provisions.

Position

Watch

[AB 319](#) ([Rubio, Blanca D](#)) **Narcotic treatment: medication-assisted treatment.**

Current Text: Introduced: 1/30/2019 [html](#) [pdf](#)

Status: 2/11/2019-Referred to Com. on HEALTH.

Location: 2/11/2019-A. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require the Department of Health Care Services to create reimbursement rates and rate billing codes for use by licensed narcotic treatment programs providing medication-assisted treatment using noncontrolled medications approved by the Food and Drug Administration for patients with a substance use disorder.

Position

Support

Notes 1: Letter Submitted

[AB 385](#)**(Calderon D) Medi-Cal: Early and Periodic Screening, Diagnosis, and Treatment mental health services: performance outcome system platform.****Current Text:** Introduced: 2/5/2019 [html](#) [pdf](#)**Status:** 2/15/2019-Referred to Com. on HEALTH.**Location:** 2/15/2019-A. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law requires the State Department of Health Care Services, in collaboration with the California Health and Human Services Agency and in consultation with the Mental Health Services Oversight and Accountability Commission, to create a plan for a performance outcome system for EPSDT mental health services, as specified. This bill would require the department to develop a platform, or integrate with an existing platform, to support the performance outcome system that will improve outcomes at the individual and system levels and will inform fiscal decision making related to the purchase of services.

Position

Watch

[AB 389](#)**(Arambula D) Substance use disorder treatment: peer navigators.****Current Text:** Introduced: 2/5/2019 [html](#) [pdf](#)**Status:** 2/15/2019-Referred to Com. on HEALTH.**Location:** 2/15/2019-A. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require the State Department of Health Care Services to either establish a pilot program or expand an existing pilot program for purposes of measuring the efficacy and cost avoidance of utilizing trained substance use disorder peer navigators and behavioral health peer navigators in the emergency department of an acute care hospital, as described, if Funds for this purpose are appropriated in the annual Budget Act. The bill would provide that an acute care hospital may be eligible to receive funding under the pilot program to fund peer navigator positions.

Position[AB 451](#)**(Arambula D) Health care facilities: treatment of psychiatric emergency medical conditions.****Current Text:** Introduced: 2/11/2019 [html](#) [pdf](#)**Status:** 2/21/2019-Referred to Com. on HEALTH.**Location:** 2/21/2019-A. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require a psychiatric unit within a general acute care hospital, a psychiatric health facility, or an acute psychiatric hospital that has accepted a person for the purpose of determining the existence of a psychiatric medical emergency condition, to provide emergency services and care to treat that person, regardless of whether the facility operates an emergency department, if the facility has appropriate facilities and qualified personnel. These requirements would not apply to a state psychiatric hospital. By creating a new crime, this bill would impose a state-mandated local program.

Position

Watch

[AB 480](#)**(Salas D) Mental health: older adults.****Current Text:** Introduced: 2/12/2019 [html](#) [pdf](#)**Status:** 3/4/2019-Referred to Coms. on AGING & L.T.C. and HEALTH.**Location:** 3/4/2019-A. AGING & L.T.C.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would establish within the State Department of Health Care Services an Older Adult Mental Health Services Administrator to oversee mental health services for older adults. The bill would require that position to be funded with administrative funds reserved to the department from the Mental Health Services Fund. The bill would also state the intent of the Legislature to include provisions in the bill that, among other things, increase service integration for older adults receiving mental health services funded by the Mental Health Services Fund.

Position

Watch

[AB 512](#)**(Ting D) Medi-Cal: specialty mental health services.****Current Text:** Introduced: 2/13/2019 [html](#) [pdf](#)

Status: 2/21/2019-Referred to Com. on HEALTH.

Location: 2/21/2019-A. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law requires the State Department of Health Care Services to implement managed mental healthcare for Medi-Cal beneficiaries through contracts with mental health plans, and requires mental health plans to be governed by various guidelines, including a requirement that a mental health plan assess the cultural competency needs of the program. This bill would require each mental health plan to prepare a cultural competency assessment plan to address, among other things, disparities in access, utilization, and outcomes by race, ethnicity, language, sexual orientation, gender identity, and immigration status.

