



2019 Legislative Priorities

California has led the nation with the biggest drop in the uninsured of any state (from 7 million to 3 million) by implementing and improving on the Affordable Care Act. But there are still bold steps needed to achieve a universal health care system that is affordable, accountable, and equitable to all Californians. 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 and 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.

- **Expand and improve rate review for health insurance** giving DMHC and CDI the authority to conduct rate review in the large group insurance market, building on what works 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]
- **Create uniform and transparent data** by removing Kaiser Permanente’s reporting exclusions in state law, setting a 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 curbing 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]
- **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 setting a payment standard that can be charged. **AB 1611 (Chiu)** (*two-year bill*) [Co-Sponsored by California Labor Federation and Health Access California]

IMPROVING 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. Beyond the exciting step of appointing a new California Surgeon General, the state can take other actions to shift our focus to prevention rather than profits; and ultimately continuing to have California lead the nation in showing what is possible to improve our health care system.

- **Require implicit bias training for perinatal providers** and improve data collection to lower maternal mortality rates for black women. While California drastically decreased maternal mortality surrounding childbirth, mortality rates remain three to four times higher for black women in our state. **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]
- **Improving translation and readability** by ensuring that the Medi-Cal documents consumers rely on the most are understandable and appropriately translated, removing barriers to care. **AB 318 (Chu)** [Co-Sponsored by California Pan Ethnic Health Network and Western Center on Law and Poverty]
- **Ensure Quality in Medi-Cal Managed Care plans** that cover nearly one-third of Californians and need to be accountable for improving health care quality and reducing disparities. **AB 537 (Arambula)** (*two-year bill*) [Co-Sponsored by California Pan Ethnic Health Network and Western Center on Law and Poverty]
- **Require plan-specific reporting on cost, quality and disparities** for plans that participate in Covered California. They must provide enrollee data so Covered California can report annually on and publish plan-specific cost, quality, and disparity data, so we can better target where needs remain. **AB 929 (Luz Rivas)** [Co-Sponsored by California Pan Ethnic Health Network and Health Access California]

COVER ALL CALIFORNIANS, INCREASING UNIVERSALITY AND AFFORDABILITY

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 allow more people to access care. In the 2019-20 Budget, the California Governor and Legislature agreed to include several significant investments in health care, including some first-in-the-nation steps to provide a down payment to get to near universal coverage, which are 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)** (*two-year bill*) [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. [Formerly SB 65 (Pan), AB 174 (Wood), sponsored by Health Access California]
- **Maintain stability in individual market and prevent premium spikes** by implementing a state *individual mandate* penalty, improving affordability in Covered California and encouraging enrollment. [Formerly 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. [Formerly 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 allowing 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

- **Keep consumers covered** by helping consumers avoid coverage gaps when they undergo life events that cause them to lose health coverage either from Medi-Cal or other private health coverage. **SB 260 (Hurtado)** [Co-Sponsored by Health Access California and Western Center on Law and Poverty]
- **Streamline and encourage insurance enrollment** by instituting express lane enrollment into Medi-Cal for those in the WIC (women, infants, and children) program. **AB 526 (Petrie Norris)** [Co-Sponsored by The Children's Partnership, Children Now, Children's Defense Fund – California, and California Coverage and Health Initiatives]
- **Raise the assets limit for seniors in Medi-Cal** to ensure seniors don't lose access to Medi-Cal for having small amounts of savings to guard against financial crises. **AB 683 (Carrillo)** (*two-year bill*) [Co-sponsored by Western Center on Law and Poverty and Justice in Aging]
- **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]
- **Stop seniors from losing free Medi-Cal** by fixing Medi-Cal income counting rules that cause 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]
- **Level up benefit standards & prescription drug protections** by codifying Knox-Keene Act "basic health care services" definitions and protections into the Insurance Code so all consumers, regardless of who regulates their coverage, get the same benefits and consumer protections. **AB 1246 (Limon)** [Sponsored by Health Access California]
- **Extend open enrollment deadline** in Covered California to January 31st in order to give consumers more time to shop, buy, and enroll in affordable coverage. **AB 1309 (Bauer Kahan)** [Sponsored by Health Access California]