



2019 Legislative Priorities

California has led the nation with the biggest drop of the uninsured rate of any state by implementing and improving on the Affordable Care Act—going from 7 million to 3 million uninsured, but we need to take additional bold steps to achieve a universal health care system that is affordable, accountable, and equitable. Over 70 organizations have joined together to win Care4All California in the next few years, despite obstacles posed by the federal government.

REDUCE HEALTH CARE PRICES

The United States spends more than most industrialized countries on health care, not because we use more services or have better health outcomes, but because prices are higher. Our higher prices are driven by consolidation, lack of oversight, and industry profit motives—leading to less coverage, higher premiums, deductibles, and co-pays—and lower paychecks. For a health system to be sustainable, we must lower prices while improving quality and equity.

- **Ban surprise ER billing**, by preventing surprise bills for out-of-network hospital ER visits so consumers are only billed for their co-pay or deductible, and capping the rate that can be charged. **AB 1611 (Chiu)** [Co-Sponsored by California Labor Federation and Health Access California]
- **Expand and improve rate review for health insurance** to build on what works, by extending DMHC and CDI's authority to conduct rate review in the large group insurance market, which has the potential to save consumers hundreds of millions of dollars, and to standardize and improve the information that insurers must report. **AB 731 (Kalra)** [Co-Sponsored by Health Access California, California Labor Federation, SEIU California, UNITE HERE, and Teamsters]
- **Uniform and transparent data**: Remove Kaiser Permanente's exclusions in state law to create a uniform reporting standard for health plan data and hospital financial reporting. **SB 343 (Pan)** [Sponsored by SEIU California]
- **Target the practice of "pay for delay" for prescription drugs**, by outlawing these collusive agreements where drug manufacturers pay generic companies to delay the introduction of lower-price medication to the market which keep drug prices too high. **AB 824 (Wood)** [Sponsored by Attorney General Xavier Becerra]

IMPROVING QUALITY & EQUITY THROUGH ACCOUNTABILITY

Our health system should ensure that all Californians can access quality care once enrolled, and be accountability for improved health outcomes and reduced health disparities. Beyond the exciting step of appointing a new California Surgeon General, the state can take other steps to shift our health focus more on prevention rather than profits; and ultimately continuing to have California lead the nation to show what is possible in improving our health care system.

- **Require plan-specific reporting on cost, quality and disparities**: Require Covered California plans to provide enrollee data to Covered California and require Covered California to report annually on and publish plan-specific cost, quality, and disparity data, which is important in to ensure we move the needle in reducing health disparities and improving cost and quality. **AB 929 (Luz Rivas)** [Co-Sponsored by California Pan Ethnic Health Network and Health Access California]
- **Improving translation and readability**: Ensure that the Medi-Cal documents that consumers rely on the most are understandable and appropriately translated so that consumers can access care. **AB 318 (Chu)** [Co-Sponsored by California Pan Ethnic Health Network and Western Center on Law and Poverty]
- **Implicit bias training for perinatal providers**: While California drastically decreased maternal mortality surrounding childbirth, mortality rates remain three to four times higher for black women. This bill would require implicit bias training for perinatal providers and improve data collection. **SB 464 (Mitchell)** [Co-Sponsored by Western Center on Law and Poverty, Black Women for Wellness, ACT for Women and Girls, and NARAL Pro-Choice CA]

COVER ALL CALIFORNIANS, INCREASING UNIVERSALITY AND AFFORDABILITY THROUGH BUDGET INVESTMENTS

Everybody benefits when everyone is covered, sharing in the cost of care and getting primary and preventive services to stay healthy. Specific state budget and policy steps can remove exclusions in our public programs and increase affordability. In the 2019-20 Budget, the California Governor and Legislature agreed to include several significant investments in health care, some first-in-the-nation steps to provide a down payment to get to near universal coverage. The Budget took these actions, which is aligned with legislative bills introduced this year:

- **Expand Medi-Cal to all young adults regardless of immigration status, toward the goal of #Health4All:** Pending legislation would take additional steps to open up Medi-Cal to income-eligible seniors and other undocumented Californians. **SB 29 (Durazo), AB 4 (Arambula, Bonta, Chiu, Santiago, Gonzalez)** [Co-Sponsored by California Immigrant Policy Center and Health Access California]
- **Increase affordability assistance:** The state budget increases and extends the ACA's affordability assistance. In a high cost state like California, additional state subsidies will help more Californians get covered and reduce their costs for premiums and cost-sharing. **SB 65 (Pan), AB 174 (Wood)** [Sponsored by Health Access California]
- **Maintain stability in the individual market and prevent premium spikes** by maintaining the **individual mandate** penalty at the state level, improving affordability in Covered California and encouraging enrollment. **AB 414 (Bonta)**
- **Undo the "senior penalty" in Medi-Cal**, by aligning income-eligibility for the Medi-Cal Aged and Disabled Program with income eligibility for those under age 65. This will ensure over 30,000 California seniors and people with disabilities don't face high share of costs for coverage. **AB 715 (Wood)** [Co-sponsored by Western Center on Law and Poverty, Disability Rights California, and Justice in Aging]
- **Invest in outreach and enrollment funding**, to ensure that consumers have accurate information about Medi-Cal eligibility and access to care by providing \$30M general fund over two years to counties to contract with community-based organizations to provide Medi-Cal enrollment and health system navigation assistance. [Sponsored by California Pan Ethnic Health Network]

ADDITIONAL PENDING LEGISLATION ON EXPANDING & IMPROVING COVERAGE

- **Stop seniors from losing free Medi-Cal** by fixing Medi-Cal income counting rules that deduct an individual's payment of the Medicare Part B premium from their income at application, but stop deducting that payment when it comes from the state as a benefit of free Medi-Cal. This causes some individuals to continually bounce in and out of free Medi-Cal. **AB 1088 (Wood)** [Co-Sponsored by Disability Rights California, Justice in Aging, and Western Center on Law & Poverty]
- **Streamline and encourage enrollment** by instituting express lane enrollment into Medi-Cal for those in the WIC (women, infants, and children) program. **AB 526 (Petrie Norris)** [Sponsored by The Children's Partnership, Children Now, Children's Defense Fund – California, and California Coverage and Health Initiatives]
- **Keep consumers covered**, by helping consumers keep health insurance coverage and avoid coverage gaps when they undergo different life events that cause them to lose health coverage either from Medi-Cal or other private health coverage. **SB 260 (Hurtado)** [Sponsored by Health Access California and Western Center on Law and Poverty]
- **Extend open enrollment deadline**, by extending the open enrollment deadline in Covered California to January 31st from January 15th in order to give consumers more time to shop, buy, and enroll in affordable coverage. **AB 1309 (Bauer Kahan)** [Sponsored by Health Access California]
- **Prevent Trump sabotage of the ACA**, by prohibiting any "1332 waiver" that does not ensure access to the same affordable and comprehensive coverage available under the Affordable Care Act. **AB 1063 (Petrie Norris)** [Co-Sponsored by Western Center on Law and Poverty and Health Access California]
- **Level up benefit standards & prescription drug protections**, by codifying Knox-Keene Act "basic health care services" definitions and medically necessary prescription drugs protection into the Insurance Code so that all consumers regardless of who regulates their coverage include important benefits and consumer protections. **AB 1246 (Limon)** [Sponsored by Health Access California]