



**CALIFORNIA  
HOSPITAL  
ASSOCIATION**

*Providing Leadership in  
Health Policy and Advocacy*

April 12, 2019

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

Member Advocacy Call

April 16, 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)**

Hospital leaders from around the nation, including 50 from California, were in Washington, D.C. this week for the American Hospital Association's Annual Meeting. The Californians met with almost every member of the congressional delegation to urge strengthening the Affordable Care Act, protecting access to health care, and shielding patients from surprise medical bills. Members of Congress were also asked to sign on to a bipartisan letter calling for a delay in the scheduled cuts to the Medicaid disproportionate share hospital program. CHA will issue an *Advocacy Alert* supporting that letter on Monday.

For additional information, contact Anne O'Rourke at (202) 488-4494 or [aorourke@calhospital.org](mailto:aorourke@calhospital.org).

## **STATE**

### **Legislative Update (Scott)**

The Legislature begins its spring recess today and will return on April 22. The activity level in policy committees will be high when legislators return, as hearings are scheduled on several hundred bills that must be acted upon by the April 26 deadline.

*Legislative action for this week:*

- CHA-supported **AB 890** (Wood, D-Santa Rosa) would authorize a nurse practitioner who meets specified requirements to practice without the supervision of a physician in specified

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environments. AB 890 passed the Assembly Business and Professions Committee April 9 and will now be heard in the Assembly Appropriations Committee.

- 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 is now a two-year bill.
- 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 passed the Senate Health Committee on April 10 and will now be heard in the Senate Appropriations Committee.
- **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 passed the Senate Health Committee April 10 and will now be heard in the Senate Appropriations Committee.

*Other key legislation:*

- 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-opposed **SB 567** (Caballero, D-Salinas and Skinner, D-Berkeley) would define “injury” — for the purposes of workers’ compensation — for a hospital 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. SB 567 will be heard in the Senate Labor, Public Employment and Retirement Committee April 24.
- CHA-sponsored **SB 382** (Nielsen, R-Red Bluff and 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 24.
- CHA-supported **SB 714** (Umberg, D-Orange) clarifies the process to receive an exemption from the Department of Managed Health Care’s Knox-Keene licensure regulation and would presumptively exempt particularly low-risk payment arrangements that fall below quantitative risk thresholds. SB 714 will be heard in the Senate Health Committee on April 24.

Information on additional priority health care-related bills is available at [www.calhospital.org/legislative-update](http://www.calhospital.org/legislative-update).