

CalRTA Board Legislative Update

Chaptered Measures

Position Bills

Health Care/Healthy Aging

AB 2207 (**Reyes D**) **State boards and commissions: representatives of older adults.**
Status: 9/21/2024-Chaptered by Secretary of State - Chapter 332, Statutes of 2024
Location: 9/21/2024-A. CHAPTERED

Summary: Current law establishes the California Department of Aging and provides for a director of that department. Current law establishes various state boards and commissions to address public health concerns throughout the state and generally requires that individuals appointed to these state entities be broadly reflective of the general public. This bill would expand the membership of the Alzheimer's Disease and Related Disorders Advisory Committee, the California Workforce Development Board, and the California Behavioral Health Planning Council to include the Executive Director of the California Commission on Aging, or other persons that serve or advocate for older adults, as specified.

Position	Priority
Support	Approved Position

Notes:

Rationale – A number of state Boards and Commissions impact services that are provided to seniors and must ensure decision-makers reflect the populations they serve.

Platform - Support state regulation of health insurance and affordable, accessible prescription drug benefits.

Letter Sent:

March 8, 2024 - Asm. Aging and Long-Term Care

May 31, 2024 - Senate Human Services

June 27, 2024 - Senate Health

July 10, 2024 - Senate Appropriations

August 16, 2024 - Senate Floor Alert

August 19, 2024 - Senate Floor Alert

August 26, 2024 - Senate Floor Alert

August 30, 2024 - Request for Governor's Signature

AB 2258 (**Zbur D**) **Health care coverage: cost sharing.**

Status: 9/27/2024-Approved by the Governor. Chaptered by Secretary of State - Chapter 708, Statutes of 2024.

Location: 9/27/2024-A. CHAPTERED

Summary: Current law requires a group or individual nongrandfathered health care service plan contract or health insurance policy to provide coverage for, and prohibits a contract or policy from imposing cost-sharing requirements for, specified preventive care services and screenings. This bill would prohibit a group or individual nongrandfathered health care service plan contract or health insurance policy issued, amended, or renewed on or after January 1, 2025, from imposing a cost-

sharing requirement for items or services that are integral to the provision of the above-described preventive care services and screenings. The bill would require those contracts and policies to cover items and services for those preventive care services and screenings, including home test kits for sexually transmitted diseases and specified cancer screenings. Because a willful violation of these provisions by a health care service plan would be a crime, the bill would impose a state-mandated local program. The bill would authorize the Insurance Commissioner to impose a civil penalty of not more than \$5,000 against an insurer for each violation of these provisions, or not more than \$10,000 per violation if the violation was willful.

Position	Priority
Support	Approved Position

Notes:

Rationale – Seniors should be able to access affordable medical care and screening.

Platform – Support state regulation of health insurance and affordable, accessible prescription drug benefits.

Platform – Advocate for and support full and comprehensive guaranteed affordable health care for all.

Letter Sent:

March 8, 2024 - Asm. Health

April 12, 2024 - Asm. Appropriations

May 17, 2024 - Assembly Floor

June 6, 2024 - Senate Health

June 21, 2024 - Senate Appropriations

June 28, 2024 - Senate Appropriations

August 16, 2024 - Senate Floor Alert

September 6, 2024 - Request for Governor's signature

AB 2270 (Maienschein D) Healing arts: continuing education: menopausal mental or physical health.

Status: 9/27/2024-Approved by the Governor. Chaptered by Secretary of State - Chapter 636, Statutes of 2024.

Location: 9/27/2024-A. CHAPTERED

Summary: The Medical Practice Act establishes the Medical Board of California and sets forth its powers and duties relating to the licensure and regulation of physicians and surgeons, including osteopathic physicians and surgeons. The Nursing Practice Act establishes the Board of Registered Nursing and sets forth its powers and duties relating to the licensure and regulation of the practice of nursing. The Psychology Licensing Law establishes the Board of Psychology and sets forth its powers and duties relating to the licensure and regulation of psychologists. The Physician Assistant Practice Act establishes the Physician Assistant Board and sets forth its powers and duties relating to the licensure and regulation of physician assistants. The Licensed Marriage and Family Therapist Act, the Clinical Social Worker Practice Act, the Licensed Professional Clinical Counselor Act, and the Educational Psychologist Practice Act provides for the licensure and regulation of the practices of marriage and family therapy, clinical social work, professional clinical counseling, and education psychology, respectively, by the Board of Behavioral Sciences. Current law establishes continuing education requirements for all of these various healing arts practitioners. This bill would require the above-specified boards, in determining their continuing education requirements, to consider including a course in menopausal mental or physical health.

