

2016 LEGISLATIVE CALENDAR

(See S.C.R. 37, Chapter 48, Statutes of 2015)
 COMPILED BY THE OFFICE OF THE ASSEMBLY CHIEF CLERK
 Revised 10-7-15

DEADLINES

JANUARY							
	S	M	T	W	TH	F	S
Interim Recess						1	2
Wk. 1	3	4	5	6	7	8	9
Wk. 2	10	11	12	13	14	15	16
Wk. 3	17	18	19	20	21	22	23
Wk. 4	24	25	26	27	28	29	30
Wk. 1	31						

FEBRUARY							
	S	M	T	W	TH	F	S
Wk. 1		1	2	3	4	5	6
Wk. 2	7	8	9	10	11	12	13
Wk. 3	14	15	16	17	18	19	20
Wk. 4	21	22	23	24	25	26	27
Wk. 1	28	29					

MARCH							
	S	M	T	W	TH	F	S
Wk. 1			1	2	3	4	5
Wk. 2	6	7	8	9	10	11	12
Wk. 3	13	14	15	16	17	18	19
Spring Recess	20	21	22	23	24	25	26
Wk. 4	27	28	29	30	31		

APRIL							
	S	M	T	W	TH	F	S
Wk. 4						1	2
Wk. 1	3	4	5	6	7	8	9
Wk. 2	10	11	12	13	14	15	16
Wk. 3	17	18	19	20	21	22	23
Wk. 4	24	25	26	27	28	29	30

MAY							
	S	M	T	W	TH	F	S
Wk. 1	1	2	3	4	5	6	7
Wk. 2	8	9	10	11	12	13	14
Wk. 3	15	16	17	18	19	20	21
Wk. 4	22	23	24	25	26	27	28
No Hrgs.	29	30	31				

- Jan. 1** Statutes take effect (Art. IV, Sec. 8(c)).
- Jan. 4** Legislature reconvenes (J.R. 51(a)(4)).
- Jan. 10** Budget Bill must be submitted by Governor (Art. IV, Sec. 12(a)).
- Jan. 15** Last day for **policy committees** to hear and report to **fiscal committees** fiscal bills introduced in their house in the odd-numbered year. (J.R. 61(b)(1)).
- Jan. 18** Martin Luther King, Jr. Day observed.
- Jan. 22** Last day for any committee to hear and report to the **Floor** bills introduced in their house in 2015 (J.R. 61(b)(2)). Last day to submit **bill requests** to the Office of Legislative Counsel.
- Jan. 31** Last day for each house to pass **bills** introduced in that house in the odd-numbered year (J.R. 61(b)(3)), (Art. IV, Sec. 10(c)).

- Feb. 15** Presidents' Day observed.
- Feb. 19** Last day for bills to be **introduced** (J.R. 61(b)(4), J.R. 54(a)).

- Mar. 17** **Spring Recess** begins upon adjournment (J.R. 51(b)(1)).
- Mar. 28** Legislature reconvenes from Spring Recess (J.R. 51(b)(1)).

- Apr. 1** Cesar Chavez Day observed.
- Apr. 22** Last day for **policy committees** to hear and report to fiscal committees **fiscal bills** introduced in their house (J.R. 61(b)(5)).

- May 6** Last day for **policy committees** to hear and report to the Floor **nonfiscal** bills introduced in their house (J.R. 61(b)(6)).
- May 13** Last day for **policy committees** to meet prior to June 6 (J.R. 61(b)(7)).
- May 27** Last day for **fiscal committees** to hear and report to the Floor bills introduced in their house (J.R. 61(b)(8)). Last day for **fiscal committees** to meet prior to June 6 (J.R. 61(b)(9)).
- May 30** Memorial Day observed.
- May 31 - June 3** **Floor Session only.** No committee may meet for any purpose except Rules Committee, bills referred pursuant to Assembly Rule 77.2, and Conference Committees (J.R. 61(b)(10), J.R. 61(h)).

*Holiday schedule subject to final approval by Rules Committee.

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JUNE							
	S	M	T	W	TH	F	S
No Hrgs.				1	2	3	4
Wk. 1	5	6	7	8	9	10	11
Wk. 2	12	13	14	15	16	17	18
Wk. 3	19	20	21	22	23	24	25
Wk. 4	26	27	28	29	30		

- June 3** Last day for each house to pass bills introduced in that house (J.R. 61(b)(11)).
- June 6** Committee meetings may resume (J.R. 61(b)(12)).
- June 15** Budget Bill must be passed by midnight (Art. IV, Sec. 12(c)(3)).
- June 30** Last day for a legislative measure to qualify for the Nov. 8 General Election ballot (Elections Code Section 9040).

