



March 2025 Legislative Advocate Report

By Jennifer Baker, CalRTA Legislative Advocate

CalRTA-Supported Bills

The CalRTA Board finalized the following support positions. These positions will be communicated to the Legislature through letters and public testimony:

Retirement

AB 871 (Stefani): Elder Financial Abuse Training – Requires financial institutions to provide annual training on financial elder abuse that includes making reports to both local Adult Protective Services or law enforcement and the FBI’s Internet Crime Complaint Center and the Federal Trade Commission. This bill would also expand the reports to federal authorities to improve the coordination of resources, aid local law enforcement in their investigation and improve the chance of recovering stolen funds. The measure is eligible to be heard in a committee on March 22nd and has not yet been referred to a committee.

Health Care/Healthy Aging

AB 83 (Pacheco): Elder abuse prevention plan - Provides financial institutions with more tools in addressing the elder financial abuse crisis when financial abuse is suspected. The bill authorizes financial institutions to delay, refuse, or prevent transactions if the institution has evidence of or has observed actual or attempted financial abuse of an eligible adult. The bill also permits financial institutions to notify an associated third party when they suspect financial abuse of an eligible adult. The measure has been referred to the Assembly Banking and Finance Committee.

AB 251 (Kalra): Elders and dependent adults: abuse of neglect - Would allow access to justice for elderly and dependent adults physically abused and neglected in nursing homes and would discourage facilities from intentionally destroying or concealing legal evidence concerning a civil case under the Elder Abuse & Dependent Adult Civil Protection Act by giving a judge discretion to apply the preponderance of the evidence standard as the burden of proof if the court finds intentional destruction of evidence by a defendant skilled nursing facility or residential care facility for the elderly. The measure has been referred to the Assembly Judiciary Committee and will be heard on March 28th.

AB 280 (Aguilar-Curry): Health care coverage: provider directories - Requires an insurance plan to annually verify and eliminate incorrect listings from its directories of providers. These requirements would need to be 60 percent accurate by July 1, 2026, and 95 percent accurate by July 1, 2029, or face administrative penalties. The bill would additionally require a health plan to provide coverage for all health care services for someone who reasonably relied on inaccurate, incomplete, or misleading information included in a health plans provider directory, or to reimburse for out-of-network costs. The measure has been referred to the Assembly Health Committee and will be heard on April 1st.

AB 432 (Bauer-Kahan): Menopause - Would ensure equitable menopause and perimenopause coverage and requires menopause education for care providers. AB 432 codifies treatment options and coverage for perimenopause and menopause. This bill also creates a requirement that doctors whose patient population is more than 25% women, participate in continuing medical education regarding menopause. AB 432 builds upon previous legislation and requires the Medical Board of California to include a course on menopausal health in determining its continuing education requirements. The measure has been referred to the Assembly Business and Professions and will be heard on April 1st.

AB 489 (Bonta): Deceptive Terms or Letters: Artificial Intelligence - Prohibits artificial intelligence (AI) systems or similar technologies from misrepresenting "themselves" as licensed health professionals. This bill will provide state health profession boards the clear authority to enforce title protections when AI systems or similar technologies, such as internet-based chatbots, misrepresent "themselves" as health professionals. The measure has been referred to both the Assembly Business and Professions Committee as well as the Privacy and Consumer Protection Committee and will be heard on April 1st.

AB 510 (Addis): Health Coverage: Appeals and Grievances - Requires appeals or grievances regarding health care plan decisions to be reviewed by a licensed physician within two business days if the patient faces an imminent health threat, or in a timely fashion otherwise. The measure has been referred to the Assembly Health Committee but has not yet been set for a hearing.

AB 512 (Harabedian): Health Care Coverage: Prior Authorization - Reduces the time for authorization requests to no more than 48 hours for regular requests or 24 hours for urgent requests. The measure has been referred to the Assembly Health Committee but has not yet been set for a hearing.

AB 539 (Schiavo): Health Care Coverage: Prior Authorizations – Reduces health care administrative costs and speeds up patient care by extending the duration of an approved prior authorization by a health plan to one year, which will remove unnecessary bureaucratic delays and reduce the burden on physicians and patients, especially those with chronic illnesses. The measure has been referred to the Assembly Health Committee but has not yet been set for a hearing.

AB 577 (Wilson): Health Care Coverage: Anti-steering – If a doctor determines it is in the patient's best interest, would prohibit pharmacy benefit managers, health plans, and insurers from enacting policies that effectively prevent physicians from acquiring and administering or dispensing drugs in their offices to patients. Also, the bill prevents pharmacy benefit managers, health plans, and insurers from discriminating against physicians for dispensing or administering prescription drug treatments in their office to their patients. The measure has been referred to the Assembly Health Committee but has not yet been set for a hearing.

AB 1032 (Harabedian): Coverage for behavioral health visits - Requires health care service plans and insurers, on or after January 1, 2026, to reimburse an eligible enrollee for up to 12 annual visits per year with a licensed behavioral health provider if the enrollee is in a county where a local or state emergency has been declared due to wildfires. The bill also specifies that an enrollee is entitled to these benefits until one year from the date the local or state emergency is lifted, whichever is later. AB 1032 contains an urgency clause that takes effect immediately. The measure has been referred to the Assembly Health Committee but has not yet been set for a hearing.

