



October 14, 2013

Health Consumer Bills in the 2013 Legislative Session

Below is a list of key bills impacting health care consumers in consideration at the California State Legislature. This list will be updated at www.health-access.org.

► First Extraordinary Session - Health Reform

Implementing the Affordable Care Act		
SBX1 1 Steinberg/ Hernandez ABX1 1 Speaker Perez	MEDI-CAL EXPANSION AND SIMPLIFICATION: Expands Medi-Cal eligibility in accordance with the Affordable Care Act, effective January 1, 2014; streamlines eligibility and enrollment processes to reducing barriers to enrollment such as the assets test while expanding coverage to over 1 million Californians. STRONG SUPPORT	SIGNED
SBX1 2 Hernandez ABX1 2 Pan	INDIVIDUAL MARKET REFORM: Implements individual market reforms preventing insurers from denying or discriminating for pre-existing conditions, and otherwise conforming and phasing-in new insurance market rules for individuals who purchase insurance on their own. Limits different premiums based on age to 3:1. STRONG SUPPORT	SIGNED
SBX1 3 Hernandez	BRIDGE PLAN: Allows a designated health plan within Covered California to provide coverage to low-income Californians transitioning between Medi-Cal and Exchange coverage for increased affordability and continuity of care. SUPPORT	SIGNED

► Regular 2013 Session Legislation

Improving upon The Affordable Care Act		
SB 639 Hernandez	LIMITING COST SHARING: Implements and improves on the provisions of the ACA which limit out of pocket costs to no more than \$6,350 for an individual or \$12,700 for a family in 2015. Consistent with federal law, establishes actuarial value tiers for individual and small group law and limits deductibles for small employer coverage. Allows large employer coverage to use the 2014 plan year as a transition period before requiring a single total out of pocket limit for all covered benefits starting in 2015. Federal guidance allows multiple out of pocket limits: SB639 provides better consumer protections against medical bankruptcy. SPONSOR/SUPPORT	SIGNED
SB 353 Lieu	DECEPTIVE MARKETING: Requires a health plan or insurer that markets in a language other than English to provide a specified list of materials in that language so the consumer who is choosing coverage knows what they are buying—even if they speak a language other than English. These provisions would apply only to the individual and small employer markets. SPONSOR/SUPPORT	SIGNED

Ensuring Affordability and Value		
SB 161 Hernandez	SMALL GROUP STOP LOSS COVERAGE: Protects the small employer market from insurers that undermine the risk pool by establishing regulatory requirements for stop-loss insurance for small employers including on or after January 1, 2016, setting an individual attachment point of \$40,000 or greater and an aggregate attachment point of the greater of \$5,000 times the total number of group members, 120% of expected claims, or \$40,000. SUPPORT	SIGNED
SB746 Leno	LARGE GROUP RATE REVIEW: Would provide aggregate rate information for large employer health insurance and would also require integrated health plans to disclose information similar to what is disclosed by other health plans. SUPPORT	VETOED

Medi-Cal and the Exchange

AB 1263 Speaker Perez	MEDI-CAL MANAGED CARE INTERPRETERS: Requires the Department of Health Care Services (DHCS) to certify Medical Interpreters for the Medi-Cal Managed Care Plans and Fee for Service providers. DHCS, in consultation with an Advisory Committee of stakeholders would by September 1, 2014, approve an examination and certification process to test and certify the competency of medical interpreters. Interpreters would be required to meet a series of standards as a condition of certification. The measure also provides collective bargaining for these interpreters. SUPPORT	VETOED
AB 1208 Pan	INSURANCE AFFORDABILITY PROGRAMS: Would allow collection of demographic data on race, ethnicity, primary language, disability status, sexual orientation and gender identity in application for insurance affordability programs such as Medi-Cal and premium tax credits. SUPPORT	VETOED
AB 422 Nazarian	MEDI-CAL/EXCHANGE AND SCHOOL LUNCH APPLICATIONS: Adds information about Covered California to the currently required information about Medi-Cal that is given to applicants for the school lunch program. SUPPORT	SIGNED
AB 411 Pan	MEDI-CAL MANAGED CARE PERFORMANCE INDICATORS: Requires analysis of HEDIS data to monitor and reduce health disparities. (Sponsored by CPEHN.) SUPPORT	VETOED
AB 361 Mitchell	HEALTH HOMES FOR "FREQUENT FLYERS": Expands pilot projects that help acutely ill individuals who frequently seek care in emergency rooms through coordinated and intensive intervention. SUPPORT	SIGNED
SB 332 Emmerson/ DeSaulnier	CALIFORNIA HEALTH BENEFIT EXCHANGE RECORDS: Makes contracts and rates of payment under those contracts of the California Health Benefit Exchange (known as Covered California) open to public inspection under the California Public Records Act (PRA) except for health plan contracts and their rates, which are made public in three and four years respectively. SUPPORT	SIGNED
AB 191 Bocanegra	MEDI-CAL/EXCHANGE AND CaIFRESH APPLICATIONS: Gives families information about Medi-Cal and the Exchange when they apply for CaIFRESH, so that they can get information about both health and human services programs. SUPPORT	SIGNED
AB 50 Pan	MEDI-CAL ELIGIBILITY AND ENROLLMENT: expands full scope Medi-Cal to pregnant women up to 100% FPL. SUPPORT	VETOED

Other Bills

SB 205 Corbett	PRESCRIPTION DRUG LABELS: Requires prescription drug container labels to be printed in 12 point sans serif typeface. SUPPORT	VETOED
AB 362 Ting	TAX BENEFITS FOR DOMESTIC PARTNERS: Allows Californians to exempt health benefit expenses for a domestic partner from personal income taxes. SUPPORT	SIGNED