JULY							
	S	M	T	W	TH	F	S
Wk. 4						1	2
Summer Recess	3	4	5	6	7	8	9
Summer Recess	10	11	12	13	14	15	16
Summer Recess	17	18	19	20	21	22	23
Summer Recess	24	25	26	27	28	29	30
Wk. 1	31						

- July 1** Last day for **policy committees** to meet and report bills (J.R. 61(b)(13)). **Summer Recess** begins upon adjournment, provided Budget Bill has been passed (J.R. 51(b)(2)).
- July 4** Independence Day observed.

AUGUST							
	S	M	T	W	TH	F	S
Wk. 1		1	2	3	4	5	6
Wk. 2	7	8	9	10	11	12	13
No Hrgs.	14	15	16	17	18	19	20
No Hrgs.	21	22	23	24	25	26	27
No Hrgs.	28	29	30	31			

- Aug. 1** Legislature reconvenes from Summer Recess (J.R. 51(b)(2)).
- Aug. 12** Last day for **fiscal committees** to meet and report bills (J.R. 61(b)(14)).
- Aug. 15 - 31 Floor Session only.** No committee may meet for any purpose except Rules Committee, bills referred pursuant to Assembly Rule 77.2, and Conference Committees (J.R. 61(b)(15), J.R. 61(h)).
- Aug. 19** Last day to **amend** on the Floor (J.R. 61(b)(16)).
- Aug. 31** Last day for each house to pass bills, except bills that take effect immediately or bills in Extraordinary Session (Art. IV, Sec. 10(c), J.R. 61(b)(17)). **Final Recess** begins upon adjournment (J.R. 51(b)(3)).

IMPORTANT DATES OCCURRING DURING FINAL RECESS

2016

- Sept. 30 Last day for Governor to sign or veto bills passed by the Legislature before Sept. 1 and in the Governor’s possession on or after Sept. 1 (Art. IV, Sec.10(b)(2)).
- Oct. 2 Bills enacted on or before this date take effect January 1, 2017 (Art. IV, Sec. 8(c)).
- Nov. 8 General Election.
- Nov. 30 Adjournment *sine die* at midnight (Art. IV, Sec. 3(a)).
- Dec. 5 2017-18 Regular Session convenes for Organizational Session at 12 noon (Art. IV, Sec. 3(a)).

2017

- Jan. 1 Statutes take effect (Art. IV, Sec. 8(c)).

*Holiday schedule subject to final approval by Rules Committee.

MEDICAL BOARD OF CALIFORNIA - 2016 TRACKER LIST
January 13, 2016

BILL	AUTHOR	TITLE	STATUS	POSITION	AMENDED
AB 611	Dahle	Controlled Substances: Prescriptions: Reporting	Asm. B&P		4/15/15
AB 890	Ridley-Thomas	Anesthesiologist Assistants	Asm. Approps	Support if Amended	5/5/15
AB 1306	Burke	Healing Arts: Certified Nurse-Midwives: Scope of Practice	Sen. B&P	Oppose Unless Amended	7/1/15
SB 22	Roth	Residency Training	Inactive File	Support	6/4/15
SB 323	Hernandez	Nurse Practitioners	Asm. B&P	Oppose	7/9/15
SB 482	Lara	Controlled Substances: CURES Database	Assembly	Support	4/30/15
SB 538	Block	Naturopathic Doctors	Asm. Approps	Oppose	8/17/15
SB 563	Pan	Worker's Compensation: Utilization Review	Sen. Labor & Industrial Relations	Reco: Support	1/4/16
SB 622	Hernandez	Optometry	Asm. B&P	Oppose Unless Amended	5/4/15

Orange – For Discussion, Blue – No Discussion Needed (Bills not moving)

MEDICAL BOARD OF CALIFORNIA
LEGISLATIVE ANALYSIS

Bill Number: SB 563
Author: Pan
Bill Date: January 4, 2016, Amended
Subject: Workers' Compensation: Utilization Review
Sponsor: California Medical Association (CMA)

DESCRIPTION OF CURRENT LEGISLATION:

This bill would ensure that physicians involved in authorizing injured worker medical care on behalf of the employer and/or payor are not being inappropriately incentivized to modify, delay, or deny requests for medically necessary services.

