# LEGISLATIVE SUMMARY 2003

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AUDITS AND INVESTIGATIONS

SB 151 Burton (Chapter 406)
CONTROLLED SUBSTANCES: SCHEDULE II

SB 151, sponsored by the Department of Justice, eliminates the July 1, 2008 sunset date on the Controlled Substances Utilization Review and Evaluation System (CURES) administered by the Department of Justice (DOJ), and eliminates, effective July 1, 2004, the requirement that Schedule II controlled substances prescriptions be written on triplicate forms.

SB 359 Figueroa (Chapter 595)
PROFESSIONS AND VOCATIONS

SB 359, sponsored by the author, requires medical services boards to convene disciplinary hearings to suspend, revoke or take other action regarding a license or certificate if the licensee or certificate holder has been convicted of any felony involving fraud committed in conjunction with providing benefits covered by workers' compensation insurance.

SB 857 Speier (Chapter 601)
MEDI-CAL: PROVIDERS

SB 857, sponsored by the author, makes changes to the Medi-Cal program intended to ensure the fiscal integrity of the Medi-Cal system. This bill allows the Department of Health Services (DHS) to establish a provisional enrollment process that gives “preferred provisional” or “provisional” provider status to all new applicants, providers applying for continued enrollment, or providers applying for a new location. The bill mandates monetary penalties for improper Medi-Cal billing, and requires patient and provider signatures to document the furnishing of prescription drugs and devices and clinical laboratory services. The bill specifies grounds for terminating a provider’s provisional status. This bill also allows the Director of the DHS to establish and adjust the Medi-Cal codes.
and corresponding reimbursement rates required for compliance with the federal Health Insurance Portability and Accountability Act (HIPAA), without taking regulatory action, to ensure timely compliance with HIPAA.

OFFICE OF CIVIL RIGHTS

AB 268 Mullin (Chapter 165)
STATE EMPLOYMENT SUPERVISOR TRAINING

AB 268, sponsored by the State Department of Rehabilitation, expands newly appointed state supervisor training to include training in employment law as it relates to persons with disabilities.

HEALTH INFORMATION AND STRATEGIC PLANNING

County Health Services and Local Public Health Assistance

AB 1716 Committee on Human Services (Chapter 449)
LOCAL REVENUE FUND: ALLOCATIONS

AB 1716, sponsored by the Committee, reinstates a mechanism used in Fiscal Year (FY) 1992-93 to give priority to caseload-driven social services programs over health and mental health programs in the distribution of “Realignment” funds. It changes the distribution of allocations from the Sales Tax (ST) Growth Account of the Local Revenue Fund (LRF) between the social services, health services and mental health accounts for FY 2003-04 only if there are sufficient funds to do so. It also requires that the caseload portion of the base of each county’s social services account be funded to the FY 2001-02 level before allocating funds to health and mental health accounts. The bill also states the Legislature’s intent to develop recommendations on Realignment by April 1, 2004.

SB 476 Florez (Chapter 707)
EMERGENCY MEDICAL SERVICES

SB 476, sponsored by the author, allows physician and surgeon providers to be reimbursed by a local Maddy Emergency Medical Services (EMS) fund up to 50 percent of the amount claimed for allowable uncompensated care costs and, subject to available funds, an additional amount of the claimed amount in a given year. It will also impose detailed reporting and other administrative requirements on a local agency that administers a local Maddy EMS fund.
AB 540  Bogh (Chapter 307)
DEATH CERTIFICATES: PEACE OFFICERS

Assembly Bill (AB) 540, sponsored by the author, requires that an amended death certificate of a peace officer who was killed in the line of duty be processed immediately upon acceptance for filing and be issued no later than ten business days following acceptance for filing.

AB 1413  Wolk (Chapter 315)
DELAYED REGISTRATION OF BIRTH: DEPENDENT CHILDREN

AB 1413, sponsored by the author, requires the State Registrar to give priority to the processing of an application for a delayed registration of birth for a child who has been adjudged a dependent child of, and who is subject to the jurisdiction of, the juvenile court.

LEGISLATIVE AND GOVERNMENTAL AFFAIRS

AB 1746  Committee on the Budget (Chapter 43)
BUDGET ACT OF 2002

AB 1746, sponsored by the author, appropriates a specified amount of funding, as scheduled, from the General Fund in augmentation of these Budget Act appropriations for the Medi-Cal program in fiscal year 2002-03.

AB 1762  Committee on the Budget (Chapter 230)
HEALTH

AB 1762, sponsored by the author, implements the provisions of the State budget for fiscal year 2003-2004, as it pertains to programs administered by the Department of Health Services (DHS), Department of Mental Health (DMH), Department of Developmental Services (DDS), Department of Managed Health Care (DMHC), the Managed Risk Medical Insurance Board (MRMIB), and the Emergency Medical Services Authority (EMSA). Significant provisions include: a six percent quality assurance fee for all intermediate care facilities for the developmentally disabled; authority to change the Medi-Cal program from accrual to cash accounting and to use it’s current general fund loan authority in budget deficit situations; multi-year encumbrance and expenditure authority for Cancer Research Program funding; multi-year expenditure authority for the Proposition 99 Health Education Account; authority to suspend new client eligibility determination/enrollment in the AIDS Drug Assistance Program in the absence of sufficient funding; authority to contract for medically necessary services for California Children’s Services and Genetically Handicapped persons Program clients; authority to grant funds to eligible clinics under the Seasonal Agriculture and Migratory Workers and Rural Health
Services Development programs for more than three years; termination of the second year Transitional Medi-Cal program; authority to reimburse Medi-Cal beneficiaries for medically necessary costs incurred during the retroactive eligibility period of time; authority to restrict specific service codes to reduce excessive utilization or billing or abuse of particular services by Medi-Cal providers and referring non-Medi-Cal providers; freeze Medi-Cal reimbursement rates for long-term care services through July 31, 2005; reduction of Medi-Cal reimbursement rates by 5 percent until January 1, 2007, for most providers, with specific exceptions; limitations on Medi-Cal reimbursement rates for prosthetic and orthotic appliances and clinical laboratory services; revision of the Medi-Cal methodologies for durable medical equipment, hearing aids, and hemophilia blood factors; reinstatement of the supplemental rate adjustment program (WARP) for certain long-term care facilities within a specific time period; delay of implementation of the facility specific rate until August 1, 2005; establishment of a Medi-Cal disease management waiver program; exemption for fiscal year 2003-04 from liability of up to $20.2 million to the County Medical Services Program; appropriation of $24.8 million of Proposition 99 funding for uncompensated emergency medical services; linkage of the Male Involvement and Information and Education family planning programs to Family PACT program services; freeze Medi-Cal hospital reimbursement rates for the 2004-05 year.

AB 1763 Committee on the Budget (Chapter 161)
HEALTHY FAMILIES PROGRAM: RURAL PROJECT FUNDING

AB 1763, sponsored by the author, authorizes funding for rural demonstration projects under the Healthy Families Program to be made available from funds appropriated from the Unallocated Account in the Cigarette and Tobacco Products Surtax Fund and from federal funds.

SB 26a X Committee on the Budget (Chapter 9)
HEALTH

SB 26a X, sponsored by the author, implements budget related activities, including: authority to encumber funding for the prostate cancer treatment program for one fiscal year beyond the year of appropriation; establish semi-annual status reporting for Medi-Cal beneficiaries; repeal of the supplemental rate adjustment program (WARP); establishment of additional utilization controls for reimbursement of dental restoration under Medi-Cal; and establishment of the County Administration Cost Control Plan.
LICENSING AND CERTIFICATION

AB 390  Montanez (Chapter 676)
HEALTH FACILITIES: BACKUP GENERATORS

AB 390, sponsored by the California Healthcare Association, requires that specified health facilities test their diesel backup generator in accordance with the most recent standard set by the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO), which would reduce the current testing requirement from weekly or every other week (depending on facility type) to monthly. These provisions would be repealed as of January 1, 2009.

The Governor released a signing message related to this measure.

AB 464  Levine (Chapter 105)
ADULT DAY HEALTH CARE CENTERS

AB 464, sponsored by One Generation, prohibits Adult Day Health Care (ADHC) centers from requiring family members to attend the center or assist participants in their daily living activities. It also prohibits ADHC centers from discriminating because of race, color, creed, national origin, sex, sexual orientation, or physical or mental disabilities, and stipulates that the ADHC program may not admit any participants that, in the clinical judgment of those administering the program, cannot be appropriately cared for by the program.