Position

[AB 563](#)

(Quirk-Silva D) Mental Health Services Fund.

Current Text: Introduced: 2/13/2019 [html](#) [pdf](#)

Status: 2/14/2019-From printer. May be heard in committee March 16.

Location: 2/13/2019-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law, the Mental Health Services Act, an initiative measure enacted by the voters as Proposition 63 at the November 2, 2004, statewide general election, funds a system of county mental health plans for the provision of mental health services, as specified. The act establishes the Mental Health Services Fund, which is continuously appropriated to, and administered by, the State Department of Health Care Services to fund specified county mental health programs. This bill would make technical, nonsubstantive changes to those provisions.

Position

Watch

[AB 565](#)

(Maienschein D) Mental health workforce planning: loan forgiveness, loan repayment, and scholarship programs.

Current Text: Introduced: 2/13/2019 [html](#) [pdf](#)

Status: 2/25/2019-Referred to Com. on HEALTH.

Location: 2/25/2019-A. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law establishes the Steven M. Thompson Physician Corps Loan Repayment Program (program) in the California Physician Corps Program within the Health Professions Education Foundation, which provides financial incentives, including repayment of educational loans, to a physician and surgeon who practices in a medically underserved area, as defined. Existing law establishes the Medically Underserved Account for Physicians, a continuously appropriated account, within the Health Professions Education Fund, to primarily provide funding for the ongoing operations of the program. Current law defines "practice setting," for these purposes. This bill also would define "practice setting" to include a program or facility operated by, or contracted to, a county mental health plan.

Position

[AB 577](#)

(Eggman D) Medi-Cal: maternal mental health.

Current Text: Introduced: 2/14/2019 [html](#) [pdf](#)

Status: 2/25/2019-Referred to Com. on HEALTH.

Location: 2/25/2019-A. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would extend Medi-Cal postpartum care for up to one year beginning on the last day of the pregnancy for an eligible individual diagnosed with a maternal mental health condition. The bill would define maternal mental health condition for purposes of the bill.

Position

Notes 1: Need more information before supporting

[AB 666](#)

(Gabriel D) Pupil health: mental health.

Current Text: Introduced: 2/15/2019 [html](#) [pdf](#)

Status: 2/19/2019-From printer. May be heard in committee March 21.

Location: 2/15/2019-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law requires the governing board of a school district to give diligent care to the health and physical development of pupils and authorizes the governing board of a school district to employ properly certified persons for this purpose. This bill would express the intent of the Legislature to later enact legislation relating to State Department of Education protocols on pupil mental health.

Position

Watch

[AB 682](#)

(Eggman D) Health facilities: residential mental health or substance use disorder treatment.

Current Text: Introduced: 2/15/2019 [html](#) [pdf](#)

Status: 2/28/2019-Referred to Com. on HEALTH.

Location: 2/28/2019-A. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require the State Department of Public Health, in consultation with specified entities, to develop and submit a proposal to solicit a grant under the federal 21st Century Cures Act to develop a real-time, Internet-based database to collect, aggregate, and display information about the availability of beds in inpatient psychiatric facilities, crisis stabilization units, residential community mental health facilities, and licensed residential alcoholism or drug abuse recovery or treatment facilities for treatment purposes.

Position

Watch

[AB 714](#)

(Wood D) Opioid prescription drugs: prescribers.

Current Text: Introduced: 2/19/2019 [html](#) [pdf](#)

Status: 2/28/2019-Referred to Coms. on B. & P. and HEALTH.

Location: 2/28/2019-A. B.&P.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law requires a prescriber, as defined, to offer to a patient a prescription for naloxone hydrochloride or another drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid depression when certain conditions are present, including if the patient presents with an increased risk for overdose or a history of substance use disorder, and to provide education on overdose prevention to patients receiving a prescription and specified other persons. This bill would make those provisions applicable only to a patient receiving a prescription for an opioid or benzodiazepine medication, and would make the provisions specific to opioid-induced respiratory depression, opioid overdose, opioid use disorder, and opioid overdose prevention, as specified.