BACKGROUND

In California's workers' compensation system, an employer or insurer cannot deny treatment. When an employer or insurer receives a request for medical treatment, the employer or insurer can either approve the treatment or, if the employer or insurer believes that a physician's request for treatment is medically unnecessary or harmful, the employer or insurer must send the request to utilization review (UR). UR is the process used by employers or claims administrators to review medical treatment requested for the injured worker, to determine if the proposed treatment is medically necessary. UR is used to decide whether or not to approve medical treatment recommended by a treating physician. In California, the Department of Industrial Relations, Division of Workers' Compensation, does not require physicians performing UR to be licensed in California.

In April 2013, the Medical Board of California (Board) reaffirmed that engaging in UR is the practice of medicine and that the Board will not automatically deem UR complaints as non-jurisdictional; the Board will review UR complaints against California-licensed physicians to determine if a quality of care issue is present, and if so, the complaint will undergo the normal complaint review process.

ANALYSIS

This bill would prohibit an employer, or any entity conducting UR on behalf of an employer, from providing any financial incentive or consideration to a physician based on the number of modifications, delays, or denials made by the physician. This bill would give the administrative director the authority to review any compensation agreement, payment schedule, or contract between the employer, or any entity conducting UR on behalf of the employer, and the UR physician.

According to the sponsor, this bill would increase transparency and accountability within the workers' compensation UR process. There is currently no explicit prohibition in law related to UR to ensure that a physician's judgment for medical necessity is not compromised by financial incentives. This bill will promote the Board's mission of consumer protection and staff recommends that the Board take a support position on this bill.

FISCAL: None to the Board

SUPPORT: California Medical Association (sponsor)
California Labor Federation, AFL-CIO
California Orthopedic Association

OPPOSITION: None on file

POSITION: Recommendation: Support

AMENDED IN SENATE JANUARY 4, 2016

AMENDED IN SENATE APRIL 30, 2015

AMENDED IN SENATE APRIL 13, 2015

SENATE BILL

No. 563

Introduced by Senator Pan

February 26, 2015

An act to amend Section 4610 of, and to add Section 4610.2 to, of the Labor Code, relating to workers' compensation.

LEGISLATIVE COUNSEL'S DIGEST

SB 563, as amended, Pan. Workers' compensation: utilization review.

Existing law requires every employer, for purposes of workers' compensation, to establish a utilization review process to prospectively, retrospectively, or concurrently review requests by physicians for authorization to provide recommended medical treatment to injured employees. Existing law establishes timeframes for an employer to make a determination regarding a physician's request. Existing law requires the utilization review process to be governed by written policies and procedures, and requires that these policies and procedures be filed with the Administrative Director of the Division of Workers' Compensation and disclosed by the employer to employees, physicians, and the public upon request.

~~This bill would require that the method of compensation, and any incentive payments contingent upon the approval, modification, or denial of a claim, for an individual or entity providing services pursuant to the utilization review process, as specified, be filed with the administrative director and disclosed by the employer to employees, physicians, and the public upon request. The bill would exempt a request~~

for medical treatment by a physician to cure or relieve an injured worker from the effect of an industrial injury from these requirements if the request meets specified conditions, including that a final award of permanent disability made by the appeals board specifies the provision of future medical treatment and that the request for medical treatment is for medical treatment that is specified by the award. The bill would also include a statement of legislative intent: *prohibit the employer, or any entity conducting utilization review on behalf of the employer, from offering or providing any financial incentive or consideration to a physician based on the number of modifications, delays, or denials made by the physician. The bill would grant the administrative director authority pursuant to this provision to review any compensation agreement, payment schedule, or contract between the employer, or any entity conducting utilization review on behalf of the employer, and the utilization review physician.*

Vote: majority. Appropriation: no. Fiscal committee: ~~no~~-yes.
 State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 4610 of the Labor Code is amended to
- 2 read:
- 3 4610. (a) For purposes of this section, “utilization review”
- 4 means utilization review or utilization management functions that
- 5 prospectively, retrospectively, or concurrently review and approve,
- 6 modify, delay, or deny, based in whole or in part on medical
- 7 necessity to cure and relieve, treatment recommendations by
- 8 physicians, as defined in Section 3209.3, prior to, retrospectively,
- 9 or concurrent with the provision of medical treatment services
- 10 pursuant to Section 4600.
- 11 (b) Every employer shall establish a utilization review process
- 12 in compliance with this section, either directly or through its insurer
- 13 or an entity with which an employer or insurer contracts for these
- 14 services.
- 15 (c) Each utilization review process shall be governed by written
- 16 policies and procedures. These policies and procedures shall ensure
- 17 that decisions based on the medical necessity to cure and relieve
- 18 of proposed medical treatment services are consistent with the
- 19 schedule for medical treatment utilization adopted pursuant to
- 20 Section 5307.27. These policies and procedures, and a description

1 of the utilization process, shall be filed with the administrative
2 director and shall be disclosed by the employer to employees,
3 physicians, and the public upon request.