AB 769  Maddox (Chapter 69)
REGISTERED DIETICIANS AND DIETETIC TECHNICIANS

AB 769, sponsored by the California Dietetic Association, allows dietitian and dietetic technician students to perform professional activities while enrolled in a supervised practice program. Dietitians and dietetic technicians who have completed a supervised practice program would be allowed to work as such for six months from the date of completion of the practice program or until receipt of failed examination results, whichever occurs first.

AB 1627  Frommer (Chapter 582)
HEALTH CARE

AB 1627, sponsored by the author, requires general acute care hospitals, acute psychiatric hospitals, and special hospitals who use a charge description master, by July 1, 2004, to make a written or electronic copy of it available, post a notice informing patients of its availability, and file a copy of it with the Office of Statewide Health Planning and Development (OSHPD). Requiring hospitals to provide to OSHPD specific revenue information on any price increase charged for patient services, and to
compile a list of the 25 services or procedures commonly charged to patients. Authorizes any person to file a claim with the Department of Health Services (DHS) for the failure of a hospital to comply with provisions of the bill, and change the name of the California Health Manpower Policy Commission to the California Healthcare Workforce Policy Commission.

**SB 130 Chesbro (Chapter 750)**

**HEALTH AND CARE FACILITIES: USE OF RESTRAINTS**

SB 130, sponsored by the author, requires the Health and Human Services Agency (Agency) to provide leadership and coordination necessary to reduce the use of seclusion and behavioral restraints (S&R) in any facility that is licensed, certified or monitored by departments that fall under its jurisdiction. The Agency is to incorporate existing technical assistance and training programs to reduce or eliminate the use of S&R. Requires specific, detailed data collection from facilities for statistical analysis and for posting on the Internet for public access. Various provisions of the bill expressly state that it is the intent of the Legislature that the provisions be implemented within existing resources.

**SB 376 Chesbro (Chapter 411)**

**HEALING ARTS**

SB 376, sponsored by the Association of California Health Care Districts, establishes a pilot project, until January 1, 2011, to allow district hospitals to employ a total of 20 physicians and surgeons as direct employees of the hospitals.

**SB 549 Vasconcellos (Chapter 708)**

**INMATES: SKILLED NURSING FACILITIES**

SB 549, sponsored by the author, authorizes the Director of the California Department of Corrections (CDC) to contract for the establishment and operation of skilled nursing facilities (SNFs) for the incarceration and care of geriatric inmates.

**SB 577 Kuehl (Chapter 878)**

**PROTECTION AND ADVOCACY AGENCIES**

SB 577, sponsored by Protection and Advocacy, Inc., expands the authority of a protection and advocacy agency to protect and advocate for the rights of persons with disabilities; make changes in definitions and provide new definitions for such terms as "abuse," "complaint," "disability," and "probable cause;" and expands and defines the protection and advocacy agency's right of access to public or private facilities, programs, and recipients. Furthermore, expands and defines the agency's right of access to records of persons with disabilities.
SB 932  Bowen (Chapter 65)  
**NONPROFIT CORPORATIONS: HEALTH FACILITIES**

SB 932, sponsored by the author, prohibits the state Attorney General (AG) from consenting to an agreement or transaction involving the sale, transfer, lease, or other disposition of a health facility owned by a nonprofit corporation to a for-profit corporation, a mutual benefit corporation, or another nonprofit corporation, if the seller restricts the type or level of medical services that may be provided at the facility.

SB 937  Ducheny (Chapter 602)  
**CLINICS: LICENSURE AND OPERATION**

SB 937, sponsored by the California Family Health Council, Inc., California Primary Care Association, and Planned Parenthood Affiliates of California seeks to streamline and improve the licensing process for primary care clinics (PCCs) through the elimination of requirements that the sponsors viewed as restrictive, complicated, or burdensome.

The Governor provided a signing message, which requires the author to provide cleanup language clarifying the intent of provisions with respect to DHS’s timeframe for issuing licenses to affiliate clinics.

**LONG-TERM CARE, OFFICE OF**

AB 798  Committee on Aging and Long-Term Care (Chapter 112)  
**MEDICAL: ALL INCLUSIVE CARE FOR THE ELDERLY**

AB 798, sponsored by DHS, provides DHS the authority to establish the Program of All-Inclusive Care for the Elderly (PACE) as a benefit under the Medicaid program as permitted by Federal Law. In addition, it allows the State to enter into three-way party Agreements with the Centers for Medicare and Medicaid Services (CMS) and each PACE Organization; allow current PACE demonstration programs to transition as a Medicaid state option; and grant authority for separate state contracts with PACE Organizations to meet any other state requirements found necessary to provide comprehensive services to those Californians who are elderly and eligible for nursing facility care.
MEDICAL CARE SERVICES

Medi-Cal Managed Care

AB 171  Cohn (Chapter 424)
PUBLIC RECORDS AND MEETINGS: HEALTH RELATED ENTITY

AB 171, sponsored by the Santa Clara Family Health Plan, authorizes the governing board of a special county health authority for the County of Alameda, the City and County of San Francisco, counties selected by the director with the concurrence of the county, and special county health commissions in the Counties of Tulare and San Joaquin to meet in closed session for the purpose of discussion of, or taking action on matters involving, health authority trade secrets. This bill exempts from public disclosure those records of the above health authorities and commissions that reveal the trade secrets of these authorities and commissions. It also exempts those records from disclosure pursuant to any local law requiring the disclosure of public records.

AB 373  Chu (Chapter 139)
HEALTHY FAMILIES PROGRAM

AB 373, sponsored by the California Primary Care Association, requires, effective July 1, 2004, that when a subscriber selects a clinic or an employee of a clinic as his or her provider of primary care (or is assigned by default), the subscriber will be considered assigned directly to that clinic, rather than to an individual practitioner within that clinic. This requirement will be applied to Federally Qualified Health Centers (FQHCs), Rural Health Clinics (RHCs), and primary care clinics under their contracts with the Healthy Families Program (HFP).

AB 1286  Frommer (Chapter 591)
CONTINUITY OF CARE

AB 1286, sponsored by the Department of Managed HealthCare (DMHC), makes several changes to continuity of care requirements in Health and Safety Code and the Insurance Code. It requires a health care service plan (HCSP), with the exception of a HCSP that offers mental health services on an employer-sponsored basis, to file with the DMHC a written continuity of care policy, including a description of its procedures for a block transfer of enrollees from a terminated provider group or hospital to a new provider group or hospital. It extends the notice to enrollee of provider termination to 60 days and the block transfer filing with Department of Health Services (DHS) to at least 75 days prior to the termination of its contract with a provider group or hospital. It also adds a new protected class to the current list of new enrollees entitled to completion of care with their existing provider – infants through the age of 36 months without evidence of disease or special needs.
AB 1628 Frommer (Chapter 583)

HEALTH CARE

AB 1628, sponsored by Kaiser Permanente, requires a nonparticipating hospital to contact an enrollee's health care service plan (HCSP) to obtain the enrollee's medical record information prior to admitting the enrollee as an inpatient for post stabilization treatment following emergency treatment, or prior to transferring an enrollee to a nonparticipating hospital for post stabilization treatment following emergency treatment under specified conditions. It also requires a nonparticipating hospital that admits an enrollee who is not clinically stabilized to contact the enrollee's HCSP as soon as reasonably possible after the enrollees' medical condition is clinically stabilized.

The bill prohibits a nonparticipating hospital that is required to contact the patient's HCSP, and fails to do so, from billing the patient for post stabilization services. If an enrollee is billed, the enrollee may report receipt of the bill to the HCSP and the Department of Managed Health Care (DMHC). DMHC must forward the report to the Department of Health Services (DHS). There is no enforcement provision specified in the bill.