Position

[AB 741](#)

(Arambula D) Early and Periodic Screening, Diagnosis, and Treatment Program: universal trauma screening.

Current Text: Introduced: 2/19/2019 [html](#) [pdf](#)

Status: 2/20/2019-From printer. May be heard in committee March 22.

Location: 2/19/2019-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would provide that it is the intent of the Legislature to enact legislation that would implement provider training to ensure the success and sustainability of universal trauma screening.

Position

Watch

[AB 744](#)

(Aguiar-Curry D) Healthcare coverage: telehealth.

Current Text: Introduced: 2/19/2019 [html](#) [pdf](#)

Status: 2/28/2019-Referred to Com. on HEALTH.

Location: 2/28/2019-A. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Under current law, face-to-face contact between a health care provider and a patient is not

required under the Medi-Cal program for teleophthalmology, teledermatology, and teledentistry by store and forward. Current law requires a Medi-Cal patient receiving teleophthalmology, teledermatology, or teledentistry by store and forward to be notified of the right to receive interactive communication with a distant specialist physician, optometrist, or dentist, and authorizes a patient to request that interactive communication. This bill would delete those interactive communication provisions.

Position
Watch

[AB 875](#) (Wicks D) Pupil health: in-school support services.

Current Text: Introduced: 2/20/2019 [html](#) [pdf](#)

Status: 2/21/2019-From printer. May be heard in committee March 23.

Location: 2/20/2019-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: The Healthy Start Support Services for Children Act requires the Superintendent of Public Instruction to award grants to local educational agencies or consortia to fund programs in qualifying schools that provide support services, which include case-managed health, mental health, social, and academic support services, to eligible pupils and their families. This bill would state the intent of the Legislature to enact legislation that would increase in-school and community support services to pupils and families in order to break down barriers to academic success and improve health outcomes.

Position

Notes 1: Spot Bill

[AB 890](#) (Wood D) Nurse practitioners.

Current Text: Introduced: 2/20/2019 [html](#) [pdf](#)

Status: 3/4/2019-Referred to Com. on B. & P.

Location: 3/4/2019-A. B.&P.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would authorize a nurse practitioner who holds a certification as a nurse practitioner from a national certifying body to practice without the supervision of a physician and surgeon if the nurse practitioner meets specified requirements, including having practiced under the supervision of a physician and surgeon for an unspecified number of hours. The bill would authorize a nurse practitioner to perform specified functions in addition to any other practices authorized by law, including ordering and interpreting diagnostic procedures, certifying disability, and prescribing, administering, dispensing, and administering controlled substances.

Position
Support

Notes 1: Steinberg Institute, sponsor

[AB 895](#) (Muratsuchi D) School-based early mental health intervention and prevention services.

Current Text: Introduced: 2/20/2019 [html](#) [pdf](#)

Status: 3/4/2019-Referred to Coms. on ED. and HEALTH.

Location: 3/4/2019-A. ED.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: The School-Based Early Mental Health Intervention and Prevention Services for Children Act of 1991 authorizes the Director of Health Care Services, in consultation with the Superintendent of Public Instruction, to provide matching grants to local educational agencies to pay the state share of the costs of providing school-based early mental health intervention and prevention services to eligible pupils at schoolsites of eligible pupils, subject to the availability of funding each year. Current law defines "eligible pupil" for this purpose. This bill would revise the program to award grants rather than matching grants, and would expand the definition of an eligible pupil to include a pupil who attends a preschool program at a contracting agency of the California state preschool program or a local educational agency, and a pupil who is in transitional kindergarten, thereby extending the application of the act to those persons.

Position

[AB 1443](#) (Maienschein D) Mental health: technical assistance centers.