4 (d) If an employer, insurer, or other entity subject to this section
5 requests medical information from a physician in order to
6 determine whether to approve, modify, delay, or deny requests for
7 authorization, the employer shall request only the information
8 reasonably necessary to make the determination. The employer,
9 insurer, or other entity shall employ or designate a medical director
10 who holds an unrestricted license to practice medicine in this state
11 issued pursuant to Section 2050 or Section 2450 of the Business
12 and Professions Code. The medical director shall ensure that the
13 process by which the employer or other entity reviews and
14 approves, modifies, delays, or denies requests by physicians prior
15 to, retrospectively, or concurrent with the provision of medical
16 treatment services, complies with the requirements of this section.
17 Nothing in this section shall be construed as restricting the existing
18 authority of the Medical Board of California.

19 (e) No person other than a licensed physician who is competent
20 to evaluate the specific clinical issues involved in the medical
21 treatment services, and where these services are within the scope
22 of the physician's practice, requested by the physician may modify,
23 delay, or deny requests for authorization of medical treatment for
24 reasons of medical necessity to cure and relieve. *The employer, or
25 any entity conducting utilization review on behalf of the employer,
26 shall neither offer nor provide any financial incentive or
27 consideration to a physician based on the number of modifications,
28 delays, or denials made by the physician under this section. The
29 administrative director has authority pursuant to this section to
30 review any compensation agreement, payment schedule, or contract
31 between the employer, or any entity conducting utilization review
32 on behalf of the employer, and the utilization review physician.*

33 (f) The criteria or guidelines used in the utilization review
34 process to determine whether to approve, modify, delay, or deny
35 medical treatment services shall be all of the following:

36 (1) Developed with involvement from actively practicing
37 physicians.

38 (2) Consistent with the schedule for medical treatment utilization
39 adopted pursuant to Section 5307.27.

40 (3) Evaluated at least annually, and updated if necessary.

1 (4) Disclosed to the physician and the employee, if used as the
2 basis of a decision to modify, delay, or deny services in a specified
3 case under review.

4 (5) Available to the public upon request. An employer shall
5 only be required to disclose the criteria or guidelines for the
6 specific procedures or conditions requested. An employer may
7 charge members of the public reasonable copying and postage
8 expenses related to disclosing criteria or guidelines pursuant to
9 this paragraph. Criteria or guidelines may also be made available
10 through electronic means. No charge shall be required for an
11 employee whose physician's request for medical treatment services
12 is under review.

13 (g) In determining whether to approve, modify, delay, or deny
14 requests by physicians prior to, retrospectively, or concurrent with
15 the provisions of medical treatment services to employees all of
16 the following requirements shall be met:

17 (1) Prospective or concurrent decisions shall be made in a timely
18 fashion that is appropriate for the nature of the employee's
19 condition, not to exceed five working days from the receipt of the
20 information reasonably necessary to make the determination, but
21 in no event more than 14 days from the date of the medical
22 treatment recommendation by the physician. In cases where the
23 review is retrospective, a decision resulting in denial of all or part
24 of the medical treatment service shall be communicated to the
25 individual who received services, or to the individual's designee,
26 within 30 days of receipt of information that is reasonably
27 necessary to make this determination. If payment for a medical
28 treatment service is made within the time prescribed by Section
29 4603.2, a retrospective decision to approve the service need not
30 otherwise be communicated.

31 (2) When the employee's condition is such that the employee
32 faces an imminent and serious threat to his or her health, including,
33 but not limited to, the potential loss of life, limb, or other major
34 bodily function, or the normal timeframe for the decisionmaking
35 process, as described in paragraph (1), would be detrimental to the
36 employee's life or health or could jeopardize the employee's ability
37 to regain maximum function, decisions to approve, modify, delay,
38 or deny requests by physicians prior to, or concurrent with, the
39 provision of medical treatment services to employees shall be made
40 in a timely fashion that is appropriate for the nature of the

1 employee's condition, but not to exceed 72 hours after the receipt
2 of the information reasonably necessary to make the determination.