SB 244 Speier (Chapter 590)

CONTINUITY OF CARE

SB 244, sponsored by the Department of Managed Health Care (DMHC), makes several changes to continuity of care requirements in Health and Safety Code and the Insurance Code. It requires a health care service plan (HCSP), with the exception of a HCSP that offers mental health services on an employer-sponsored basis, to file with the DMHC a written continuity of care policy, including a description of its procedures for a block transfer of enrollees from a terminated provider group or hospital to a new provider group or hospital. It extends the notice to enrollee of provider termination to 60 days and the block transfer filing with DMHC to at least 75 days prior to the termination of its contract with a provider group or hospital. It also adds a new protected class to the current list of new enrollees entitled to completion of care with their existing provider -- infants through the age of 36 months without evidence of disease or special needs.

SB 853 Escutia (Chapter 713)

HEALTH CARE LANGUAGE ASSISTANCE

SB 853, sponsored by the author, requires the Department of Managed Health Care (DMHC) to adopt regulations by January 1, 2006, that ensure enrollees in health care service plans (HCSP) have access to language assistance and culturally competent health care services. The regulations would require full service and specialized HCSPs to implement programs to assess subscriber needs, and to provide translation, interpretation, and
culturally competent medical services. The bill also requires DMHC to consider specified factors, to seek public input, to regularly review information regarding compliance and make recommendations for changes, and to work with the patient advocate to incorporate this information into the quality of care report card. This bill also requires the Insurance Commissioner to promulgate similar regulations by January 1, 2006, with respect to health insurers that contract with providers for alternative rates of payment to ensure that insureds have the same access to linguistic and cultural services. In addition, it requires DMHC and the Commissioner to monitor reporting and enforce the requirements of these regulations.

Medi-Cal Operations

AB 1201   Berg (Chapter 443)
MEDI-CAL: SUBACUTE SERVICES

AB 1201, sponsored by the California Healthcare Association and the California Advocates for Nursing Home Reform, requires the Medi-Cal program to indefinitely continue payment of a facility’s subacute reimbursement rate to health facilities with subacute patients, after non-renewal or termination of the facility’s subacute care contract, if the facility maintained nurse-patient staffing ratios; requires a 30-day notice for non-renewal or termination of a subacute care contract; requires the Department of Health Services (DHS) to provide guidance to health facilities regarding expectations for the transfer of subacute patients; incorporates existing Health and Safety (H&S) Code language regarding patient transfer and discharge requirements into the Welfare and Institutions (W&I) Code; and clarifies subacute reimbursement for new patients, and patients requiring readmission to a facility after non-renewal or termination of a subacute contract.

The Governor released a signing message related to this measure.

Medi-Cal Policy

AB 205   Goldberg (Chapter 421)
DOMESTIC PARTNERS

AB 205, sponsored by California Alliance for Pride and Equality, amends existing state law on and after January 1, 2005, to allow domestic partners all rights, benefits, and obligations of married persons under state law. Same sex partners will not be allowed to marry, but will be authorized to enter into a domestic partnership and to terminate the partnership if they so desire. This bill requires the Department of General Services to notify public agencies, including those providing public assistance, to include domestic partners on all forms when they are revised.

The Governor released a signing message related to this measure.
AB 348  Chu (Chapter 94)  
MENTAL HEALTH: INVOLUNTARY CONFINEMENT

AB 348, sponsored by the California Psychological Association, authorizes early release of a patient from a 72-hour hold or from intensive treatment by either a psychiatrist or psychologist, provided both the psychiatrist and psychologist have personally evaluated or examined the patient, are in a collaborative treatment relationship and have consulted on a patient’s condition. This bill also affords civil and criminal protections for psychologists involved in the early release of mental health patients.

AB 525  Cohn (Chapter 48)  
HEARING AID DISPENSING

AB 525, sponsored by Lucile Salter Packard Children's Hospital, deletes a statutory requirement that audiologists who recommend hearing aids for children 16 or younger be certified by the American Speech and Hearing Association (ASHA), and the bill substitutes a requirement that the audiologist be licensed by the State.

AB 632  Kehoe (Chapter 209)  
IN-HOME SUPPORTIVE SERVICES PROVIDERS: BENEFITS

AB 632, sponsored by United Domestic Workers and the American Federation of State, County and Municipal Employees, includes IHSS workers who are employed through a nonprofit or proprietary agency, in a California Department of Social Services (CDSS) labor pool for paying contributions for workers' compensation coverage.

AB 747  Matthews (Chapter 659)  
MEDI-CAL: DURABLE MEDICAL EQUIPMENT: HEARING AIDS

AB 747, sponsored by the author, revises the reimbursement methodology for durable medical equipment (DME) billed to the Medi-Cal program utilizing billing codes with no specified maximum allowable rate. The bill also allows the Department of Health Service (DHS) to require durable medical equipment providers to appeal Medicare denials for dually eligible beneficiaries as a condition of Medi-Cal payment. AB 747 also authorizes the Department of Rehabilitation authority to advance funds to specified entities when they meet established Department of Rehabilitation criteria and provides the Department of Consumer Affairs with additional conditions under which they can revoke or suspend a license or certificate.

The Governor released a signing message related to this measure.
AB 786  Daucher (Chapter 436)
SAN MATEO COUNTY: HOME CARE ASSESSMENT PROJECT

AB 786, sponsored by Health Services Agency of San Mateo County, requires San Mateo County, on a pilot project basis until July 2009, to adopt the minimum data set-home care (MDS-HC) assessment instrument for use by specified home and community-based health programs. The bill also requires San Mateo County to seek funding by an independent research organization for evaluation purposes. The pilot will be implemented only to the extent that federal or private funds are received for implementation of the pilot project. The bill prohibits the use of State funds for purposes of the pilot project. The bill requires the results of the pilot to be reported to the Legislature by May 31, 2009. Certain home health agencies are exempt from the requirements of this legislation.

The Governor released a signing message for this measure, clarifying that implementation of this bill will proceed only if no federal agency requires a State agency to submit a federal waiver for modification of federal requirements as a condition for continued federal funding with implementation of this measure.

AB 801  Diaz (Chapter 510)
CULTURAL AND LINGUISTIC COMPETENCY OF PHYSICIANS

AB 801, sponsored by the California Hispanic Health Care Association and the California Medical Association, requires the Medical Board and the Dental Board to issue three-year, nonrenewable licenses to Mexican physicians and dentists under a new Licensed Physicians and Dentists from Mexico Pilot Program. The bill also creates a voluntary program, to be operated by local medical societies and monitored by the Division of Licensing of the California Medical Board, to increase physicians’ cultural and linguistic competency to address needs of ethnic language minority groups. The bill requires a work group convened by the Division of Licensing to recommend whether credit may be given to physicians who successfully pass training modules or who complete program development. This credit may be in terms of receiving reimbursement enhancements under Medi-Cal, the Healthy Families Program, and health maintenance organizations. Standards will be developed by this work group to determine the degree of competency and reimbursement enhancements.

The Governor released a signing message related to this measure.
AB 948  Nunez (Chapter 438)

POSTGRADUATE STUDY FELLOWSHIP PROGRAM

AB 948, sponsored by Medical Board of California, allows physicians who are not citizens, but are legally admitted to the United States (and physicians who are U.S. citizens but graduates of foreign medical schools) and who seek a clinical fellowship, to participate in a fellowship program in a specialty or subspecialty field, provided that the participation is approved by the Medical Board and that the fellowship program is given in an appropriately licensed clinic or hospital in a medically underserved area of the state. The bill requires these physicians at all times to be under the direction and supervision of a licensed, board-certified physician who has an appointment with a medical school in the state and who is a specialist in the field in which the fellow is to be trained.

The Governor released a signing message related to this measure.

AB 1130  Diaz (Chapter 687)

HEALTH CARE COVERAGE: CHILDREN’S HEALTH FUND

AB 1130, sponsored by Local Health Plans of California, appropriates, for fiscal year 2002–03, $89 million from the County Health Initiative Matching Fund and $164 million from the Federal Trust Fund, for the Managed Risk Medical Insurance Board (MRMIB) to implement the Fund. This bill specifies that these funds may be encumbered through June 30, 2004, and it also deletes a requirement that funds from the County Health Initiative Matching Fund may only be matched with State Children’s Health Insurance Program (SCHIP) funds that otherwise revert to the federal government. (Although this bill continues to refer to the Fund as the Children’s Health Initiative Matching Fund, AB 1762, Chapter 230, Statutes of 2003, changed the name of the Fund to the County Health Initiative Matching Fund.)

The Governor released a signing message related to this measure.

