



March 29, 2011

Health Consumer Bills in the 2011 Legislative Session

Below is a list of key health bills focused on the subject of implementing and improving upon the new federal Affordable Care Act in California, introduced at the beginning of the 2011 legislative session of the California State Legislature. This list will be updated at www.health-access.org.

▶ Ensuring Californians Get the Coverage They Need

Comprehensive Health Reform

SB 810 Leno	SINGLE PAYER UNIVERSAL HEALTH CARE: Establishes a universal State Healthcare System. Creates State Healthcare Agency. Makes all residents eligible for specified health care benefits under the System, which would, on a single-payer basis, negotiate for or set fees for health care services provided through the system and pay claims for those services.	Support
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Medi-Cal

AB 43 Monning	MEDI-CAL ELIGIBILITY: Requires the applicable departments transition Medi-Cal to reflect the expanded eligibility requirements of the ACA effective January 1, 2014. Eligibility will include persons who are under 65 years of age, not pregnant, not entitled to, or enrolled for, benefits under Medicare Part A, or enrolled in Medicare Part B, and whose income does not exceed 133% of the poverty line.	Support
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SB 677 Hernandez	MEDI-CAL RULES: Requires the applicable departments transition Medi-Cal to reflect the Affordable Care Act effort effective January 1, 2014, including: Changes income standard to MAGI. Eliminates asset test. Makes other conforming changes.	Support
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AB 1066 Perez	MEDI-CAL WAIVER FOLLOW-UP & LOW INCOME HEALTH PROGRAMS: Implements the expansion of Medi-Cal as authorized by the Affordable Care Act and by the 1115 Medicaid Waiver.	Support
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SB 485 Hernandez	MEDI-CAL: Establishes a pilot program to reduce emergency room use by Medi-Cal eligible beneficiaries.	Exploring
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Easy Enrollment

AB 1296 Bonilla	STREAMLINING ELIGIBILITY AND ENROLLMENT: Requires the California Health and Human Services Agency to establish a standardized single application form and related renewal procedures for Medi-Cal, the Healthy Families Program, the Exchange, and county programs.	Support
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AB 714 Atkins	PRE-ENROLLMENT: Requires DHCS, MRMIB, Family PACT and other programs as well as some hospitals to provide information about The California Health Benefits Exchange for the purpose of pre-enrolling them to be ready to obtain subsidized coverage in January 2014.	Sponsor/ Support
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AB 792 Bonilla	AUTOMATIC ENROLLMENT: Ensures that Californians can easily sign up for coverage during key life changes. Requires California consumers are provided information about the Exchange upon filing for divorce, separation, unemployment, adoption, or other life circumstances. After 2014, certain insurers and plans must also provide information about those dropping off coverage to the Exchange.	Sponsor/ Support
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Easy Navigation and Assistance

AB 922 Monning	PROVIDING CONSUMER ASSISTANCE: Creates an Office of Health Consumer Assistance (replacing the Office of Patient Advocate), responsible for providing outreach and education about health coverage to consumers. Authorizes contracting with community organizations to provide consumer assistance.	Co-Sponsor/Support
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New Coverage Options

SB 222 Alquist	COUNTY-RUN HEALTH INSURANCE OPTIONS: Allows for counties, county special commissions, or county health authorities that govern, own, or operate a local initiative health plan or county-organized health system, as specified, or the County Medical Services Program governing board, to form joint ventures for the joint or coordinated offering of health plans to individuals and groups.	Support
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SB 703 Hernandez	BASIC HEALTH PLAN: This bill would require the Managed Risk Medical Insurance Board to establish a basic health plan, for Californians between 133-200% of the poverty level, pursuant to the federal Patient Protection and Affordable Care Act.	Exploring
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Consumer Protections and Insurer Oversight

Value for Premium Dollar

SB 51 Alquist	MEDICAL LOSS RATIO: Ensures that premium dollars go to patient care rather than administration and profit. Codifies in state law the federal requirement that requires health insurers to spend a specified percentage of premium dollars on providing health care, and to provide refunds to patients if those percentages are not met.	Support
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AB 52 Feuer	RATE REGULATION: Provides authority to the Department of Managed Health Care and the Department of Insurance to approve or deny increases in health care insurance premiums, copayments, or deductibles.	Support
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Standards for Coverage

AB 1334 Feuer	STANDARDIZING BENEFITS: Requires plans and insurers to, commencing July 1, 2012, categorize all products offered in the individual market into five tiers according to actuarial value, as specified, and would require plans and insurers to disclose this value and other information.	Support
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SB 155 Evans	MATERNITY COVERAGE: Phases in a maternity care benefit mandate by requiring new health insurance policies submitted after January 1, 2012, to provide coverage for maternity services. In accordance with the Patient Protection and Affordable Care Act, maternity care will be required by federal law starting in 2014.	Support
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AB 185 Hernandez	MATERNITY COVERAGE: Phases in a maternity care benefit mandate by requiring new health insurance policies submitted after January 1, 2012, to provide coverage for maternity services. In accordance with the Patient Protection and Affordable Care Act, maternity care will be required by federal law starting in 2014.	Support
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AB 154 Beall	MENTAL HEALTH PARITY: Expand the existing mental health parity coverage requirement for certain health care service plan contracts and health insurance policies issued, amended, or renewed on or after January 1, 2012, to include the diagnosis and treatment of a mental illness of a person of any age.	Support
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AB 310 Ma	PRESCRIPTION DRUGS: Requires certain health plans and insurers to cover the costs of outpatient prescription drugs and limits cost sharing to consumers.	Exploring
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Access and Affordability for Californians with Pre-Existing Conditions