3 (3) (A) Decisions to approve, modify, delay, or deny requests
4 by physicians for authorization prior to, or concurrent with, the
5 provision of medical treatment services to employees shall be
6 communicated to the requesting physician within 24 hours of the
7 decision. Decisions resulting in modification, delay, or denial of
8 all or part of the requested health care service shall be
9 communicated to physicians initially by telephone or facsimile,
10 and to the physician and employee in writing within 24 hours for
11 concurrent review, or within two business days of the decision for
12 prospective review, as prescribed by the administrative director.
13 If the request is not approved in full, disputes shall be resolved in
14 accordance with Section 4610.5, if applicable, or otherwise in
15 accordance with Section 4062.

16 (B) In the case of concurrent review, medical care shall not be
17 discontinued until the employee's physician has been notified of
18 the decision and a care plan has been agreed upon by the physician
19 that is appropriate for the medical needs of the employee. Medical
20 care provided during a concurrent review shall be care that is
21 medically necessary to cure and relieve, and an insurer or
22 self-insured employer shall only be liable for those services
23 determined medically necessary to cure and relieve. If the insurer
24 or self-insured employer disputes whether or not one or more
25 services offered concurrently with a utilization review were
26 medically necessary to cure and relieve, the dispute shall be
27 resolved pursuant to Section 4610.5, if applicable, or otherwise
28 pursuant to Section 4062. Any compromise between the parties
29 that an insurer or self-insured employer believes may result in
30 payment for services that were not medically necessary to cure
31 and relieve shall be reported by the insurer or the self-insured
32 employer to the licensing board of the provider or providers who
33 received the payments, in a manner set forth by the respective
34 board and in such a way as to minimize reporting costs both to the
35 board and to the insurer or self-insured employer, for evaluation
36 as to possible violations of the statutes governing appropriate
37 professional practices. No fees shall be levied upon insurers or
38 self-insured employers making reports required by this section.

39 (4) Communications regarding decisions to approve requests
40 by physicians shall specify the specific medical treatment service

1 approved. Responses regarding decisions to modify, delay, or deny
2 medical treatment services requested by physicians shall include
3 a clear and concise explanation of the reasons for the employer's
4 decision, a description of the criteria or guidelines used, and the
5 clinical reasons for the decisions regarding medical necessity. If
6 a utilization review decision to deny or delay a medical service is
7 due to incomplete or insufficient information, the decision shall
8 specify the reason for the decision and specify the information that
9 is needed.

10 (5) If the employer, insurer, or other entity cannot make a
11 decision within the timeframes specified in paragraph (1) or (2)
12 because the employer or other entity is not in receipt of all of the
13 information reasonably necessary and requested, because the
14 employer requires consultation by an expert reviewer, or because
15 the employer has asked that an additional examination or test be
16 performed upon the employee that is reasonable and consistent
17 with good medical practice, the employer shall immediately notify
18 the physician and the employee, in writing, that the employer
19 cannot make a decision within the required timeframe, and specify
20 the information requested but not received, the expert reviewer to
21 be consulted, or the additional examinations or tests required. The
22 employer shall also notify the physician and employee of the
23 anticipated date on which a decision may be rendered. Upon receipt
24 of all information reasonably necessary and requested by the
25 employer, the employer shall approve, modify, or deny the request
26 for authorization within the timeframes specified in paragraph (1)
27 or (2).

28 (6) A utilization review decision to modify, delay, or deny a
29 treatment recommendation shall remain effective for 12 months
30 from the date of the decision without further action by the employer
31 with regard to any further recommendation by the same physician
32 for the same treatment unless the further recommendation is
33 supported by a documented change in the facts material to the
34 basis of the utilization review decision.

35 (7) Utilization review of a treatment recommendation shall not
36 be required while the employer is disputing liability for injury or
37 treatment of the condition for which treatment is recommended
38 pursuant to Section 4062.

39 (8) If utilization review is deferred pursuant to paragraph (7),
40 and it is finally determined that the employer is liable for treatment

1 of the condition for which treatment is recommended, the time for
 2 the employer to conduct retrospective utilization review in
 3 accordance with paragraph (1) shall begin on the date the
 4 determination of the employer’s liability becomes final, and the
 5 time for the employer to conduct prospective utilization review
 6 shall commence from the date of the employer’s receipt of a
 7 treatment recommendation after the determination of the
 8 employer’s liability.

9 (h) Every employer, insurer, or other entity subject to this section
 10 shall maintain telephone access for physicians to request
 11 authorization for health care services.

