

CHA 2020 Legislative Highlights

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



OUTCOMES

With the Legislature having adjourned its 2020 legislative session at midnight last night, below are the outcomes of the year's most significant legislation for hospitals. During a session truncated by the COVID-19 pandemic, CHA has tracked and engaged the Legislature on over 100 bills this year. In October, we'll send a report of all new laws hospitals must comply with, after the Governor's Sept. 30 signing deadline.

AG Authority Over Hospital Transactions — *Defeated*

Stopped a bill that expands the Attorney General's power to approve or reject hospital affiliations and mergers. Its defeat protects hospitals' flexibility, which fosters access to care and helps keep costs in check. (Senate Bill 977)



Hospital Seismic Mandate — *Held*

This CHA-sponsored bill would have created an advisory committee to reconsider disaster preparedness requirements, including the 2030 seismic mandate, and would have extended the 2030 deadline to 2037. CHA made the decision to hold it and continue our effort next year when the Assembly Appropriations Committee stripped the advisory committee from the bill and reduced the extension to two years. (Senate Bill 758)



Hospital Rate Regulation — *Defeated*

Helped defeat a bill that would have banned surprise billing for patients, but only by setting a fixed rate for insurance companies to pay hospitals for out-of-network emergency care. Fixed benchmark rates threaten access to care by compromising critical resources. (Assembly Bill 1611)



Managed Care Cuts to Hospitals — *Halted*

Stopped a budget proposal to implement a managed care rate reduction that would have cut Medi-Cal payments to hospitals by as much as \$500 million per year once fully implemented.



Telehealth for "5150" Assessments — *Passed*

Co-sponsored a bill, with the National Alliance on Mental Illness California, that will allow hospitals and their emergency departments to use telehealth to assess and evaluate individuals placed on involuntary holds for a psychiatric crisis — helping patients get the expedited crisis care and timely follow-up they deserve. (Assembly Bill 3242)



Hospital PPE Inventory — *Improved*

Two bills were introduced later in the session requiring hospitals to have personal protective equipment (PPE) stockpiles. While the bills originally required an enormous stockpile, CHA negotiated to significantly decrease the requirements. In Senate Bill 275, hospitals, hospital outpatient settings, and skilled-nursing facilities must create a 45-day "surge consumption" stockpile by January 2023 — as must the state — after an advisory committee makes recommendations. In Assembly Bill 2537, only hospitals must maintain a 90-day "normal consumption" stockpile but far sooner — by April 2021.



Nurse Practitioners: Scope of Practice — *Passed*

Helped pass a bill that will expand access to care for millions of Californians by authorizing nurse practitioners who meet certain requirements to practice to the full extent of their training and without physician supervision in certain environments. (Assembly Bill 890)



Health Information Exchange — *Stopped*

Defeated a last-minute attempt to require hospitals to submit — by the end of the year — real-time admit, discharge, and transfer data to a single data repository.



Workers' Compensation Claims — *Defeated/Mitigated*

- Defeated a bill that would have given workers' compensation benefits to hospital employees with certain illnesses and injuries — including musculoskeletal injuries, infectious diseases, and respiratory diseases — unless the hospital could provide evidence the employee did not contract the illness or injury at work. (Senate Bill 893)
- Created a workers' compensation presumption for direct patient care workers. Exempted hospitals from making workers' compensation determinations for COVID-19 based on workplace outbreaks. CHA also secured amendments to allow for rebuttal with evidence of exposure outside the workplace for non-direct patient care workers. (Senate Bill 1159)
- Defeated two bills that would have created presumptions for direct patient care workers, including those in hospitals, as well as police officers, firefighters, and other essential workers. These bills also included intent language for hospitals to cover other living expenses for health care workers, such as housing. (Assembly Bills 196/664)

