



2020 Legislative and Budget Priorities

California can continue the progress we have made implementing and improving on the Affordable Care Act over the last ten years, where we have led the nation with the biggest drop in the uninsured of any state (from 7 million to 3 million). Our coalition of over 70 organizations seeks the additional and bold steps needed to achieve a universal health care system that is affordable, accountable, and equitable to all Californians. Our campaign seeks to win Care4AllCA, despite obstacles posed by our current federal government.

REDUCING 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. Consumers need greater oversight on health costs, consolidation, collection practices, and more. For a health system to be sustainable, we must work to prevent higher prices, premiums, deductibles, and co-pays for Californians.

- **AB 2817 (Wood): *Create an Office of Health Care Affordability*** to collect and analyze information and identify trends across our entire health care system. The office will set cost growth goals for health care affordability while also aiming to improve quality and equity. To ensure accountability that the health industry meet these goals, the office will have the ability to levy financial consequences if the goal is not met.
- **AB 2830 (Wood): *Establish a Health Care Cost Transparency Database*** within the Office of Statewide Health Planning and Development (OSHPD) that collects and streamlines health information related to health care costs, quality, and equity from available data sources. Collected data would be used to inform policy decisions related to improving health care quality and reducing disparities and health care costs, while also preserving consumer privacy.
- **AB 1611 (Chiu): *Ban Surprise Emergency Room Billing*** by preventing surprise bills for out-of-network hospital ER visits so consumers are only billed for their in-network co-pay or deductible, and setting a fair provider payment standard. [Co-Sponsored by California Labor Federation and Health Access California]
- **AB 2118 (Kalra): *Institute Rate Reporting in the Individual and Small-Group Markets*** in order to better understand the types of health coverage that Californians are purchasing and the costs. [Sponsored by Health Access California]
- **SB 852 (Pan): *Create a State Label to Manufacture Generic Drugs***. This effort, both legislative and in the Governor's budget, would create a state "label" for generic medications, where the state would contract for the manufacturing of specific generic medications.
 - **Address Prescription Drug Prices Administratively:** Other budget proposals by Governor Newsom take aim at the rising price of prescription drugs, including efforts to consolidate and improve Medi-Cal's negotiation and purchasing of medications.

IMPROVING HEALTH CARE QUALITY & EQUITY THROUGH ACCOUNTABILITY

Our health system should ensure that all Californians can access quality care once enrolled, and be accountable for improved health outcomes and reduced health disparities. The state should take steps to shift the focus to prevention rather than profits while ensuring that the system serves the specific needs of California's diverse communities.

- **SB 936 (Pan): *Ensure Quality in Medi-Cal Managed Care*** by requiring commercial Medi-Cal managed care plans to procure their contracts with the state every five years in order to provide better plan accountability, quality, and stakeholder engagement. This bill also requires commercial Medi-Cal managed care plans to meet certain criteria, including health care quality, network adequacy, and accessibility, in order to bid with the state. [Co-Sponsored by California Pan Ethnic Health Network and Western Center on Law and Poverty]
- **AB 2258 (Reyes): *Create a Doula Pilot Program to Decrease Health Disparities***. This three-year pilot program would provide doula care for pregnant and postpartum Medi-Cal enrollees in the 14 California counties with the highest birth disparities. Doulas provide individually tailored, culturally appropriate, client-centered care and advocacy, potentially reducing the impacts of racial bias. [Co-Sponsored by Western Center on Law and Poverty, National Health Law Program, and Black Women for Wellness]
- **Field Test Translated Medi-Cal Documents:** For the many Medi-Cal beneficiaries who do not understand the materials they get, this budget request would require the documents be written in simple, culturally appropriate language, and be subject to field testing where review of translations for accuracy, cultural appropriateness, and readability would be done by native speakers. [\$1 Million Budget Investment. [Championed by Assemblymember Chu, and advocated by California Pan Ethnic Health Network and Western Center on Law and Poverty]

COVERING ALL CALIFORNIANS AND INCREASING AFFORDABILITY TOWARD UNIVERSAL CARE

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 to reduce our uninsured rate to the under 5% level of almost all developed nations.

- **SB 29 (Durazo) & AB 4 (Arambula): *Expand Medi-Cal Regardless of Immigration Status, Toward the Goal of #Health4All***. Medi-Cal should cover all income-eligible adults regardless of their immigration status. Governor Newsom's budget includes the step of covering undocumented seniors who are now excluded from full-scope Medi-Cal. [Co-Sponsored by California Immigrant Policy Center and Health Access California]
- **SB 65 (Pan) & AB 2347 (Wood): *Increase Affordability Assistance in Covered California***. ACA subsidies have helped millions of people afford health coverage, but more help is needed, especially in a high cost state like California. For those who have a subsidy but still can't afford premiums, deductibles, or co-pays and those who earn too much to qualify for a subsidy, increasing subsidy assistance will help more Californians get covered and reduce their costs for premiums and cost-sharing. [Sponsored by Health Access California]
- **SB 1073 (Gonzalez): *Streamline Enrollment*** into Medi-Cal for those in the WIC program through express lane enrollment. [Sponsored by The Children's Partnership]
- **AB 683 (Carrillo): *Raise the Assets Limit for Seniors in Medi-Cal*** so they don't lose access to Medi-Cal for having small amounts of savings. [Co-sponsored by Western Center on Law and Poverty, and Justice in Aging]