12 (i) If the administrative director determines that the employer,
 13 insurer, or other entity subject to this section has failed to meet
 14 any of the timeframes in this section, or has failed to meet any
 15 other requirement of this section, the administrative director may
 16 assess, by order, administrative penalties for each failure. A
 17 proceeding for the issuance of an order assessing administrative
 18 penalties shall be subject to appropriate notice to, and an
 19 opportunity for a hearing with regard to, the person affected. The
 20 administrative penalties shall not be deemed to be an exclusive
 21 remedy for the administrative director. These penalties shall be
 22 deposited in the Workers’ Compensation Administration Revolving
 23 Fund.

**All matter omitted in this version of the bill
 appears in the bill as amended in the
 Senate, April 30, 2015. (JR11)**

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MBC TRACKER II BILLS
1/13/2016

Agenda Item 8B

BILL	AUTHOR	TITLE	STATUS	AMENDED
AB 11	Gonzalez	Employment: Paid Sick Days: In-Home Supportive Services	Asm. Approps	03/11/15
AB 12	Cooley	State Government: Administrative Regulations: Review	Sen. Approps	08/19/15
AB 19	Chang	GO BIZ: Small Business: Regulations	Asm. Approps	05/06/15
AB 26	Jones-Sawyer	Medical Cannabis	Asm. B&P	01/04/16
AB 41	Chau	Health Care Coverage: Discrimination	Asm. Approps	
AB 59	Waldron	Mental Health Services: Assisted Outpatient Treatment	Asm. Judiciary	01/06/16
AB 70	Waldron	Emergency Medical Services: Reporting	Asm. Health	03/26/15
AB 73	Waldron	Patient Access to Prescribed Antiretroviral Drugs for HIV/AIDS	Asm. Approps	01/05/16
AB 83	Gatto	Personal Data	Sen. Inactive File	07/15/15
AB 170	Gatto	Newborn Screening: Genetic Diseases: Blood Samples	Sen. Health	07/08/15
AB 174	Gray	UC: Medical Education	Sen. Approps	06/01/15
AB 259	Dababneh	Personal Information: Privacy	Sen. Approps	
AB 322	Waldron	Privacy: Social Security Numbers	Asm. P&CP	03/26/15
AB 330	Chang	State Government	Assembly	
AB 344	Chavez	Medi-Cal	Asm. Approps	
AB 351	Jones-Sawyer	Public Contracts: Small Business Participation	Asm. Approps	
AB 366	Bonta	Medi-Cal: Annual Access Monitoring Report	Sen. Approps	07/07/15
AB 383	Gipson	Public Health: Hepatitis C	Asm. Approps	04/30/15
AB 411	Lackey	Public Contracts	Assembly	
AB 419	Kim	Go BIZ: Regulations	Sen. B&P	05/04/15
AB 463	Chiu	Pharmaceutical Cost Transparency Act of 2016	Asm. Health	01/04/16
AB 466	McCarty	State Civil Service: Employment Procedures	Sen. Inactive File	07/06/15
AB 507	Olsen	DCA: BreEZe System: Annual Report	Sen. B&P	07/09/15
AB 508	Garcia, C.	Public Health: Maternal Care	Asm. Health	01/04/16
AB 513	Jones-Sawyer	Professions and Vocations	Assembly	