AB 1069 (Bains): Older adults: emergency shelters - Requires that the Aging and Disability Resource Connection has access to an emergency shelter for evacuation purposes for older adults as well as those with disabilities to utilize during an emergency. The measure has been referred to the Assembly

Aging and Long-Term Care Committee as well as the Emergency Management Committee but has not yet been set for a hearing.

AB 1460 (Rogers): Prescription drug pricing – Helps community health centers and other safety net providers address health equity and access to care issues in California by protecting their ability to utilize contract pharmacies to dispense 340B medications to their patients in underserved communities. This bill ensures that California safety-net providers can use contract pharmacies to serve their patients by prohibiting pharmaceutical manufacturers from placing contract pharmacy restrictions on health care providers that utilize the federal 340B discount drug program to serve low-income communities. The measure has been referred to the Assembly Health Committee but has not yet been set for a hearing.

AB 1476 (Wallis): Meal program: Senior citizens – Requires that meals provided by the Department of Aging be made available as to-go options, ensuring easy accessibility. The measure has been referred to the Assembly Aging and Long-Term Care Committee but has not yet been set for a hearing.

SB 306 (Becker): Health Care Coverage: Prior Authorizations – Would eliminate prior authorization for medical services that health plans approve more than 90 percent of the time and would remove unnecessary delays for patients. The measure has been referred to the Senate Health Committee but has not yet been set for a hearing.

SB 351 (Cabaldon): Health Facilities - Would prohibit a private equity group or hedge fund that owns a physician or dental practice from interfering with the professional judgment of physicians or dentists in making health care decisions or patient care. The measure has been referred to the Senate Business, Professions and Economic Development Committee and will be heard on April 21st.

SB 433 (Wahab): Retirement care facilities for the elderly: assisted living waiver rental rate protection - Prohibits residential care facilities for the elderly from charging a resident who receives Medi-Cal reimbursed services through the assisted living waiver or nursing facility transition or diversion to assisted living facilities through community supports covered by their Medi-Cal managed care plan, a higher rate than what is charged to a resident who is a recipient of the State Supplementary Program for the Aged, Blind, and Disabled. The measure has been referred to the Senate Human Services Committee and will be heard on April 7th.

SB 434 (Wahab): Residential care facilities for the elderly: housing protections - Extends the length of notice a licensee is required to provide a resident to 60 or 90 days, depending on the length of the resident's residency. The bill would additionally require the facility to include in a notice of eviction documentation of the licensee's reasonable efforts to create a safe discharge plan and would require the plan to include a list of the resident's post-eviction needs, goals, and preferences, and a list of discharge locations that meet specified criteria, such as being financially practicable for the resident. The measure has been referred to the Senate Human Services Committee and will be heard on April 7th.

SB 435 (Wahab): Residential care facilities for the elderly: emergency backup power source - Requires a residential care facility for the elderly to have an alternative source of power, as defined, to protect residents' health and safety for no fewer than 72 hours during any type of power outage. The bill would impose specific compliance requirements based on whether the facility uses a generator as its alternative source of power, or batteries or a combination of batteries in tandem with a renewable electrical generation facility. The bill would require a facility to comply with these requirements and

include information regarding the alternative source of power within the emergency and disaster plan beginning January 1, 2027. By expanding the scope of an existing crime, the bill would impose a state-mandated local program. The measure has been referred to the Senate Human Services Committee and will be heard on April 7th.

CalSTRS CIO Predicts Risks

During his report to the Teachers' Retirement Board Investment Committee on March 12th, CalSTRS Chief Investment Officer, Scott Chan, provided an investment update which noted the current economic market uncertainty is resulting from recent Executive Orders from the Trump Administration, creating volatility. The top risks that are affecting the current investment world include tariffs, a potential trade war, geopolitical risks with a potential U.S. withdrawal from Ukraine, as well as uncertainties regarding the future of the North Atlantic Trade Organization. Furthermore, a growing U.S. debt of over \$36 trillion, making up seven percent of the U.S. GDP could trigger higher interest rates. Finally, the economic impact of immigration policies could reduce GDP growth by 0.5 percent to 1 percent. These potential risks could lead to an inability for CalSTRS to achieve its investment goals, leading to a future risk of higher school employer contribution rates, which are currently set at 19.1 percent.

Legislative Calendar

May 2 – Last day for policy committees to hear fiscal bills.

May 9 – Last day for policy committees to hear nonfiscal bills.

May 16 – Last day for policy committees to meet prior to June 9.

May 23 – Last day for fiscal committees to hear Floor bills introduced in their house. Last day for fiscal committees to meet prior to June 9.

June 2-6 – Floor session only.

June 6 – Last day for each house to pass bills introduced in that house.

June 9 – Committee meetings may resume.

June 15 – Budget bill must be passed by midnight.

July 18 – Last day for policy committees to hear bills. Summer Recess begins.

August 18 – Legislature reconvenes from Summer Recess.

August 29 – Last day for fiscal committees to hear bills.

September 2-12 – Floor session only.

September 5 – Last day to amend a bill on the Floor.

September 12 – Last day for each house to pass bills. Interim Recess begins.