











CHA 2021 Legislative Highlights

End-of-session results on important bills for California hospitals



With the Legislature having adjourned its 2021 legislative session at midnight last night, below are the outcomes of the year's most significant legislation for hospitals. During yet another session impacted by the COVID-19 pandemic, CHA has tracked and engaged the Legislature on hundreds of bills, many of which had a tremendous impact on hospitals. We will update this report after the governor's Oct. 10 signing deadline, followed by a report on all new laws hospitals must comply with.

WIN  LOSE  DRAW 	OUTCOMES
Disaster Preparedness/Hospital Seismic Mandate — Paused Sponsored a proposal through the state budget process that would have refocused 2030 hospital seismic requirements on post-event emergency services, strengthened patient care areas, and given hospitals an additional seven years to comply with the current mandate. At this time, the language is not included in this year's budget; however, we will continue to press for these reforms in the coming legislative session.	—
Office of Health Care Affordability — Paused Sponsored a proposal through the state budget process that would have refocused 2030 hospital seismic requirements on post-event emergency services, strengthened patient care areas, and given hospitals an additional seven years to comply with the current mandate. As the bill progressed, CHA was able to secure amendments ensuring that: payers are held accountable for spending growth targets; current spending levels can't be reduced; and financial penalties must consider the impact on access, quality, and providers' financial stability. This is now a two-year bill, and the language was not included in this year's budget.	—
Mandatory Bonus Pay — Halted Halted a bill that would have cost California hospitals at least \$6 billion by mandating extra pay for hundreds of thousands of health care workers, on top of the hundreds of millions of dollars that hospitals have already spent — and continue to spend — to protect their workers. (Assembly Bill 650)	
Presumptive Eligibility — Paused Paused a bill that would have created a rebuttable presumption in the workers' compensation system, essentially requiring hospitals to accept more claims with little to no evidence that they are work-related. (Senate Bill 213)	
Behavioral Health Pilot Project — Passed Secured \$40 million in the state budget to continue a Behavioral Health Pilot Project that grants hospitals up to \$100,000 to hire ED staff for patients who need substance abuse and other behavioral health counseling.	
Misaligned Infection Control — Defeated Defeated a bill that would have prevented hospitals from aligning infection control policies with guidance from the Centers for Disease Control and Prevention by mandating they supply PPE to employees regardless of vaccination status, implement weekly COVID-19 screening, and test all admitted patients. (Assembly Bill 1105)	
New Statewide Director of Behavioral Health Crisis Services — Passed Co-sponsored a bill to create a full-time, statewide director of crisis services for behavioral health within the Department of Health Care Services who will establish a comprehensive crisis care system that ensures Californians receive the care they deserve in the most expedient way possible. (Assembly Bill 1331)	
Staffing Reporting — Paused Paused a bill that would have required hospitals to report all layoffs, furloughs, and repeated canceled shifts to the California Department of Public Health (CDPH) for public posting, with no apparent utility to CDPH and no clear benefit to patients and communities. (Senate Bill 637)	
Limiting Health Care Integration — Paused Paused a bill that would have restricted access to care by giving unprecedented decision-making authority to the state's Attorney General, ultimately ending hospitals' ability to participate in managed care arrangements or affiliate with another health care organization. (Assembly Bill 1132)	
Jeopardizing Patient Care — Paused Paused a bill that would have empowered individual physicians to dictate the treatments and services a hospital offers, thereby jeopardizing the balancing of hospital and medical staff responsibility for ensuring patient safety, quality care, and access to care. (Senate Bill 642)	