Current Text: Introduced: 2/22/2019 [html](#) [pdf](#)

Status: 2/25/2019-Read first time.

Location: 2/22/2019-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require the Mental Health Services Oversight and Accountability Commission to establish technical assistance centers to support counties in addressing mental health issues that are of statewide concern and establish, with stakeholder input, which mental health issues are of statewide concern. The bill would require costs incurred as a result of complying with those provisions to be paid using funds allocated to the commission from the Mental Health Services Fund.

Position

Watch

[AB 1468](#) (McCarty D) Opioid Prevention and Rehabilitation Act.

Current Text: Introduced: 2/22/2019 [html](#) [pdf](#)

Status: 2/25/2019-Read first time.

Location: 2/22/2019-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would, commencing with the 2021–22 fiscal year, require a manufacturer or wholesaler that sells or distributes opioid drugs in this state to submit to the State Department of Public Health a report, including specified information, that details all opioid drugs sold or distributed in this state during the preceding fiscal year. The bill would, commencing with the 2021–22 fiscal year, require the department, in consultation with the board, to calculate the ratable share of a manufacturer or wholesaler, which is the individual portion of the collective sum of \$100,000,000 to be paid by the manufacturers and wholesalers, based on the information reported.

Position

Oppose

Notes 1: Need to meet with staff first before submitting official oppose letter.

Staff: Cristina Salazar

[AB 1494](#) (Aguiar-Curry D) Medi-Cal: telehealth: state of emergency.

Current Text: Introduced: 2/22/2019 [html](#) [pdf](#)

Status: 2/25/2019-Read first time.

Location: 2/22/2019-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would provide, only to the extent that federal financial participation is available, that neither face-to-face contact nor a patient’s physical presence on the premises of an enrolled community clinic, is required for services provided by the clinic to a Medi-Cal beneficiary during or immediately following a state of emergency, as specified. The bill would authorize the department to apply this provision to services provided by another enrolled fee-for-service Medi-Cal provider, clinic, or facility.

Position

[AB 1547](#) (Kiley R) Special education funding: mental health services.

Current Text: Introduced: 2/22/2019 [html](#) [pdf](#)

Status: 2/25/2019-Read first time.

Location: 2/22/2019-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would express the intent of the Legislature to later enact legislation that would increase the flexibility of the use of funds appropriated in the Budget Act of 2011 for providing educationally related mental health services, including out-of-home residential services for emotionally disturbed pupils, required by an individualized education program.

Position

Watch

[AB 1601](#) (Ramos D) Office of Emergency Services: behavioral health response.

Current Text: Introduced: 2/22/2019 [html](#) [pdf](#)

Status: 2/25/2019-Read first time.

Location: 2/22/2019-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would establish a behavioral health deputy director within the Office of Emergency Services to ensure individuals have access to necessary mental and behavioral health services and supports in the aftermath of a natural disaster or declaration of a state of emergency and would require the deputy director to collaborate with the Director of Health Care Services to coordinate the delivery of trauma-related support to individuals affected by a natural disaster or state of emergency.

Position

[AB 1615](#) (Arambula D) Mental health: anti-immigration activities and rhetoric.

Current Text: Introduced: 2/22/2019 [html](#) [pdf](#)

Status: 2/25/2019-Read first time.

Location: 2/22/2019-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law governs the operation and financing of community mental health services for the mentally disordered in every county through locally administered and locally controlled community mental health programs. This bill would state the intent of the Legislature to enact legislation to mitigate the impact of anti-immigration activities and rhetoric on the mental health and well-being of children in immigrant families in California by, among other things, investing in community-based treatment modalities.

Position

Notes 1: Staff Recommendation: Watch

[AB 1619](#) (Weber D) Mental Health Loan Assumption Program.

Current Text: Introduced: 2/22/2019 [html](#) [pdf](#)

Status: 2/25/2019-Read first time.