AB 1196  Montanez (Chapter 748)

DRUGS

AB 1196, sponsored by California Association of Nurse Practitioners, authorizes nurse practitioners (NP), certified by the Department of Consumer Affairs, Board of Registered Nursing (BRN), who hold an active furnishing number and who are registered with the United States Drug Enforcement Administration, to furnish Schedule II controlled substances listed in the California Uniform Controlled Substances Act. The law as it currently reads permits NPs to furnish only Schedule III through Schedule V controlled substances.
AB 1524 Richman (Chapter 866)
COUNTY HEALTH INITIATIVE MATCHING FUND

AB 1524, sponsored by Local Health Plans of California, expands health insurance coverage financed from the County Health Initiative Matching Fund to include an uninsured parent of, or a person 19 years of age or older responsible for, a child participating in the Healthy Families Program or receiving Medi-Cal services with no share of cost, and who has income that does not exceed 200 percent of the federal poverty level (FPL).

AB 1528 Cohn (Chapter 672)
HEALTH CARE QUALITY AND COST CONTAINMENT

AB 1528, sponsored by the author, requires the Governor to convene the California Health Care Quality Improvement and Cost Containment Commission and specifies the composition of that commission. This bill requires the commission to examine valid performance information to encourage hospitals and physicians to provide care that is safe, medically effective, patient centered, timely, efficient, and equitable. It also requires the Commission to issue a report to the Legislature and the Governor, on or before January 1, 2005, making recommendations for health care quality improvement and cost containment.

The Governor released a signing message related to this measure.

SB 2 Burton (Chapter 673)
HEALTH CARE COVERAGE

SB 2, sponsored by the California Medical Association and known as the “Health Insurance Act of 2003,” requires employers with more than 200 employees, effective January 1, 2006, to provide health care coverage to employees and make health care coverage available for dependents as well. An employer will choose between purchasing benefits directly from an insurer or paying a fee to a health-purchasing fund to be managed by the newly created State Health Purchasing Program (SHPP) that will be administered by Managed Risk Medical Insurance Board (MRMIB). Employers will receive a tax credit against the fee. If an employer purchases health care coverage for his/her employees directly, then the employer may apply for a waiver of the fee. MRMIB will provide reimbursement of premiums paid by individuals to the employer who apply for and who are found to be eligible for Medi-Cal in an amount in excess of the individuals’ share of cost (SOC). The fees collected will be used by MRMIB and the Department of Health Services (DHS) for the state share of the match to draw down federal matching funds. The bill provides authority to MRMIB to receive a loan for start-up costs.

The Governor released a signing message related to this measure.
SB 24  Figueroa (Chapter 895)
HEALTH CARE: ACCELERATED ENROLLMENT

SB 24, sponsored by Maternal and Child Health Access, requires the Department of Health Services (DHS) to develop and operate two new computerized enrollment systems for the Medi-Cal program: 1) for pregnant women (the Prenatal Gateway) and 2) for newborns (the Newborn Hospital Gateway). Both systems will enable applicants to apply for Medi-Cal from a provider’s office rather than from a county office. SB 24 also requires DHS to use the current Presumptive Eligibility (PE) form (used for the Medicaid option to extend PE for Medi-Cal benefits to certain pregnant women) as a simplified application for Medi-Cal. SB 24 creates the Gateway Fund in the State Treasury, consisting of the Special Funds Account, the Other Public Funds Account, and the Federal Funds Account, that will be used to fund development of the Prenatal Gateway and the Newborn Gateway.

The Governor released a signing message for this measure, indicating that his signature was provided with the understanding that the author will introduce legislation in 2004 to allow DHS twelve months from the appropriation of non-General Fund monies and approval of necessary staff to begin enrollment via the Gateways.

SB 36  Chesbro (Chapter 527)
MEDI-CAL

SB 36, sponsored by the California Primary Care Association, codifies a reimbursement methodology for Medi-Cal services provided by federally qualified health centers (FQHC) and rural health clinics (RHC). This reimbursement methodology varies from the methodology adopted by the Department of Health Services (DHS) in a State Plan Amendment (SPA) that the federal Centers for Medicare & Medicaid Services (CMS) has approved.

SB 228  Alarcon (Chapter 639)
WORKERS’ COMPENSATION

SB 228, sponsored by the author, enact reforms to the worker’s compensation program. This bill does not affect Department of Health Services’ programs. In several locations, however, the bill does refer to reimbursement rates used in the Medi-Cal program.

SB 308  Figueroa (Chapter 253)
MEDI-CAL OUTREACH: NATIVE AMERICANS

SB 308, sponsored by California Rural Indian Health Board, Inc., authorizes Native American tribes, tribal organizations, and tribal subgroups to participate in either or both of the Medi-Cal Targeted Case Management (TCM) and Medi-Cal Administrative Activities (MAA)
claiming process programs, at their option. The bill authorizes the Department of Health Services (DHS) to contract with Native American tribes, tribal organizations, and tribal subgroups for administrative and case management activities. This provides a mechanism for tribal organizations to receive federal matching funds for these activities.

The Governor released a signing message related to this measure.

SB 370 Soto (Chapter 321)
MEDICAL DIALYSIS: END STAGE RENAL DISEASE

SB 370, sponsored by the California Dialysis Council, prohibits the Department of Health Services (DHS) from requiring prior authorization for end stage renal disease (ESRD) dialysis under the Medi-Cal program.

The Governor released a signing message related to this measure.

SB 490 Alpert (Chapter 651)
PHARMACY: PRESCRIPTIONS

SB 490, sponsored by the Public Health Institute, authorizes a pharmacist to furnish Emergency Contraceptive Drug Therapy (ECDT) in accordance with a standardized procedure or protocol approved by the Board of Pharmacy and the Medical Board of California. The bill also defines the training the participating pharmacist must attend, prior to furnishing ECDT, to be at least 1 hour of approved continuing education on ECDT.

SB 545 Speier (Chapter 652)
EMERGENCY CONTRACEPTION DRUG THERAPY

SB 545, sponsored by the American College of Obstetricians and Gynecologists, prohibits pharmacists from charging a separate consultation fee for emergency drug contraception therapy (ECDT), but authorizes pharmacists to charge an administrative fee not to exceed ten dollars ($10) above retail cost of the ECDT. This bill prohibits pharmacists from requiring the patient to provide any individually identifiable medical information beyond standard information on patient medication records, which contain no data on sexual behavior, before initiating ECDT.

SB 620 Scott (Chapter 547)
ANNUITIES: LIFE INSURANCE: REQUIRED DISCLOSURES

SB 620, sponsored by the author, creates additional restrictions on the sale of disability insurance, life insurance or annuities to individuals age 65 or older, particularly when the purpose of the sale is to affect Medi-Cal eligibility.
SB 686  Ortiz (Chapter 899)
LONG TERM CARE FACILITIES: INSURANCE: MEDI-CAL

SB 686, sponsored by the author, requires: 1) insurers issuing policies of liability insurance to long-term care (LTC) facilities, residential care facilities for the elderly, and physicians who provide or oversee the provision of medical services to residents of those facilities, to provide additional notice to the Department of Insurance (DOI) when they wish to leave the market; 2) each insurer to report to the Insurance Commissioner specified information; and, 3) the Department of Health Services (DHS) to implement, by August 1, 2004, a new Medi-Cal facility-specific rate-setting system for LTC facilities.

The Governor released a signing message for this measure, indicating that his signature was provided with the understanding that the Medi-Cal long term care rate freeze will remain in place until August 2005, consistent with the 2003 Budget Act and that the nursing home industry, labor, and the Legislature will continue to work on a non-General Fund source to support a new LTC rate methodology.

SB 907  Burton (Chapter 485)
PROFESSIONS AND VOCATIONS: NATUROPATHIC DOCTORS

SB 907, sponsored by California Association of Naturopathic Physicians, establishes, until July 1, 2009, the Naturopathic Doctor’s Act, which creates a Bureau of Naturopathic Medicine within the Department of Consumer Affairs (DCA). This bill creates the Naturopathic Doctor’s Fund and establishes fees collected by the Bureau to be deposited into the fund. The bill sets standards for licensure and regulation of naturopathic medicine that will be enforced by the Bureau.