Position	Priority
Support	Approved Position

Notes:

Rationale – Since a disproportionate number of teachers are women, ensuring medical professionals can expand their medical expertise to focus on care for their medical issues will provide greater overall

care.

Platform - Support state regulation of health insurance and affordable, accessible prescription drug benefits.

Letter Sent:

March 8, 2024 - Asm. Business and Professions

April 12, 2024 - Asm. Appropriations

May 28, 2024 - Senate Business, Professions and Economic Development Committee

June 5, 2024 - Sen. Appropriations

August 19, 2024 - Senate Floor Alert

August 27, 2024 - Request for Governor's Signature

AB 2297 (Friedman D) Hospital and Emergency Physician Fair Pricing Policies.

Status: 9/24/2024-Chaptered by Secretary of State - Chapter 511, Statutes of 2024

Location: 9/24/2024-A. CHAPTERED

Summary: Current law requires a hospital to maintain a written charity care policy and a discount payment policy for uninsured patients or patients with high medical costs who are at or below 400 percent of the federal poverty level. Current law requires the written policy regarding discount payments to also include a statement that an emergency physician who provides emergency medical services in a hospital that provides emergency care is also required by law to provide discounts to uninsured patients or patients with high medical costs who are at or below 400 percent of the federal poverty level. Current law authorizes an emergency physician to choose to grant eligibility for a discount payment policy to patients with incomes over 350% of the federal poverty level. Current law defines "high medical costs" for these purposes to mean, among other things, specified annual out-of-pocket costs incurred by the individual at the hospital or a hospital that provided emergency care. This bill would authorize an emergency physician to choose to grant eligibility for a discount payment policy to patients with incomes over 400% of the federal poverty level.

Position	Priority
Support	Approved Position

Notes:

Rationale – Seniors should be able to access affordable medical emergency care without fear of property loss.

Platform – Support state regulation of health insurance and affordable, accessible prescription drug benefits.

Platform – Advocate for and support full and comprehensive guaranteed affordable health care for all.

Letter Sent:

March 8, 2024 - Asm. Health

April 12, 2024 - Asm. Judiciary

April 25, 2024 - Asm. Appropriations

May 21, 2024 - Senate Health

June 13, 2024 - Senate Judiciary

June 21, 2024 - Senate Judiciary

June 27, 2024 - Senate Appropriations

August 8, 2024 - Senate Appropriations

August 21, 2024 - Senate Floor Alert

August 26, 2024 - Senate Floor Alert

August 30, 2024 - Request for Governor's Signature

AB 2620 (Bains D) California Commission on Aging.

Status: 9/21/2024-Chaptered by Secretary of State - Chapter 334, Statutes of 2024

Location: 9/21/2024-A. CHAPTERED

Summary: The Mello-Granlund Older Californians Act establishes the California Commission on Aging, comprised of 25 members, appointed as specified, including 19 members appointed by the Governor. Current law requires the commission to be comprised of actual consumers of services provided under the federal Older Americans Act. Under existing law, the commission's mission is, among other things, to serve as the principal advocate body in the state on behalf of older individuals, to participate with and advise the California Department of Aging in various ways relating to the State Plan on Aging, and to develop a method for the selection of delegates to the statewide legislative meeting of senior advocates. Current law sets forth the duties and powers of the commission, including participating with the department in training workshops for community, regional, and statewide senior advocates, to help older individuals to understand legislative, regulatory, and program implementation processes, and meeting at least 6 times annually in order to study problems of older individuals and present findings and make recommendations. This bill would reduce the number of members of the commission to 18, and require 12 members to be appointed by the Governor, with at least 2 appointed from a list of nominees submitted by, among others, area agency on aging directors and the Area Agency on Aging Advisory Council of California. The bill would require the members of the commission be comprised of consumers and providers of services under the federal Older Americans Act, instead of just consumers, who have professional, lived, or academic expertise both within and outside of the field of aging, in specified areas, including health, behavioral health, and housing.