**MBC TRACKER II BILLS
1/13/2016**

Agenda Item 8B

BILL	AUTHOR	TITLE	STATUS	AMENDED
AB 533	Bonta	Health Care Coverage: Out-of-Network Coverage	Assembly	09/04/15
AB 537	Allen, T.	Public Employees' Benefits	Asm. PER&SS	
AB 570	Allen, T.	Cardiovascular Disease: High Blood Pressure	Assembly	
AB 572	Gaines	California Diabetes Program	Sen. Approps	07/02/15
AB 574	Patterson	General Acute Care Hospitals: Cardiovascular Surgical Teams	Asm. Health	03/26/15
AB 584	Cooley	Public Employee Retirement Systems	Assembly	04/06/15
AB 595	Alejo	Forfeiture	Asm. Public Safety	01/04/16
AB 618	Maienschein	Parole: Primary Mental Health Clinicians	Asm. Approps	
AB 623	Wood	Abuse-Deterrent Opioid Analgesic Drug Products	Asm. Approps	05/04/15
AB 635	Atkins	Medical Interpretation Services	Sen. Inactive File	
AB 649	Patterson	Medical Waste: Law Enforcement Drug Take back Programs	Sen. Approps	06/24/15
AB 714	Melendez	State Employees: Health Benefits	Asm. PER&SS	
AB 741	Williams	Mental Health: Community Care Facilities	Sen. Human Svcs	05/04/15
AB 750	Low	Business and Professions: Retired License Category	Asm. Approps	04/16/15
AB 756	Chang	Small Businesses: Civil Fines and Penalties	Asm. Rev. & Tax	04/13/15
AB 766	Ridley-Thomas	Public School Health Center Support Program	Sen. Approps	04/27/15
AB 769	Jones-Sawyer	State Employees: Disciplinary Action	Sen. PE&R	
AB 788	Chu	Prescriptions	Asm. Health	03/26/15
AB 789	Calderon	Contact Lens Sellers: Prohibited Practices: Fines	Asm. B&P	04/22/15
AB 791	Cooley	Electronic Health Records	Asm. Health	
AB 796	Nazarian	Health Care Coverage: Autism and Pervasive Dev. Disorders	Asm. B&P	01/04/16
AB 840	Ridley-Thomas	Nurses and Certified Nurse Assistants	Sen. PE&R	
AB 843	Hadley	Controller: Internet Web Site	Asm. A&AR	03/26/15
AB 845	Cooley	Health Care Coverage: Vision Care	Asm. Approps	04/21/15
AB 859	Medina	Medi-Cal: Obesity Treatment Plans	Asm. Approps	04/30/15

MBC TRACKER II BILLS
1/13/2016

Agenda Item 8B

BILL	AUTHOR	TITLE	STATUS	AMENDED
AB 911	Brough	Hospitals: Closures	Asm. Health	04/14/15
AB 923	Steinorth	Respiratory Care Practitioners	Asm. B&P	01/04/16
AB 972	Jones	Ken Maddy California Cancer Registry	Asm. Health	
AB 981	Mayes	Eyeglasses	Assembly	
AB 993	Comm. P.E.R.S	State Employees: MOU	Asm. Inactive File	
AB 994	Comm. P.E.R.S	State Employees: MOU	Asm. PER&SS	
AB 1001	Gatto	Child Abuse: Reporting	Asm. Human Svcs	01/04/16
AB 1027	Gatto	Health Care Coverage: Contracted Rates	Asm. Health	03/26/15
AB 1033	Garcia, E.	Economic Impact Analysis: Small Business Definition	Asm. J, ED & E	01/04/16
AB 1046	Dababneh	Hospitals: Community Benefits	Asm. Health	04/07/15
AB 1067	Gipson	Foster Children: Rights	Asm. Human Svcs	01/04/16
AB 1069	Gordon	Prescription Drugs: Collection and Distribution Program	Sen. Approps	07/01/15
AB 1092	Mullin	Magnetic Resonance Imaging Technologists	Asm. Approps	05/04/15
AB 1102	Santiago	Health Care Coverage: Medi-Cal Access Program	Sen. Inactive File	07/09/15
AB 1117	Garcia, C.	Medi-Cal: Vaccination Rates	Sen. Approps	06/01/15
AB 1125	Weber	State Agency Contracts: Small Business	Asm. Approps	05/04/15
AB 1133	Achadjian	School-Based Early Mental Health Intervention and Prevention	Asm. Approps	04/15/15
AB 1174	Bonilla	Healing Arts: Licensee Records	Asm. B&P	1/41/16
AB 1215	Ting	California Open Data Standard	Asm. Approps	03/26/15
AB 1219	Baker	California Cancer Task Force	Asm. Health	
AB 1254	Grove	Health Care Service Plans: Abortion Coverage	Asm. Approps	04/06/15
AB 1281	Wilk	Regulations: Legislative Review	Asm. A&AR	03/26/15
AB 1294	Holden	State Government: Prompt Payment of Claims	Asm. A&AR	03/26/15
AB 1299	Ridley-Thomas	Medi-Cal: Specialty Mental Health Services: Foster Children	Sen. Approps	07/16/15
AB 1302	Brown	Public Contracts: Disabled Veterans	Asm. J, ED & E	