Payment Systems

AB 763  Liu (Chapter 532)
PRIVACY: SOCIAL SECURITY NUMBERS

AB 763, sponsored by the author, in conjunction with SB 25, prohibits the printing of an individual’s social security number on any card required for the individual to access products or services, including the Medi-Cal Benefit Identification Cards (BICs).

AB 999  Horton J (Chapter 747)
MEDI-CAL: DENTAL RESTORATIVE MATERIALS

AB 999, sponsored by Consumers for Dental Choice, authorizes Medi-Cal providers to recommend, after consultation with the beneficiary, amalgam fillings or other specified alternative fillings. The bill specifies that dentists will receive the same Medi-Cal reimbursement for an alternative dental restorative material as for an amalgam filling.
SB 25  Bowen (Chapter 907)

PERSONAL INFORMATION: SECURITY

SB 25, sponsored by the author, in conjunction with AB 763, prohibits the printing of an individual’s social security number on any card required for the individual to access products or services, including the Medi-Cal Benefit Identification Cards (BICs).

MULTICULTURAL HEALTH, OFFICE OF

AB 9  Dymally (Chapter 200)

URBAN COMMUNITY HEALTH INSTITUTE

AB 9, sponsored by the Charles R. Drew University of Medicine and Science, creates the Urban Community Health Institute Centers to Eliminate Health Disparities (Institute) at the Charles R. Drew University of Medicine and Science. The Institute will focus on the elimination of health disparities in the delivery of health services to multicultural populations in targeted areas of Los Angeles County. The provisions of the bill shall be implemented only to the extent that private or federal funding is received for this purpose. There is no appropriation.

PREVENTION SERVICES

AB 1371  Yee (Chapter 397)

HUMAN EXPERIMENTATION

AB 1371, sponsored by Protection and Advocacy, Inc., proposes changes regarding informed consent and surrogate approval for human experimentation. AB 1371 requires disclosure of a material financial stake or interest ($10,000 or greater) on written informed consent forms and increase fines for researchers who fail to obtain proper informed consent. Fines are also increased for pharmaceutical company employees who fail to disclose serious risks or hazards to researchers. AB 1371 requires that surrogate decision-makers base decisions to approve participation in medical experimentation, to the extent possible, on “substituted judgement” in accordance with the person’s wishes and health care

Office of AIDS

AB 879  Koretz (Chapter 746)

HUMAN IMMUNODEFICIENCY VIRUS

AB 879, sponsored by the author, requires the Department of Health Services (DHS) through Office of AIDS (OA), to appoint and convene a task force to develop recommendations for the use of post-exposure prophylaxis (PEP) in the general population. Also establishes requirements for task force membership.
Chronic Disease and Injury Control

AB 24 Negrete McLeod (Chapter 442)
REAL PROPERTY HAZARDS: NOTICE

Assembly Bill (AB) 24, sponsored by the author, has two components. The first component extends the sunset date from 2004 to 2006 requiring home sellers to give notice to prospective home purchasers about past manufacture of toxic substances (illegal drug labs) in the residential property. The second component allows for the creation of a brochure containing information regarding swimming pool and spa safety. The bill encourages an unnamed private entity, in consultation with the Epidemiology and Prevention for Injury Control (EPIC) Branch of the California Department of Health Services (DHS), to produce an informative brochure for consumer use. If a private entity produces the document and donates it to the department, DHS must review and approve the brochure within 18 months, and place the document on its web site. In his signing message, the Governor urged the state to take additional steps to inform and remind pool owners and users of steps they can take to minimize the risk of drownings. He further directed DHS to implement the bill within existing resources.

AB 71 Horton J (Chapter 890)
TOBACCO PRODUCTS: STATE AND LOCAL GOVERNMENT

AB 71, sponsored by the author, requires the establishment of a program to license tobacco retailers, wholesalers/distributors, importers, and cigarette manufacturers, which will be administered by the State Board of Equalization (BOE). The bill requires a one-time application fee of $100 by tobacco retailers and an annual no-fee renewal of the license, an annual $1,000 registration by tobacco wholesalers/distributors, and a one-time only registration (one cent [$0.01] per package of cigarettes manufactured or shipped to California in 2002) of cigarette manufacturers and importers. Tax evasion-related enforcement activities are to be conducted by BOE and the Department of Justice (DOJ). The bill includes additional fines and penalties for sales of tobacco to minors including license suspension if there are four to seven violations in 12 months and license revocation after there have been eight violations in 24 months. The possibility of license suspension or revocation for tobacco sales to minors will only be in effect, if the state rate of tobacco sales to minors is 13 percent or greater. In his signing message, the Governor strongly opposed the provisions that allow a vendor to remain licensed by the State to sell tobacco after they have been sanctioned numerous times for selling cigarettes to minors. He urged the Legislature to enact tougher legislation next year that enables the State to aggressively monitor and enforce laws prohibiting tobacco sales to minors and specifies stronger penalties on those who violate the law. DHS is required to provide training to retailers and their employees upon the first violation of selling to a minor. There is no appropriation for DHS.
AB 195  Chan (Chapter 550)
HEALTH EDUCATION

Assembly Bill (AB) 195, sponsored by the Department of Managed Health Care, permits school districts to provide instruction in the classroom on preventive health care, including obesity prevention, and diabetes through nutrition education. The bill adds managed health care and health care providers as voluntary participants in providing health education, but provides for specific marketing prohibitions.

AB 429  Dymally (Chapter 140)
PROSTATE CANCER: TREATMENT SERVICES

Assembly Bill (AB) 429, sponsored by the author, requires prostate cancer treatment contract(s) administered and awarded by the Department of Health Services (DHS) to expressly include the Charles R. Drew University of Medicine and Science, an affiliate of the David Geffen School of Medicine at the University of California at Los Angeles (UCLA), in the list of nonprofit organizations to which any such contract(s) can be awarded.

AB 766  Longville (Chapter 745)
TYPE 2 DIABETES MELLITUS: PUPIL SCREENING

Assembly Bill (AB) 766, sponsored by the author, establishes a three-year pilot program to screen school children at risk for developing Type 2 Diabetes Mellitus (DM2). It allows any school district to participate in the pilot program if the cost of the school district’s participation is covered with local funding. The proposed DM2 screening would be done in association with the current scoliosis screening process. AB 766 requires that the California Department of Education (CDE), in consultation with the Department of Health Services’ (DHS) Diabetes Prevention and Control Program (DPCP), to develop DM2 screening standards and procedures to be adopted as regulations by the State Board of Education. CDE, in consultation with DPCP, must select and review all educational and notification materials which will be given to parents and/or guardians of at-risk students. The bill repeals the pilot program on January 1, 2008.

AB 846  Vargas (Chapter 342)
SMOKING: PUBLIC BUILDINGS

AB 846, sponsored by the author, extends the smoking prohibition from 5 feet to within 20 feet of a main exit, entrance, or operable window of a public building. The definition of “public building” has been expanded to include not only a state owned and occupied, or leased and occupied building, but also a county, a city, a city and county, or a California community college district building.
AB 942  Leno (Chapter 684)
EMERGENCY MEDICAL SERVICES: DIABETES

Assembly Bill (AB) 942, sponsored by the American Diabetes Association, allows each school district to provide voluntary emergency medical training to school personnel to administer emergency medical assistance to pupils with diabetes in the absence of school nurses. It also requires schools to allow children with diabetes to carry out prescribed diabetes self-management procedures at any time and at any place on campus.

The Governor signed the bill with an understanding that the author has committed to pursue cleanup legislation that would provide stronger legal protections for schools and school staff in the event that a pending Legislative Counsel opinion identifies such a problem.

AB 1220  Berg (Chapter 395)
HEART DISEASE AND STROKE PREVENTION

Assembly Bill (AB) 1220, sponsored by the American Heart Association, requires that a Heart Disease and Stroke Prevention Task Force (Task Force) be convened by the Department of Health Services (DHS), using funding exclusively from foundations and other private sources. The 12-member Task Force will create a Cardiovascular Disease and Stroke Prevention and Treatment State Master Plan (State Master Plan). The State Master Plan must be submitted to the Legislature, Governor and DHS by November 1, 2005. Implementation of the provisions of the bill are contingent upon the receipt of private funding in an amount sufficient to fund the entire cost of the operation of the task force and costs associated with completing the requirements, as determined by DHS. The bill becomes inoperative on March 1, 2006, and repealed as of January 1, 2007.