Position	Priority
Support	Approved Position

Notes:

Rationale – Seniors should be able to have individuals reflecting their experiences making recommendations regarding medical care.

Platform– Support state regulation of health insurance and affordable, accessible prescription drug benefits.

Platform – Advocate for and support full and comprehensive guaranteed affordable health care for all.

Letter Sent:

March 8, 2024 - Asm. Aging and Long-Term Care

May 28, 2024 - Senate Human Services Committee

June 5, 2024 - Senate Appropriations

August 21, 2024 - Senate Floor Alert

August 23, 2024 - Request for Signature

SB 1354

(Wahab D) Long-term health care facilities: payment source and resident census.

Status: 9/21/2024-Approved by the Governor. Chaptered by Secretary of State. Chapter 339, Statutes of 2024.

Location: 9/21/2024-S. CHAPTERED

Summary: Current law provides for the licensing and regulation of long-term health care facilities, including, among others, skilled nursing facilities and intermediate care facilities, by the State Department of Public Health. A violation of those provisions is generally a crime. Existing law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. This bill would require the facility to provide aid, care, service, and other benefits available under Medi-Cal to Medi-Cal beneficiaries in the same manner, by the same methods, and at the same scope, level, and quality as provided to the general public, regardless of payment source. The bill would find and declare that this requirement is declaratory of existing law and thus not reimbursable under Medi-Cal Long-Term Care Reimbursement Act or any other Medi-Cal ratesetting provisions, as specified. The bill would specify that if reimbursement is found to be required by state or federal law or regulation, as specified,

the above requirement shall only become operative upon appropriation by the Legislature. The bill would also provide that this requirement and the above-described prohibition against discrimination on the basis of payment source be implemented only to the extent that these provisions do not conflict with federal law, that any necessary federal approvals are obtained, and that federal financial participation for the Medi-Cal program is available and is not otherwise jeopardized.

Position	Priority
Support	Approved Position

Notes:

Rationale – Seniors should be able to access affordable and equitable medical care.

Platform– Support state regulation of health insurance and affordable, accessible prescription drug benefits.

Platform – Advocate for and support full and comprehensive guaranteed affordable health care for all.

Letter Sent:

March 8, 2024 - Sen. Health
April 30, 2024 - Sen. Appropriations
June 5, 2024 - Asm. Health
June 21, 2024 - Asm. Health
June 27, 2024 - Asm. Appropriations
August 16, 2024 - Asm. Floor Alert
August 20, 2024 - Asm. Floor Alert
August 29, 2024 - Request for Governor's Signature

SB 1406 **(Allen D)** **Residential care facilities for the elderly: resident services.**

Status: 9/21/2024-Approved by the Governor. Chaptered by Secretary of State. Chapter 340, Statutes of 2024.

Location: 9/21/2024-S. CHAPTERED

Summary: The California Residential Care Facilities for the Elderly Act (act), requires the State Department of Social Services to license, inspect, and regulate residential care facilities for the elderly, as defined, and imposes criminal penalties on a person who violates the act or who willfully or repeatedly violates any rule or regulation adopted under the act. Existing law gives residents of those facilities specified rights, including, but not limited to, the right to be accorded dignity in their personal relationships with staff, residents, and other persons, and the right to reasonable accommodation of individual needs and preferences in all aspects of life in the facility, except when the health or safety of the individual or other residents would be endangered. This bill would add to those rights the right to request, refuse, or discontinue a service.

Position	Priority
Support	Approved Position

Notes:

Rationale – Seniors should be able to access affordable medical care.

Platform– Support state regulation of health insurance and affordable, accessible prescription drug benefits.

Platform – Advocate for and support full and comprehensive guaranteed affordable health care for all.

