



**CALIFORNIA
HOSPITAL
ASSOCIATION**

*Providing Leadership in
Health Policy and Advocacy*

April 5, 2019

TO: CHA Members
FROM: Carmela Coyle, President & CEO
SUBJECT: Weekly Advocacy Review

Member Advocacy Call

April 9, 8:30 a.m.

Dial-In: (800) 882-3610 Passcode: 5010912#

*Please **mute** your phone once you
have been connected to the call by entering 61#.
Enter 60# to un-mute your phone for comments/questions.*

FEDERAL

Federal Update (O'Rourke)

The House Education and Labor Committee held a hearing on surprise medical bills, and the Energy and Commerce Committee reported legislation to help reduce drug prices. Further action on these measures by the full House and Senate are uncertain.

Hospital leaders from around the country will join more than 50 of their colleagues from California for the American Hospital Association's Annual Meeting in Washington, DC next week. The California delegation will meet with their congressional representatives to discuss coverage, access, and affordability while seeking to protect payments for graduate medical education, disproportionate share hospitals, hospital-based outpatient services, and care in rural communities.

For additional information, contact Anne O'Rourke at (202) 488-4494 or aurourke@calhospital.org.

STATE

Legislative Update (Scott)

The activity level in policy committees is high, as hearings are scheduled on several hundred bills that must be acted upon by the April 26 deadline. The Legislature will be on spring recess beginning April 12, returning April 22.

On April 1, CHA issued an [Advocacy Alert](#) for SB 567 (Caballero, D-Salinas and Skinner, D-Berkeley), which would define "injury" — for the purposes of workers' compensation — for an employee who provides direct patient care in an acute care hospital to include infectious disease, cancer,

musculoskeletal injuries, post-traumatic stress disorder, and respiratory diseases. CHA encourages hospital leaders to write to Sen. Jerry Hill (D-San Mateo), chair of the Senate Labor, Public Employment and Retirement Committee, to urge opposition to SB 567. Letters should be submitted by April 15.

Legislative action for this week:

- CHA-opposed, unless amended **AB 962** (Burke, D-Inglewood) would require hospitals with operating expenses of \$25 million or more to annually submit a report to the Office of Statewide Health Planning and Development on its minority; women; lesbian, gay, bisexual, and transgender (LGBT); and veteran-owned business procurement efforts. Requires the report to include the hospital's supplier diversity policy statement, outreach and communications strategy, and information about which procurements are made to minority, women, LGBT, and veteran-owned businesses. Imposes civil penalties for a failure to submit the report. AB 962 passed the Assembly Health Committee April 2.
- CHA-opposed **AB 1014** (O'Donnell, D-Long Beach) would require a hospital to provide at least 180 days' notice before reducing or eliminating emergency services, closing the facility, or closing or relocating a supplemental service. AB 1014 passed the Assembly Health Committee April 2.

Other key legislation:

- CHA-opposed **AB 1572** (Chen, R-Yorba Linda) would change the definition of "grave disability," expanding the criteria for involuntary commitment (also referred to as a "5150 hold"). AB 1572 will be heard in the Assembly Health Committee April 9.
- CHA-opposed, unless amended **AB 1611** (Chiu, D-San Francisco) would prohibit hospitals — as a condition of their state licensure — from balance billing all patients, including those with federally regulated coverage. The bill would establish a default rate for non-contracted emergency and post-stabilization services as the greater of 150 percent of the Medicare rate or the average contracted rate paid by the specific health insurer for the same or similar services in the same geographic area. AB 1611 will be heard in the Assembly Health Committee April 23.
- CHA-sponsored **SB 382** (Nielsen, R-Red Bluff/Stern, D-Canoga Park) would clarify health plan responsibilities during times of disaster by asking the plan to help coordinate patient placement, and to reimburse the hospital an extremely modest amount for caring for the patient until that placement happens. SB 382 will be heard in the Senate Health Committee April 10.
- CHA-opposed **SB 227** (Leyva, D-Chino) would require the California Department of Public Health to impose administrative penalties for violations of nurse-to-patient staffing ratios and would eliminate the department's ability to link the penalty amount to the actual risk of harm to patients. SB 227 will be heard in the Senate Health Committee on April 10.
- **SB 464** (Mitchell, D-Los Angeles) would require hospitals that provide perinatal care — as well as alternative birthing centers and specified primary clinics — to implement an implicit bias

training program for all health care providers involved in perinatal care. SB 464 will be heard in the Senate Health Committee April 10.

Information on additional priority health care-related bills is available at www.calhospital.org/legislative-update.