Location: 2/22/2019-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would appropriate \$20,000,000 from the General Fund to the Office of Statewide Health Planning and Development, to increase available grant moneys for students eligible to apply for the Mental Health Loan Assumption Program (MHLAP), established by the office under the act and administer by the foundation. The funds would also be used to increase the maximum grant amount for an MHLAP recipient to \$15,000, and to develop and implement an informational outreach program to attract and encourage eligible students from culturally and ethnically diverse communities to apply to MHLAP.

Position

[AB 1676](#) (Maienschein D) Health care: mental health.

Current Text: Introduced: 2/22/2019 [html](#) [pdf](#)

Status: 2/25/2019-Read first time.

Location: 2/22/2019-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require health care service plans and health insurers, by January 1, 2021, to establish a telehealth consultation program that provides providers who treat children and pregnant and postpartum persons with access to a psychiatrist, as specified, in order to more quickly diagnose and treat children and pregnant and postpartum persons suffering from mental illness. The bill would require health care service plans and insurers to communicate information relating to the telehealth program at least twice a year in writing.

Position

[AB 1689](#) (McCarty D) College Mental Health Services Program.

Current Text: Introduced: 2/22/2019 [html](#) [pdf](#)

Status: 2/25/2019-Read first time.

Location: 2/22/2019-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require the Mental Health Services Oversight and Accountability Commission subject to appropriation by the Legislature, to create a grant program for public community colleges, colleges, and universities for the purpose of improving access to mental health services on those campuses, as

specified. The bill would require campuses that have been awarded grants under these provisions to report annually on the use of those grant funds and to post that information on their internet websites. The bill would also require the commission to submit a report to the Legislature evaluating the impact of the program, as specified.

Position

AB 1739 (Medina D) Pupil health: mental health.

Current Text: Introduced: 2/22/2019 [html](#) [pdf](#)

Status: 2/25/2019-Read first time.

Location: 2/22/2019-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law requires the governing board of a school district to give diligent care to the health and physical development of pupils and authorizes the governing board of a school district to employ properly certified persons for this purpose. This bill would express the intent of the Legislature to enact legislation that would promote mental health and the prevention of mental illness for California's pupils.

Position

Notes 1: Staff Recommendation: Watch

SB 10 (Beall D) Mental health services: peer, parent, transition-age, and family support specialist certification.

Current Text: Amended: 1/23/2019 [html](#) [pdf](#)

Last Amend: 1/23/2019

Status: 1/23/2019-From committee with author's amendments. Read second time and amended. Re-referred to Com. on HEALTH.

Location: 1/16/2019-S. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require the State Department of Health Care Services to establish, no later than July 1, 2020, a statewide peer, parent, transition-age, and family support specialist certification program, as a part of the state's comprehensive mental health and substance use disorder delivery system and the Medi-Cal program. The bill would include 4 certification categories: adult peer support specialist, transition-age youth peer support specialist, family peer support specialist, and parent peer support specialist.

Position

Support

SB 11 (Beall D) Health care coverage: mental health parity.

Current Text: Introduced: 12/3/2018 [html](#) [pdf](#)

Status: 1/16/2019-Referred to Com. on HEALTH.

Location: 1/16/2019-S. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require a health care service plan and a health insurer to submit an annual report to the Department of Managed Health Care or the Department of Insurance, as appropriate, certifying compliance with state and federal mental health parity laws, as specified. The bill would require the departments to review the reports submitted by health care service plans to ensure compliance with state and federal mental health parity laws, and would require the departments to make the reports and the results of the reviews available upon request and to post the reports and the results of the reviews on the departments' Internet Web site.

Position

Support

Notes 1: Letter submitted.

SB 12 (Beall D) Mental health services: youth.

Current Text: Amended: 2/19/2019 [html](#) [pdf](#)

Last Amend: 2/19/2019

Status: 2/28/2019-Re-referred to Com. on HEALTH.

Location: 2/28/2019-S. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: The Mental Health Services Act an initiative statute enacted by the voters as Proposition 63 at the November 2, 2004, statewide general election, also funds a system of county mental health plans for the provision of mental health services, as specified. Current law provides for the operation and administration of various mental health programs by the Mental Health Services Oversight and Accountability Commission. This bill would require the commission, subject to the availability of funds for these purposes, to administer an Integrated Youth Mental Health Program for purposes of establishing local centers to provide integrated youth mental health services, as specified.