Letter Sent:

March 8, 2024 - Sen. Human Services
March 25, 2024 - Sen. Human Services
April 12, 2024 - Sen. Human Services
April 25, 2024 - Sen. Appropriations
May 17, 2024 - Senate Floor
June 5, 2024 - Asm. Aging and Long-Term Care

June 13, 2024 - Asm. Aging and Long-Term Care
June 21, 2024 - Asm. Human Services
June 27, 2024 - Asm. Appropriations
August 16, 2024 - Asm. Floor Alert
August 20, 2024 - Asm. Floor Alert
August 30, 2024 - Request for Governor's Signature

Public Education

[AB 247](#)

([Muratsuchi D](#)) Education finance: school facilities: Kindergarten Through Grade 12 Schools and Local Community College Public Education Facilities Modernization, Repair, and Safety Bond Act of 2024.

Status: 7/3/2024-Chaptered by Secretary of State - Chapter 81, Statutes of 2024

Location: 7/3/2024-A. CHAPTERED

Summary: Would set forth the Kindergarten Through Grade 12 Schools and Local Community College Public Education Facilities Modernization, Repair, and Safety Bond Act of 2024 as a state general obligation bond act that would provide \$10,000,000,000 to construct and modernize education facilities, including \$8,500,000,000 for elementary and secondary educational facilities and \$1,500,000,000 for community college facilities, as specified. This bond act would become operative only if approved by the voters.

Position	Priority
Support	Approved Position

Notes:

Rationale – Children, the teachers, and the educational staff that teach them must be in a safe, constructive environment to be supported and successful.

Platform - Advocate for achieving the California Constitutional goal (Article XVI Section 8.5) for class size reduction.

Letter Sent:

March 7, 2024 - Sen. Approps.

[SB 956](#)

([Cortese D](#)) School facilities: design-build contracts.

Status: 8/19/2024-Chaptered by Secretary of State - Chapter 177, Statutes of 2024

Location: 8/19/2024-S. CHAPTERED

Summary: Current law, until January 1, 2025, authorizes a school district, with the approval of the governing board of the school district, to procure design-build contracts for public works projects in excess of \$1,000,000, awarding the contract to either the low bid or the best value, as provided. Current law requires specified information to be verified under penalty of perjury. This bill would delete the provision making this authorization inoperative on January 1, 2025, thereby extending it indefinitely.

Position	Priority
Support	Approved Position

Notes:

Rationale – Children, the teachers, and the educational staff that teach them must be in a safe, constructive environment to be supported and successful.

Platform - Advocate for achieving the California Constitutional goal (Article XVI Section 8.5) for

class size reduction.

Letter Sent:

March 7, 2024 - Sen. Education

March 22, 2024 - Sen. Appropriations

April 25, 2024 - Sen. Floor Alert

May 29, 2024 - Asm. Education

June 13, 2024 - Asm. Appropriations

August 13, 2024 - Request for Signature

Retirement

AB 1997 **(McKinnor D) Teachers' Retirement Law.**

Status: 9/27/2024-Approved by the Governor. Chaptered by Secretary of State - Chapter 690, Statutes of 2024.

Location: 9/27/2024-A. CHAPTERED

Summary: The Teachers' Retirement Law establishes the State Teachers' Retirement System (STRS) and creates the Defined Benefit Program of the State Teachers' Retirement Plan, which provides a defined benefit to members of the program, based on final compensation, creditable service, and age at retirement, subject to certain variations. STRS is administered by the Teachers' Retirement Board. Current law requires employers and employees to make contributions to the system based on the member's creditable compensation. Current law defines terms for the purposes of STRS. Existing law defines "annualized pay rate" to mean the salary or wages, as described, a person could earn during a school term for an assignment if creditable service were performed for that assignment on a full-time basis. Current law establishes a pay rate when creditable service is not performed on a full-time basis because a member is performing activities pursuant to specified law. This bill would redefine "annualized pay rate" to mean the salary, as described, a person could earn during a school term in a position subject to membership if creditable service were performed for that position on a full-time basis, to be determined pursuant to a publicly available pay schedule by a prescribed method.

Position

Support

Priority

Approved Position

Notes:

Rationale – Teachers should be able to maximize the amount of service credit they receive to ensure they can have a secure retirement.

Platform – Advocate for pension equity and sustainability for all present and future CalSTRS members.

