

# CHBRP Analyses of California Assembly and Senate Bills

Final Status as of October 13, 2019

2019-2020 California State Legislature



CHBRP generally analyzes bills prior to the bill's first Senate or Assembly Health Committee hearing. CHBRP analyses and bill language as analyzed are available at [http://chbrp.org/completed\\_analyses/index.php](http://chbrp.org/completed_analyses/index.php). As bills move through both Legislative chambers, bills may be amended, which may alter expected impacts. The below table indicates the most current version of each bill analyzed by CHBRP and the extent to which CHBRP's analyses are still applicable. Current bill language and the bill's status is included at <http://leginfo.legislature.ca.gov/>.

Bill Number (Author) Title	Version	Notes
AB 78 (Assembly Committee on Budget) Health: Actuarial Value	Language Chaptered 6/28/2019 as SB 78	All portions of CHBRP's analysis remains relevant.
AB 166 (Gabriel) Violence Prevention.	Vetoed on 10/13/19, Last Amended 9/6/19	Bill was amended in June to direct the Department of Health Care Services to establish a violence prevention pilot program with a minimum of at least one site in each of 9 counties. The Background, Medical Effectiveness, and portions of the public health impact sections remain relevant.
AB 598 (Bloom) Hearing Aids	Amended – 9/6/19	CHBRP's original analysis remains largely relevant. A dollar cap was placed on coverage of hearing aids (\$3,000), however CHBRP projected average hearing aid costs of \$1,825 in its cost projections. The bill also would allow coverage for ear mold fittings every 4 years instead of 5; no significant impact is expected and CHBRP's estimates remain relevant. Further amendments were made on July 2 <sup>nd</sup> . The first substantive amendment would require the contracted providers to include a pediatric audiologist for children under 5 years of age. The second amendment would require that hearing aids covered by AB 598 be subject to the cost sharing imposed by the plan contract for durable medical equipment. The overall cost projections in CHBRP's analysis are still relevant, however some modest reduction in projected premium costs could be anticipated in light of the potentially higher deductibles that some enrollees might incur given the amendment on July 2 <sup>nd</sup> around cost sharing.
AB 651 (Grayson) Air Ambulance Services	Language Chaptered 10/7/19	CHBRP's analysis of the impact of the bill for enrollees in commercial insurance and CalPERS remains relevant. However, the amended language would alter the impacts related to Medi-Cal beneficiaries, making impacts related to that group uncertain.
AB 744 (Aguiar-Curry) Telehealth	Language Chaptered 10/13/19	Bill amended to delay effective date to January 1, 2021. CHBRP analysis provided impacts for 2020, but fiscal impacts will be similar in 2021. All other portions of CHBRP's analysis remains relevant.

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AB 767 (Wicks) Infertility	Amended – 6/6/19	Bill amended to require Covered California to develop options for the inclusion of in vitro fertilization coverage to coverage offered through the marketplace. The Background, Medical Effectiveness, and portions of the public health impacts sections remain relevant.
AB 993 (Nazarian) Health Care Coverage: HIV Specialists	Vetoed 10/12/19, Last Amended 9/4/19	All portions of CHBRP's analysis remains relevant.
AB 1246 (Limón) Basic Health Care Services	Amended – 7/11/19	All portions of CHBRP's analysis remains relevant.
AB 1611 (Chiu) Emergency Hospital Services: Costs	Amended – 6/27/19	Technical amendments were made to the bill, and Medi-Cal was specifically excluded. However CHBRP had already interpreted the bill in its original form to exclude Medi-Cal. All portions of CHBRP's fiscal analysis remains relevant.
AB 1676 (Maienschein) Mental Health	Amended – 4/22/19	Bill now defines telehealth and telehealth video services as excluding email. Portions of CHBRP's medical effectiveness and public health findings remain relevant.
SB 11 (Beall) Mental Health Parity and Substance Use Medications	Amended – 5/1/19	All portions of CHBRP's analysis remain relevant.
SB 159 (Wiener) HIV Prophylaxis	Language Chaptered 10/7/10	Bill now requires coverage of pharmacists independently furnishing an initial supply of PrEP of at least 30 days and up to 60 days. An updated cost impact analysis was provided to Senate Appropriations on 5/8/2019 reflecting prior amendments requiring coverage of pharmacists independently furnishing an initial 30-day supply of PrEP and is available on CHBRP's website. Fiscal impacts reflecting the subsequent amendments would be similar to the previous two fiscal analyses. CHBRP's medical effectiveness review remains relevant and most of the public health and long term impacts.
SB 163 (Portantino) Autism	Vetoed 10/12/19, Last Amended 9/5/19	All portions of CHBRP's analysis remains relevant.
SB 583 (Jackson) Clinical Trials	Language Chaptered 10/2/19	All portions of CHBRP's analysis remains relevant.
SB 600 (Portantino) Fertility Preservation	Language Chaptered 10/12/19	Bill now states that standard fertility preservation services are a basic health care service. SB 600 now only applies to DMHC-regulated plans and does not apply to CDI-regulated policies or Medi-Cal Managed Care plans. The CHBRP medical effectiveness findings remains relevant. The cost and public health impacts projected for DMHC-regulated plans remain relevant.

Bill Number (Author) Title	Version	Notes
SB 746 (Bates) Anticancer Medical Devices	Amended – 5/30/19	All portions of CHBRP's analysis remains relevant.