AB 151 Monning	SENIORS: GUARANTEED ISSUE FOR MEDI-GAP: Assure that those who previously covered by Medicare Advantage plans have guaranteed issue for Medi-Gap coverage.	Support
AB 1083 Monning	SMALL BUSINESS: REFORMING THE SMALL GROUP MARKET: Conform and phase-in new insurance market rules for small businesses, particularly so that small employers don't get additional premium spikes based on the health of their workforce.	Co-Sponsor/Support

Protections for Workers

AB 59 Swanson	FAMILY LEAVE: Expands the definition of families to reflect the state's diversity and allow all families to help their loved ones recuperate from illness.	Support
AB 400 Ma	PAID SICK LEAVE: Requires employers to provide paid sick leave so that employees can take care of their health without compromising their income or job status.	Support

Conforming and Improving Tax Law

AB 36 Perea	DEPENDENT COVERAGE: Modifies the tax code to exclude employer contributions toward dependent coverage (dependents up to age 26) from parents' taxable income.	Support <i>Signed by Governor</i>
AB 242 Perea	TAX CONFORMITY: Provides additional modified conformity to specified provisions of the federal Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010 relating to simple cafeteria plans for small businesses, health care benefits of indian tribe members, free choice vouchers, therapeutic discovery project grants, student loan repayment programs, and deduction for self-employment taxes.	Support

Raising Revenue to Prevent Cuts to Health and Other Vital Services

SB 116 De Leon	SINGLE SALES FACTOR: Revises the corporate tax code to mandate universal application of the single sales factor and repeals a corporate tax break enjoyed exclusively by large corporations in order to protect further cuts from health care and other vital services.	Support
AB 1239 Furutani	PERSONAL INCOME TAX: Reinstate income tax brackets for the highest income earners to address the state's budget problems.	Support

Hospitals

AB 62 Monning SB 7 Steinberg	QUALITY ASSURANCE FEE: Imposes a Quality Assurance Fee on general acute care hospitals and requires that fees collected be deposited into the Hospital Quality Assurance Revenue Fund in the State Treasury in order to make supplemental payments to specified hospitals.	Support
SB 335 Hernandez	QUALITY ASSURANCE FEE: Imposes a quality assurance fee to be paid by hospitals, for a specified period which would be used to increase federal financial participation in order to make supplemental Medi-Cal payments to hospitals and pay for health care coverage for children.	Support
AB 1360 Swanson	PHYSICIAN EMPLOYMENT: Authorizes health care districts and clinics owned or operated by health care districts to directly employ physicians and surgeons if the health care district's service area includes a Medically Underserved Area (MUA) or a Medically Underserved Population (MUP), or has been federally designated as a Health Professional Shortage Area (HPSA).	Support
SB 408 Hernandez	HOSPITAL LICENSURE: Requires a new license application to be filed when the holder of an existing license changes ownership.	Support

Prevention and Wellness

AB 441 Monning	ACTIVE TRANSPORTATION, HEALTHY COMMUNITIES: Requires that transportation planning include health criteria in order to foster healthier communities.	Support
AB 727 Mitchell	HEALTHY AND SUSTAINABLE FOOD: Creates nutrition standards to govern the foods purchased for all state departments, agencies, and state-run institutions in accordance with the federal dietary guidelines. Also creates guidelines for sustainable purchasing practices and procedures that encourage purchasing from local vendors, farms, and manufacturers when feasible.	Support
AB 70 Monning	COMMUNITY TRANSFORMATION GRANTS: Requires the California Health and Human Services Agency to apply for federal grant opportunities available under the Patient Protection and Affordable Care Act and the Healthy Hunger Free Kids Act.	Support
AB 916 Perez	PROMOTORES: Requires the State Department of Public Health to assess the grants to promote positive health behaviors and outcomes available pursuant to the federal Patient Protection and Affordable Care Act for funding opportunities related to the use of promotores in medically underserved communities.	Support
SB 616 De Saulnier	WELLNESS INCENTIVES: Directs the Department of Health Care Services to apply for federal grants for wellness incentives in Medi-Cal.	Exploring

Other

AB 272 Monning	STREAMLINING REPORTING: Repeals obsolete requirements that various state agencies report to the Legislature, including various requirements of MRMIB, DMHC, and CDI.	Support
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Steps Backward

SB 122 Price	ROLLING BACK DEPENDENT COVERAGE: Exempts retiree health plans from requirements under the Affordable Care Act and SB 1088 that mandate insurers to cover dependents up to age 26.	Oppose
AB 895 Halderman	PHYSICIAN TAX CREDITS: Provides for tax credits for physicians providing care in acute hospital settings and/or in community clinics.	Oppose
AB 726 Morrell	HEALTH SAVINGS ACCOUNTS: Amends the Personal Income Tax Law. provides an exclusion from gross income for moneys removed from a specified savings plan and deposited directly into a health savings account. Waives that penalty tax for early distribution.	Oppose
AB 854 Garrick	HEALTH SAVINGS ACCOUNTS: Allow, in accordance with federal tax code, deductions in connection with Health Savings Accounts.	Oppose
SB 615 Calderon	BROKERS: Requires any person who solicits, negotiates, or sells health care service plan contracts, specialized health care service plan contracts, Medicare Advantage Plans under Medicare Part C, or Medicare supplement contracts to be licensed as an accident and health agent.	Oppose unless amended



This bill list was prepared by Health Access, a statewide coalition of consumer, labor, ethnic, senior, faith, and other organizations that has been dedicated to achieving quality, affordable health care for all Californians for over 20 years. Please visit our website and read our daily blog at www.health-access.org.