Letter Sent:

March 6, 2024 - Asm. Public Employment & Retirement

March 14, 2024 - Asm. Public Employment & Retirement

April 2, 2024 - Asm. Public Employment & Retirement

April 9, 2024 - Asm. Appropriations

May 17, 2024 - Assembly Floor

May 31, 2024 - Senate Labor, Public Employment & Retirement

June 13, 2024 - Senate Appropriations

August 16, 2024 - Senate Floor Alert

August 29, 2024 - Request for Governor's Signature

AB 2134 (Muratsuchi D) School employees: transfer of leave of absence for illness or injury.

Status: 9/22/2024-Chaptered by Secretary of State - Chapter 381, Statutes of 2024

Location: 9/22/2024-A. CHAPTERED

Summary: Current law provides that a certificated employee of a school district and a classified employee of a school district, county superintendent of schools, or community college district who meets specified criteria involving employment with another school district, county superintendent of schools, or community college district is entitled to have their total earned amount of leave of absence for illness or injury transferred to the 2nd employing school district, county superintendent of schools, or community college district, as specified. Current law requires the State Board of Education to adopt rules and regulations related to these provisions, as specified. This bill would delete the requirement on the state board to adopt those rules and regulations. The bill would require the employing school district, county superintendent of schools, or community college district receiving an employee’s transfer of leave of absence for illness or injury to honor the transfer request at any time during the employee’s employment with the subsequent employing district or county superintendent of schools. The bill would require state special schools to comply with these requirements

	Position	Priority
	Support	Approved Position
Notes:		
Letter Sent:		
April 2, 2024 - Assembly Education		
April 10, 2014 - Assembly Public Employment & Retirement		
April 30, 2024 - Asm. Appropriations		
May 17, 2024 - Assembly Floor		
May 31, 2024 - Senate Education		
June 13, 2024 - Senate Labor, Public Employment & Retirement		
July 10, 2024 - Senate Appropriations		
August 16, 2024 - Senate Floor Alert		
August 29, 2024 - Request for Governor's Signature		

Total Measures: 11

Watch Bills

Health Care/Healthy Aging

[AB 1902](#) [\(Alanis R\)](#) Prescription drug labels: accessibility.

Status: 9/21/2024-Chaptered by Secretary of State - Chapter 330, Statutes of 2024

Location: 9/21/2024-A. CHAPTERED

Summary: Current law requires the California State Board of Pharmacy to promulgate regulations that require a standardized, patient-centered, prescription drug label on all prescription medicine dispensed to patients in California. Current law prohibits a pharmacist from dispensing a prescription except in a container that meets the requirements of state and federal law and is correctly labeled with prescribed information. Existing law makes a violation of its provisions a crime. Current law requires a dispenser, upon request, to provide translated directions for use, as prescribed. Current law authorizes a dispenser to use translations made available by the board pursuant to specified regulations of the board and provides that a dispenser is not required to provide translated directions for use beyond the languages that the board has made available or beyond the directions that the board has made available in translated form. Current law authorizes a dispenser to provide their own translated directions for use to comply with these provisions and prohibits the provisions from being construed to prohibit a dispenser from providing translated directions for use in languages beyond those that the board has made available or beyond the directions that the board has made available in translated form. This bill would also expressly require a dispenser to provide translated directions for use in the languages the board has made available.

Position
Watch

Priority
Approved Position

[AB 2198](#) [\(Flora R\)](#) Health information.

Status: 9/22/2024-Chaptered by Secretary of State - Chapter 386, Statutes of 2024

Location: 9/22/2024-A. CHAPTERED

Summary: Current law provides for the regulation of health insurers by the Department of Insurance. Current law requires health care service plans and health insurers, commencing January 1, 2024, to establish and maintain specified application programming interfaces (API), including patient access API, for the benefit of enrollees, insureds, and contracted providers. Current law authorizes the departments to require health care service plans or health insurers, as applicable, to establish and maintain provider access API and prior authorization support API if and when final federal rules are published. This bill would instead require the departments, commencing January 1, 2027, or when final federal rules are implemented, whichever occurs later, to require health care service plans and health insurers to establish and maintain patient access API, provider access API, payer-to-payer API, and prior authorization API. The bill, until January 1, 2027, would authorize the departments to issue guidance relating to these provisions not subject to the Administrative Procedure Act, as specified. Because a violation of these requirements by a health care service plan would be a crime, this bill would impose a state-mandated local program.