Position

Support

Notes 1: 2/19 Amendments: Concerns. Need to discuss with author's office.

SB 29

(Lara D) Medi-Cal: eligibility.

Current Text: Introduced: 12/3/2018 [html](#) [pdf](#)

Status: 2/21/2019-Set for hearing March 20.

Location: 1/16/2019-S. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would extend eligibility for full-scope Medi-Cal benefits to individuals of all ages who are otherwise eligible for those benefits but for their immigration status. The bill would also delete provisions delaying implementation until the director makes the determination described above. Because counties are required to make Medi-Cal eligibility determinations and this bill would expand Medi-Cal eligibility, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

Position

Support

Notes 1: Letter submitted.

SB 40

(Wiener D) Conservatorship: serious mental illness and substance use disorders.

Current Text: Amended: 3/4/2019 [html](#) [pdf](#)

Last Amend: 3/4/2019

Status: 3/4/2019-From committee with author's amendments. Read second time and amended. Re-referred to Com. on RLS.

Location: 12/3/2018-S. RLS.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law establishes a procedure, until January 1, 2024, for the County of Los Angeles, the County of San Diego, and the City and County of San Francisco, if the board of supervisors authorizes the appointment of a conservator for a person who is incapable of caring for the person's own health and well-being due to a serious mental illness and substance use disorder, as evidenced by frequent detention for evaluation and treatment, which is 8 or more detentions for evaluation and treatment in the preceding 12 months. Existing law automatically terminates a conservatorship initiated pursuant to these provisions one year after the appointment of the conservator unless the court specifies a shorter period. This bill would additionally authorize the court to establish a temporary conservatorship for a period of 30 days or less if the court is satisfied of the necessity, as specified.

Position

SB 66

(Atkins D) Medi-Cal: federally qualified health center and rural health clinic services.

Current Text: Introduced: 1/8/2019 [html](#) [pdf](#)

Status: 2/21/2019-Set for hearing March 20.

Location: 1/16/2019-S. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law provides that federally qualified health center (FQHC) services and rural health clinic (RHC) services, as defined, are covered benefits under the Medi-Cal program, to be reimbursed, to the extent that federal financial participation is obtained, to providers on a per-visit basis. "Visit" is defined as a face-to-face encounter between a patient of an FQHC or RHC and specified health care professionals, including a physician. Under current law, "physician," for these purposes, includes, but is not limited to, a physician and surgeon, an osteopath, and a podiatrist. This bill would authorize reimbursement for a maximum of 2 visits taking place on the same day at a single location if after the first visit the patient suffers illness or injury requiring additional diagnosis or treatment, or if the

patient has a medical visit and a mental health visit or a dental visit, as defined.

Position
Support

[SB 331](#) (Hurtado D) Suicide-prevention: strategic plans.

Current Text: Introduced: 2/19/2019 [html](#) [pdf](#)

Status: 2/28/2019-Referred to Com. on HEALTH.

Location: 2/28/2019-S. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require counties to create a suicide-prevention strategic plan that places particular emphasis on preventing suicide in children who are less than 19 years of age. By creating a new duty for counties, this bill would impose a state-mandated local program.

Position

[SB 539](#) (Caballero D) Mental Health Services Act: workforce education and training funds.

Current Text: Introduced: 2/21/2019 [html](#) [pdf](#)

Status: 3/7/2019-Referred to Com. on HEALTH.

Location: 3/7/2019-S. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would amend the Mental Health Services Act by requiring the Controller, in any fiscal year in which the Department of Finance estimates that the revenues to be deposited into the Mental Health Services Fund for the fiscal year will exceed the revenues deposited into the fund in the prior fiscal year, to, no later than the last day of each month and before any transfer or expenditure from the fund for any other purpose for the following month, set aside in the fund an amount that is equal to 25% of 1/12 of the estimated amount of increased revenue.