ACR 16  Nation (Chapter 62)
HEALTH: CANCER PROGRAM

ACR 16, sponsored by Project Healthy Beginnings, urges the State Departments of Education and Health Services to develop nutritionally sound school lunch menu plans that would provide daily optional plant-centered vegetarian school lunches. The bill states that nutrition educational materials and instruction should include information about multicultural eating patterns and vegetarian/vegan eating patterns.

SB 65  Torlakson (Chapter 458)
SCHOOL DISTRICT GOVERNING BOARDS: CONTRACTS

Senate Bill (SB) 65, sponsored by the author, prohibits the governing board of a school district from entering into or renewing any contract for the sale of carbonated beverages or non-nutritious beverages and certain non-nutritious food unless the governing board provides to parents and the public an opportunity to comment on the contract by holding a public
hearing at a regularly scheduled board meeting. A governing board of the school district must also make accessible to the public any contract into which it enters. Any contract entered into may not include a confidentiality clause that would prevent making any part of the contract public.

SB 78 Torlakson (Chapter 459)

PHYSICAL EDUCATION

Senate Bill (SB) 78, sponsored by the author, requires the California Department of Education (CDE) to encourage K-12 schools to provide quality physical education that develops the knowledge, attitudes, skills, behavior and motivation needed to be physically active and fit for life. It also requires CDE to establish extracurricular physical activity and fitness programs and clubs. Existing law authorizes the governing board of a school district or the office of the county superintendent of schools, with the consent of a pupil, to grant the pupil exemption from physical education classes for two years any time during grades 10 to 12 if the pupil passes the physical performance test. This bill would delay the requirement that a pupil pass the physical performance test as a condition of receiving the exemption until July 1, 2007. Acceptable reasons to grant temporary exemptions to a pupil from physical education courses are also outlined in the bill.

SB 677 Ortiz (Chapter 415)

CALIFORNIA CHILDHOOD OBESITY PREVENTION ACT

Senate Bill 677, sponsored by the author, will allow the sale of only specified healthy beverages beginning July 1, 2004, for elementary and middle schools. It also requires the restrictions on the sale of beverages to begin in July of 2004, regardless of the allocation of funds. This bill also deletes a provision making current nutrition standards enacted in SB 19 (Chapter 913, Statutes of 2001) operative only if funding is appropriated on or before January 1, 2004, to instead make those standards operative when appropriations are made.

SB 875 Escutia (Chapter 879)

CHILD AND PARENTAL NUTRITION

SB 875, sponsored by the Western Growers Association, requires the Department of Health Services (DHS) to develop or obtain a brochure on educating pregnant women and new parents about the importance of preventing chronic disease by eating more fruits and vegetables and staying active every day. The brochure will be distributed in English and Spanish to participants in BabyCal and Access for Infants and Mothers (AIM). The bill provides that the law shall be implemented if, and to the extent that, federal funds, private funds, or both are available for that purpose. This bill requires that the brochure be published on DHS’ website and that the legislation take effect immediately as an urgency statute.
SB 1016  Bowen (Chapter 603)

TOBACCO PRODUCTS: SALE

SB 1016, sponsored by the author, requires each retail sale of cigarettes to be a vendor-assisted, face-to-face sale. This bill permits a person to engage in a non-face-to-face sale of cigarettes to a person in California provided, that both of the following conditions are met:

- The seller has fully complied with all of the requirements of Chapter 10A (commencing with Section 375) of Title 15 of the United States Code, otherwise known as the Jenkins Act;
- The seller has fully complied with either of the following requirements: 1) All applicable California taxes on the cigarettes have been paid; or 2) The seller includes on the outside of the shipping container for any cigarettes shipped to a resident in California from any source in the United States (U.S.) an externally visible and easily legible notice with the required wording that the consumer has been reported to the Board of Equalization (BOE) and is legally responsible for paying the taxes.

SB 1075  Committee on Health and Human Services (Chapter 886)

HEALTH AND SOCIAL SERVICES

Senate Bill (SB) 1075, sponsored by the Committee, requires that the Department of Health Services (DHS) include in web site content or in any breast cancer literature it produces certain information on: 1) breast cancer risk factors in younger women, and 2) alternatives to mammography that may be available and more effective. In his signing message, the Governor states that use of these alternatives to mammography for breast cancer screening, as a more effective tool is only the subject of research at this time. Such detection alternatives should be included when they are proven more effective than mammography for younger women and DHS should include them in breast cancer literature only when clinical research proves them to be. In addition, SB 1075 mandates a reduction in the Department of Developmental Services’ Regional Center’s work activity program rate, which does not impact DHS.

Communicable Disease Control

SB 1081  Senate Health & Human Services Committee (Chapter 419)

HUMAN BLOOD

SB 1081, sponsored by Blood Centers of California, amends the Health and Safety (H&S) Code to delete the requirements associated with the Department of Health Services’ (DHS) Donor Deferral Registry (DDR) for blood banks, terminating the use of the DDR. Blood banks and plasma centers will continue to test human blood and plasma for viral hepatitis and HIV, and will report all hepatitis infections to the local health officer. Reporting requirements for physicians and hospitals are simplified by
removing detail not needed in the H&S Code, referring instead to Title 17 of the California Code of Regulations (CCR) requirements for all disease reporting. The local health officer is no longer required to investigate transfusion-associated cases of AIDS and hepatitis; rather, they would now be required only to identify and notify the source blood bank or plasma center which would then investigate to determine the donor source and contact that donor. Other H&S Code requirements for screening, donation, and testing of blood products remain unchanged.

Drinking Water and Environmental Management

AB 826    Jackson (Chapter 608)
PERCHLORATE CONTAMINATION PREVENTION ACT

Assembly Bill (AB) 826, sponsored by the author, requires the Department of Toxic Substances Control (DTSC) to establish standards for best management practices for the handling of perchlorate materials and to adopt emergency regulations by December 31, 2005. The bill directs DTSC to consult with the Air Resources Board, the Office of Environmental Health Hazard Assessment (OEHHA), the State Water Resources Control Board (SWRCB), the State Fire Marshal (SFM), and the Certified Unified Program Agencies Forum (CUPA) before adopting the regulations. The regulations may contain: 1) procedures for documenting the amount of perchlorate materials managed by the facility; and 2) management practices necessary to prevent releases of perchlorate materials, including containment standards, usage, processing and transferring practices, and spill response procedure. The regulations must be at least as stringent as the existing requirements of Chapter 6.95 of the Health and Safety (H&S) Code and the Uniform Fire Code governing the management of perchlorate materials. The Governor’s signing message for AB 826 directs DTSC to ensure protection of homeland security by protecting the confidentiality of the locations of perchlorate storage facilities.

AB 1747    Committee on Budget (Chapter 240)
PUBLIC RESOURCES

Assembly Bill (AB) 1747, sponsored by the author, is an omnibus natural resources trailer bill which makes necessary changes to state agencies, departments, and programs in order to implement the Budget Act. The bill also establishes a framework for participating state agencies and departments, including the Department of Health Services (DHS), to use in developing guidelines to implement Proposition 50 (Water Security, Clean Drinking Water, Coastal and Beach Protection Act of 2002). DHS’s Proposition 50 implementation responsibilities relate to Sections 79505.6 through 79534 of the bill. These sections are intended to implement the Chapter 3 “Water Security” program and Chapter 4 “Safe Drinking Water” program of Proposition 50. The remaining sections of the bill do not impact DHS.
Senate Bill (SB) 181, sponsored by the Association of California Water Agencies, provides a mechanism for a water district that is primarily an irrigation district to record a notice with the County Recorder. The notice must contain the findings of the Department of Health Services (DHS), under sections 116275(s) and 116286 of the Health and Safety Code, as to whether or not a connection shall be counted towards the 15 service connections necessary to make the water system a public water system and whether or not an agricultural exemption applies. SB 181 also requires a water district to: 1) annually publish a notice in a newspaper of any DHS’ findings and any record of compliance by the water district with these findings; and 2) provide notice to the owner(s) of the property that the findings have been recorded.