Position
Watch

Priority
Approved Position

[SB 1120](#) **(Becker D)** **Health care coverage: utilization review.**
Status: 9/28/2024-Approved by the Governor. Chaptered by Secretary of State. Chapter 879, Statutes of 2024.
Location: 9/28/2024-S. CHAPTERED
Summary: Would require a health care service plan or disability insurer, including a specialized health care service plan or specialized health insurer, that uses an artificial intelligence, algorithm, or other software tool for the purpose of utilization review or utilization management functions, or that contracts with or otherwise works through an entity that uses that type of tool, to ensure compliance with specified requirements, including that the artificial intelligence, algorithm, or other software tool bases its determination on specified information and is fairly and equitably applied, as specified. Because a willful violation of these provisions by a health care service plan would be a crime, this bill would impose a state-mandated local program.

Position	Priority
Watch	Approved Position

[SB 1180](#) **(Ashby D)** **Health care coverage: emergency medical services.**
Status: 9/28/2024-Approved by the Governor. Chaptered by Secretary of State. Chapter 884, Statutes of 2024.
Location: 9/28/2024-S. CHAPTERED
Summary: Current law, until January 1, 2031, authorizes a local emergency medical services (EMS) agency to develop a community paramedicine or triage to alternate destination program that, among other things, provides case management services to frequent EMS users or triage paramedic assessments, respectively. This bill would require a health care service plan contract or health insurance policy issued, amended, or renewed on or after July 1, 2025, to establish a process to reimburse for services provided by a community paramedicine program, a triage to alternate destination program, and a mobile integrated health program, as defined.

Position	Priority
Watch	Approved Position

[SB 1249](#) **(Roth D)** **Mello-Granlund Older Californians Act.**
Status: 9/21/2024-Approved by the Governor. Chaptered by Secretary of State. Chapter 337, Statutes of 2024.
Location: 9/21/2024-S. CHAPTERED
Summary: The Mello-Granlund Older Californians Act establishes the California Department of Aging in the California Health and Human Services Agency and sets forth its mission to provide leadership to the area agencies on aging in developing systems of home- and community-based services that maintain individuals in their own homes or the least restrictive homelike environments. Current law requires the department to designate various private nonprofit or public agencies as area agencies on aging to work within a planning and service area and provide a broad array of social and nutritional services. Current law includes various findings and declarations relating to the purposes of the act. This bill would update and revise those legislative findings and declarations, including recognizing the state’s major demographic shift towards an older, more diverse population and declaring the intent to reform provisions of the act related to various functions of the area agencies on aging. The bill would require the department, by September 30, 2026, to take various actions, including, among others, identifying older adult and family caregiver support programs and services and developing a statewide consumer engagement plan. The bill would require the department to

develop regulations that address specified topics relating to area agency on aging designations.

Position	Priority
Watch	Approved Position

Retirement

[AB 2770](#) **(Committee on Public Employment and Retirement) Public employees’ retirement.**
Status: 7/15/2024-Chaptered by Secretary of State - Chapter 117, Statutes of 2024
Location: 7/15/2024-A. CHAPTERED
Summary: The Teachers’ Retirement Law establishes the State Teachers’ Retirement System (STRS), and sets forth the provisions for its administration and the delivery of benefits to its members. Current law authorizes a member to request to purchase additional service credit and to redeposit accumulated retirement contributions returned to the member, as provided. Current law specifies the basis for the contribution amount, depending on whether the member is or is not employed to perform creditable service subject to coverage by the Defined Benefit Program on the date of the request to purchase additional service credit. Existing law requires additional regular interest to be added to the contributions, as specified, if the member is not employed to perform creditable service subject to coverage by the Defined Benefit Program on the date of the request to purchase additional service credit. This bill would revise that interest calculation. The bill would require the member to sign and return the completed statement of contributions and interest required from STRS to purchase service credit at a specific cost no later than 35 calendar days from the date of the offer.

Position	Priority
Watch	Approved Position

Total Measures: 6