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BILL	AUTHOR	TITLE	STATUS	AMENDED
AB 1357	Bloom	Children and Family Health Promotion Program	Asm. Health	04/29/15
AB 1386	Low	Emergency Medical Care: Epinephrine Auto-Injectors	Asm. B&P	01/05/16
AB 1396	Bonta	Public Health Finance	Asm. B&P	06/03/15
AB 1434	McCarty	Health Insurance: Prohibition on Health Insurance Sales	Asm. Rev. & Tax	04/20/15
AB 1445	Brown	Public Contracts: Small Business Contracts	Asm. Approps	
AB 1460	Thurmond	Hospitals: Community Benefit Plans	Assembly	
AB 1485	Patterson	Medi-Cal: Radiology	Asm. Approps	05/05/15
AB 1566	Wilk	Reports	Assembly	
AB 1575	Bonta	Medical Marijuana	Assembly	
AB 1639	Maienschein	Pupil Health: Sudden Cardiac Arrest Prevention Act	Assembly	
AB 1648	Wilk	Public Records	Assembly	
ABX2 12	Patterson	Cadaveric Fetal Tissue	Assembly	
ABX2 13	Gipson	Medi-Cal: AIDS Medi-Cal Waiver Program	Assembly	
ACA 3	Gallagher	Public Employees' Retirement	Asm. PER&SS	
SB 3	Leno	Minimum Wage: Adjustment	Asm. Approps	03/11/15
SB 10	Lara	Health Care Coverage: Immigration Status	Senate	09/09/15
SB 26	Hernandez	California Health Care Cost and Quality Database	Sen. Approps	05/05/15
SB 52	Walters	Regulatory Boards: Healing Arts	Senate	
SB 58	Knight	Public Employees' Retirement System	Senate	
SB 131	Cannella	UC: Medical Education	Sen. Approps	05/12/15
SB 139	Galgiani	Controlled Substances	Assembly	08/18/15
SB 190	Beall	Health Care Coverage: Acquired Brain Injury	Sen. Health	04/06/15
SB 201	Wieckowski	California Public Records Act	Sen. Judiciary	
SB 202	Hernandez	Controlled Substances: Synthetic Cannabinoids	Sen. B&P	01/04/16
SB 214	Berryhill	Foster Care Services	Senate	

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BILL	AUTHOR	TITLE	STATUS	AMENDED
SB 243	Hernandez	Medi-Cal: Reimbursement: Provider Rates	Sen. Approps	05/12/15
SB 253	Monning	Juveniles: Psychotropic Medication	Asm. Inactive File	08/31/15
SB 275	Hernandez	Health Facility Data	Asm. Health	
SB 280	Stone, J	Public Employees: Compensation	Sen. PE&R	04/15/15
SB 289	Mitchell	Telephonic and Electronic Patient Management Services	Sen. Approps	05/04/15
SB 293	Pan	Public Employees: Retirement	Senate	
SB 296	Cannella	Medi-Cal: Specialty Mental Health Services: Documentation	Sen. Inactive File	08/28/15
SB 315	Monning	Health Care Access Demonstration Project Grants	Asm. Inactive File	08/31/15
SB 346	Wieckowski	Health Facilities: Community Benefits	Sen. Health	04/23/15
SB 349	Bates	Optometry: Mobile Optometric Facilities	Sen. B&P	04/06/15
SB 368	Berryhill	Employment: Work Hours	S L& IR	01/04/16
SB 370	Wolk	Immunizations: Disclosure of Information: TB Screening	Sen. Health	
SB 375	Berryhill	Public Employees' Retirement	Senate	
SB 402	Mitchell	Pupil Health: Vision Examinations	Sen. Approps	05/04/15
SB 435	Pan	Medical Home: Health Care Delivery Model	Asm. Inactive File	07/07/15
SB 447	Allen	Medi-Cal: Clinics: Enrollment Applications	Asm. Approps	08/24/15
SB 459	Liu	State Government: Data	Senate	
SB 492	Liu	Coordinate Care Initiative: Consumer Ed. & Info. Guide	Senate	06/25/15
SB 547	Liu	Aging and Long-Term Care Services, Supports and Program. Coord.	Sen. Health	01/04/16
SB 571	Liu	Long-Term Care: CalCareNet	Sen. Approps	04/21/15
SB 573	Pan	Statewide Open Data Portal	Asm. Approps	07/09/15
SB 609	Stone, J	Controlled Substances: Narcotic Replacement Treatment	Sen. Health	04/21/15
SB 614	Leno	Medi-Cal: Mental Health Services	Asm. Inactive File	08/31/15
SB 729	Wieckowski	Consumer Complaints	Senate	
SB 744	Huff	Pupil Health: Epinephrine Auto-Injectors	Senate	

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BILL	AUTHOR	TITLE	STATUS	AMENDED
SB 779	Hall	Skilled Nursing Facilities: Certified Nurse Assistants	Sen. Approps	05/04/15
SB 780	Mendoza	Psychiatric Technicians and Assistants	Sen. Approps	