Position
Support

[SB 582](#) (Beall D) Youth mental health and substance use disorder services.

Current Text: Introduced: 2/22/2019 [html](#) [pdf](#)

Status: 3/7/2019-Referred to Coms. on HEALTH and ED.

Location: 3/7/2019-S. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require the Mental Health Services Oversight and Accountability Commission, when making grant funds available on and after July 1, 2021, to allocate at least 1/2 of those funds to local educational agency and mental health partnerships, as specified. The bill would require this funding to be made available to support prevention, early intervention, and direct services, as determined by the commission. The bill would require the commission, in consultation with the Superintendent of Public Instruction, to consider specified criteria when determining grant recipients.

Position

[SB 640](#) (Moorlach R) Mental health services: gravely disabled.

Current Text: Introduced: 2/22/2019 [html](#) [pdf](#)

Status: 2/25/2019-From printer. May be acted upon on or after March 27. Read first time.

Location: 2/22/2019-S. RLS.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: The Lanterman-Petris-Short Act provides for the involuntary commitment and treatment of a person who is a danger to themselves or others or who is gravely disabled. This bill would change the definition of "gravely disabled" for these purposes to read, in part, a condition in which a person, as a result of a mental health disorder, is incapable of making informed decisions about, or providing for, the person's own basic personal needs for food, clothing, shelter, or medical care without significant supervision and assistance from another person and, as a result of being incapable of making these informed decisions, the person is at risk of substantial bodily harm, dangerous worsening of a concomitant serious physical illness, significant psychiatric deterioration, or mismanagement of the person's essential needs that could result in bodily harm.

Position
Oppose

Notes 1: Need to draft oppose letter.

[SB 653](#) (Chang R) Telehealth.

Current Text: Introduced: 2/22/2019 [html](#) [pdf](#)

Status: 2/25/2019-From printer. May be acted upon on or after March 27. Read first time.

Location: 2/22/2019-S. RLS.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: The Medical Practice Act establishes the Medical Board of California to regulate, among other things, the practice of telehealth, as defined. Current law authorizes the board to establish a pilot program to expand the practice of telehealth and to convene a working group to implement the pilot program. This bill would make a nonsubstantive change to the pilot program provision.

Position

Watch

[SB 660](#) (Pan D) Postsecondary education: mental health counselors.

Current Text: Introduced: 2/22/2019 [html](#) [pdf](#)

Status: 2/25/2019-From printer. May be acted upon on or after March 27. Read first time.

Location: 2/22/2019-S. RLS.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require the Trustees of the California State University and the governing board of each community college district to have one full-time equivalent mental health counselor with an applicable California license per 1,500 students enrolled at each of their respective campuses to the extent consistent with state and federal law. The bill would define mental health counselor for purposes of this provision. The bill would require those institutions, on or before January 1, 2021, and every 3 years thereafter, to report to the Legislature how funding was spent and the number of mental health counselors employed on each of its campuses, as specified.

Position

[SB 666](#) (Stone R) Mental health diversion.

Current Text: Introduced: 2/22/2019 [html](#) [pdf](#)

Status: 2/25/2019-From printer. May be acted upon on or after March 27. Read first time.

Location: 2/22/2019-S. RLS.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law authorizes a court to grant pretrial diversion, for a period no longer than 2 years, to a defendant suffering from a mental disorder, on an accusatory pleading alleging the commission of a misdemeanor or felony offense, in order to allow the defendant to undergo mental health treatment. Current law conditions eligibility on, among other criteria, a court finding that the defendant's mental disorder played a significant role in the commission of the charged offense. Current law makes defendants ineligible for the diversion program for certain offenses. This bill would make defendants ineligible for the diversion program for charges of robbery if the defendant was armed with a weapon at the time of the offense, assault with a deadly weapon, elder abuse, and child abuse, as defined.

Position

Total Measures: 55

Total Tracking Forms: 55