Senate Bill (SB) 1002, sponsored by the Santa Clara Valley Water District, authorizes the State Water Resources Control Board to enter into an agreement with the Santa Clara Water District to implement the underground storage tank regulatory oversight within their jurisdiction and provide necessary funding.

Senate Bill (SB) 1004, sponsored by Environment California, requires any person responsible for a perchlorate discharge into the waters of the state to immediately notify the State Water Resources Control Board (SWRCB). Additionally, all owners and operators of perchlorate storage facilities in use since 1950 are required to submit information to the SWRCB regarding the annual perchlorate volumes and storage methods and locations. SB 1004 also requires the SWRCB to publish a list of all past and present perchlorate storage facilities in the state by January 1, 2006.

AB 998, sponsored by the Coalition for Clean Air, imposes a $3 per gallon fee on manufacturers and importers of the solvent perchloroethylene used in dry cleaning. On January 1, 2005, this fee will increase $1 each year until 2013. Fees will fund grants for dry cleaners to convert to “nontoxic” dry cleaning systems and a demonstration program. Up to 30 percent of the funds can be used for the demonstration program. The demonstration program will be supported by 50 percent matching funds. Fifty percent of
grant funds will go to communities with the most air contaminants. All fund expenditures require appropriation by the Legislature. The Office of Environmental Health Hazard Assessment (OEHHA), Water Resources Control Board (WRCB), and Department of Toxic Substances Control (DTSC) and other designated entities will be consulted to determine if substitutes are non-toxic and non-smog forming. The Governor’s signing message for AB 998 indicates the understanding that the Air Resources Board, OEHHA and DHS will implement its provisions within existing staff resources.

**AB 1360 Steinberg (Chapter 664)**

**ENVIRONMENTAL QUALITY: ENVIRONMENTAL INDICATORS**

The bill, sponsored by the State Office of Environmental Health Hazard Assessment, permits nurse practitioners (NP), certified by the Department of Consumer Affairs, Board of Registered Nursing (BRN), who hold an active furnishing number and who are registered with the United States Drug Enforcement Administration, to furnish Schedule II controlled substances listed in the California Uniform Controlled Substances Act. The law previously permitted NPs to furnish only Schedule III through Schedule V controlled substances.

**SB 189 Escutia (Chapter 407)**

**ENVIRONMENTAL HEALTH TRACKING SYSTEM: DISEASE**

SB 189, sponsored by the author, requires the State Department of Health Services (DHS), the California Environmental Protection Agency (Cal/EPA), and the University of California (UC) to jointly develop and sign a memorandum of understanding (MOU) on or before July 1, 2004, to assess the feasibility of integrating existing environmental hazard, exposure, and health outcome databases. The intent of this MOU is to also describe how existing data sources correspond to specific recommendations of the Expert Working Group for SB 702 (Escutia, Chapter 538, Statutes of 2001). SB 189 also authorizes the California Environmental Health Tracking Program (CEHTP) in the Division of Environmental and Occupational Disease Control (DEODC) to obtain a description of California’s environmental hazard and disease surveillance systems, a description of relevant laws that mandate these systems, and information on the current sources of funding for these systems.

**SB 331 Romero (Chapter 873)**

**TOXIC INJURIES: LIMITATION ON ACTIONS**

SB 331, sponsored by the Consumer Attorneys of California, establishes a separate statute of limitation for any civil action for injury, illness, or wrongful death, based upon exposure to a “hazardous material or toxic substance” other than asbestos. The bill also states the intent of the Legislature to codify and disapprove the rulings in specific related court cases.
SB 352 Escutia (Chapter 668)  
**SCHOOLSITES: SOURCES OF POLLUTION**

SB 352, sponsored by the Natural Resources Defense Council, increases the amount of money paid by a person convicted of domestic violence offenses from $200 to $400 and shifts the allocation of these fees. Two-thirds of the money will be distributed to counties for county domestic violence program special funds and one-third of the funds will be distributed to the state for two domestic violence-related funds. The fee increase remains in effect until January 1, 2007.

**Food, Drug, and Radiation Safety**

**AB 776 Matthews (Chapter 726)**  
**AGRICULTURE**

AB 776, sponsored by the author, makes technical changes to California’s Food and Agriculture (F&A) Code by: 1) providing that non-steroidal anti-inflammatory drugs can be used on show horses in specific situations without disqualification of the horse; 2) changing the name of the California Department of Food and Agriculture’s (CDFA) Milk and Dairy Foods Control Branch to the Milk and Dairy Food Safety Branch; and 3) changing the coverage of milk producers by the Milk Producers Security Trust Fund under specified circumstances. AB 776 also makes technical changes to the California Organic Products Act of 2003 (COPA) by: 1) amending the F&A Code to clarify the amount of registration fees to be paid to CDFA by California producers, handlers, processors, and retailers of organic products regulated by CDFA; and 2) amending existing Health and Safety (H&S) Code Section 110815(c), which provides a definition for “Enforcement Authority” in COPA, but erroneously refers to H&S Code Section 110930. The correct section number is H&S Code section 110930, which was transposed in the original bill, AB 2823 (Chapter 533, Statutes of 2002).

**AB 1045 Leslie (Chapter 454)**  
**MOBILE FOOD FACILITIES**

Assembly Bill (AB) 1045, sponsored by the author, expand the types of food products allowed to be prepared on and sold from a mobile food facility (MFF), provided that the MFFs meet the expanded construction, equipment, and safety requirements.

**AB 1738 Committee on Health (Chapter 453)**  
**RETAIL FOOD FACILITIES: MOBILE UNITS**

Assembly Bill (AB) 1738, sponsored by the California Retail Food Safety Coalition, contains several diverse amendments to the California Uniform Retail Food Facilities Law (CURFFL). AB 1738 reduces the temperature requirement for holding hot, potentially hazardous food (PHF) from 140
degrees Fahrenheit (F) to 135 degrees F; changes some aspects of construction and operation of restaurants, mobile food facilities (MFFs), and temporary food facilities (TFFs); and makes other technical changes for consistency and clarity.

AJR 13  Leno (Chapter 64)
MEDICAL CANNABIS

Assembly Joint Resolution (AJR) 13, sponsored by the author, states the Assembly and Senate’s resolve to urge the President and the Congress of the United States to: 1) enact legislation assuring states’ rights to regulate medical cannabis; 2) amend federal controlled substance laws allowing a medical necessity defense; and 3) review federal Drug Enforcement Administration (DEA) policy regarding prosecution and harassment of Californians using medical cannabis in compliance with Proposition 215.

SB 292  Speier (Chapter 544)
PHARMACY: PRESCRIPTION LABELS

Senate Bill (SB) 292, sponsored by the author, amends California’s Pharmacy Law by adding to the prescription label requirements, with certain exceptions, a physical description of the prescribed medication (e.g., color, shape, and code imprint on a tablet or capsule). This addition would be effective January 1, 2006.

SB 295  Vasconcellos (Chapter 704)
CALIFORNIA MARIJUANA RESEARCH PROGRAM

Senate Bill (SB) 295, sponsored by the author, eliminates the University of California’s California Marijuana Research Program’s 3-year duration limit, thus extending the program indefinitely.

SB 420  Vasconcellos (Chapter 875)
MEDICAL MARIJUANA

Senate Bill (SB) 420, sponsored by the author, requires the Department of Health Services (DHS) and county health departments to establish and maintain a voluntary program for the issuance of identification cards to qualified persons, which is intended to increase access by patients and their caregivers to marijuana for medical use.

SB 582  Speier (Chapter 903)
EPHEDRINE GROUP ALKALOIDS

Senate Bill (SB) 582, sponsored by the author, prohibits the sale or distribution of dietary supplements containing ephedrine group alkaloids in California. SB 582 exempts licensed health care practitioners from this prohibition provided that they are not prescribing or dispensing the supplements for weight loss, bodybuilding, or athletic performance.
enhancement. Dietary supplements containing ephedrine group alkaloids that are sold or distributed to licensed health care practitioners or to licensed pharmacists for resale to patients with prescriptions are also exempt from this prohibition. Additionally, the bill exempts dietary supplements containing ephedrine group alkaloids that are sold directly to businesses outside California and are not for resale in California.

**Laboratory Science**

**AB 777**  Dutton (Chapter 309)  
**ANATOMICAL GIFTS: ORGANS: INQUESTS**  
AB 777, sponsored by the California State Coroners Association, assures that organs from deceased individuals requiring an inquest by a coroner or medical officer are released to a qualified Organ Procurement Organization (OPO), if the organs are not required by an inquest to determine the cause of death. The bill has no direct impact on the Department of Health Services, which does not regulate the activities of coroners, medical officers, or OPOs involved in the recovery of organs during an inquest.

**SB 112**  Speier (Chapter 405)  
**CALIFORNIA ORGAN AND TISSUE DONOR REGISTRY**  
SB 112, sponsored by the author, and known as the Organ and Tissue Act of 2003, transfers the responsibility for establishing the California Organ and Tissue Donor Registry from the California Health and Human Services Agency to a not-for-profit organization, known as the California Organ and Tissue Donation Registrar, which will establish and maintain the Registry. It requires the California Department of Motor Vehicles (DMV) to provide information to its licensees on how to be included in the registry and how to financially contribute to its maintenance. Finally, it requires the Organ and Tissue Donor Registry to submit an annual written report, containing specified information, to the Director of the Department of Health Services and the Legislature on the effectiveness of the registry.

**SB 165**  Machado (Chapter 319)  
**CLINICAL LABORATORIES**  
SB 165, sponsored by the Department of Health Services’ (DHS), revises the Business and Professions Code to improve the efficiency of program oversight for clinical laboratory personnel. The provisions of the bill authorize national certification examinations for bioanalyst licensure, issuance of temporary licenses for clinical laboratory specialists, and completion of continuing education requirements during a longer period of time prior to clinical laboratory personnel licensure. The bill also includes a provision that was sponsored by Quest Diagnostics to allow a clinical laboratory to bill for cytological services for Pap smears performed by an affiliated laboratory.
SB 252  Alpert (Chapter 234)
HEALING ARTS

SB 252, sponsored by the California Academy of Physician Assistants, specifies that the provision governing medical assistants does not authorize a medical assistant to perform a clinical laboratory test or examination and does not authorize a nurse practitioner, nurse-midwife, or physician assistant to be a laboratory director of a clinical laboratory.

SB 617  Speier (Chapter 464)
ANATOMICAL GIFTS: TISSUE BANKS: INFORMED CONSENT

SB 617, sponsored by the author, requires the Department of Health Services (DHS) to file a legislative report by January 1, 2004 on the status of regulations pursuant to the section of law that allows DHS to promulgate tissue bank regulations. In regard to informed consent, it requires that all tissue bank applications and renewals contain a copy of the tissue bank’s informed consent. The bill defines cosmetic surgery, donee, and reconstructive surgery and provides that a donor or their representative may specifically opt-out from donating skin for cosmetic surgery, tissue to be used for applications outside the United States, and tissue to be used by for-profit tissue processors and distributors. The bill further requires that the tissue bank provide a copy of the informed consent document or transcript of telephone consent to the donor. It provides that the donor may recover civil penalties against any entity that violates the provisions of this bill in addition to license revocation if appropriate.

SB 1077  Committee on Business and Professions (Chapter 607)
PROFESSIONS AND VOCATIONS

SB 1077, sponsored by the Senate Committee on Business and Professions, makes changes in the law that will impact physicians and surgeons, podiatrists, the California Medical Board, and the Bureau of Medical Statistics. This bill allows a physician to obtain a fictitious name permit under certain circumstances, will exempt license fee payments for retired or disabled physicians, and will remove the requirement for the California Medical Board to conduct research and make reports to the Legislature. The bill does not directly impact the Department of Health Services.
PRIMARY CARE AND FAMILY HEALTH

AB 352  Goldberg (Chapter 431)
DOMESTIC VIOLENCE: PROBATION CONDITIONS

AB 352, sponsored by the Los Angeles County Sheriffs Department, increases the amount of money paid by a person convicted of domestic violence offenses from $200 to $400 and shifts the allocation of these fees. The bill requires that two-thirds of the money will now be distributed to counties for county domestic violence program special funds and one-third of the funds will be distributed to the state for two domestic violence-related funds. The fee increase will remain in effect until January 1, 2007.

AB 561  Lieber (Chapter 643)
FAMILY PLANNING: TEEN PREGNANCY

AB 561, sponsored by Planned Parenthood Affiliates of California, requires that specific teen pregnancy prevention programs, that include the Male Involvement Program (MIP); the Community Challenge Grant (CCG) Program; the TeenSMART Program; and the Information and Education (I&E) Program, be established on a continuing basis within the Office of Family Planning (OFP) in the California Department of Health Services (DHS). The bill requires that special consideration be given to Community Based Organizations (CBOs) in allocating future CCG funding. It also requires that CCG agencies must adhere to specifically referenced California Education Codes when delivering sexual health education in public school settings.

AB 1649  Simitian (Chapter 584)
SPECIAL EDUCATION: SKILLED NURSING FACILITIES

AB 1649, sponsored by the author, requires the State Superintendent of Public Instruction to reimburse local school districts for services provided to pupils with exceptional needs who reside in skilled nursing facilities located in school districts with an average daily attendance of less than 3,000 pupils.

AB 1676  Dutra (Chapter 749)
HIV: MATERNAL AND NEWBORN HEALTH

AB 1676, sponsored by the author, adds the option of including a human immunodeficiency virus (HIV) test to required prenatal care blood tests for every pregnant woman in California; requires medical care providers to explain the purpose of the HIV test; assures the right of women to refuse the HIV test; requires the Department of Health Services (DHS) to develop a specific form for pregnant women to sign documenting their acceptance of the HIV test; requires DHS to develop culturally sensitive informational material covering HIV testing, counseling and prenatal care treatment
resources; and refers HIV-positive women to appropriate prenatal care whenever possible. This bill also requires laboratories to report a positive HIV test result to the local health officer and requires the provider that ordered the test to inform the woman tested of the test results.

ACR 51 Koretz (Chapter 50)
POSTPARTUM AND ANXIETY DISORDER AWARENESS MONTH

ACR 51, sponsored by the author, proclaims the month of May 2003 as Postpartum Mood and Anxiety Disorder (PPMAD) Awareness Month in California. It also requests that the Department of Health Services and the Department of Mental Health work together to explore ways to: improve women’s access to mental health care at the state and local levels, facilitate increased awareness and education, explore and encourage use of prenatal screening tools, and improve the availability of effective treatment services.

SB 71 Kuehl (Chapter 650)
EDUCATION: SEXUAL HEALTH AND HIV/AIDS PREVENTION

SB 71, sponsored by Planned Parenthood Affiliates of California, establishes the California Comprehensive Sexual Health and HIV/AIDS Prevention Education Act; which revises, consolidates, clarifies and expands upon existing provisions of law related to sex and HIV/AIDS prevention education, as specified.

SB 322 Ortiz (Chapter 506)
STEM CELL RESEARCH

SB 322, sponsored by the author, requires the Department of Health Services to develop mandatory guidelines and reporting requirements for Institutional Review Boards to use in approving stem cell research. The bill requires a report to the Legislature on this kind of research activity in California and requires the appointment of an Advisory Committee.

SB 377 Chesbro (Chapter 596)
HEALTHY SERVICES

SB 377, sponsored by the California Rural Indian Health Board, requires the Department of Health Services to provide semi-annual prospective payments to grantees under the American Indian Health Services program during a 12-month fiscal year period, in accordance with specified criteria, and to the extent that funds are available.
SB 771  Ortiz (Chapter 507)
HUMAN CELLS: EMBRYO REGISTRY: EGG CELL DONATION

SB 771, sponsored by the author, requires fertility clinics to use an informed consent form and a form for disposition of embryos, including donation for stem cell research. The bill requires the Department of Health Services to establish an anonymous registry of embryos to the extent such a registry can be funded with non-state funds.

WOMEN’S HEALTH, OFFICE OF

AJR 2  Jackson (Chapter 63)
REPRODUCTIVE RIGHTS: ROE VS. WADE

AJR 2, sponsored by the author, memorializes the Congress and the President of the United States to stand firm in their resolve to uphold the intent and substance of the United States Supreme Court decision in Roe v. Wade, relating to reproductive rights, and to encourage all Americans to participate in the national celebration, Celebrating 30 years of Roe v. Wade, in recognition of that decision's historic importance in promoting women's rights.
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