

California's Legislative Action on Aging and Long-Term Services and Supports in 2015

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Over 30 legislative measures were introduced in the 2015-2016 Legislative session on issues related to LTSS system transformation in California.



Over 40%

of bills related to aging and LTSS system transformation passed.

Introduction

In early 2015, California's Senate Select Committee on Aging and Long-Term Care produced a report, <u>A Shattered System: Reforming Long-Term Care in California</u>, which presents a roadmap for improving the state's long-term services and supports (LTSS) system. This report, built from California's modest <u>rankings on several key LTSS measures</u> compared to other states, created heightened interest among a broader group of policymakers. The State Scorecard results and the subsequent Committee report led to over 30 legislative measures being introduced in the 2015-2016 Legislative session championing California's LTSS system reform.

This fact sheet provides an update on 33 legislative measures relating to aging and LTSS reforms, and the action taken by the legislature and governor in 2015.

Legislative Activity

California has a two-year regular legislative session, with 2015 marking the end of the first year. The following tables identify legislation introduced in 2015 that address specific aging and LTSS measures. Governor Jerry Brown enacted eleven bills by his signature, and the legislature adopted three resolutions. Table 1 provides a summary of each item.

TABLE 1: 2015 Aging and LTSS Legislation in California, Adopted or Enacted ¹		
Bill Number	Bill Title/Description	Final Action [*]
<u>AB461</u>	Coordinated Care Initiative: Authorizes people residing in San Mateo County who use Medi-Cal and receive regional center services to voluntarily participate in Cal MediConnect, the state's duals demonstration project.	Enacted
<u>AB614</u>	Health Care Standards of Practice: Authorizes the Department of Public Health to use a streamlined administrative process to update regulatory references to health care standards of practice adopted by a state or national association when outdated standards are already referenced in the California Code of Regulations.	Enacted
<u>AB664</u>	Medi-Cal - Universal Assessment Tool Report: Requires the Department of Health Care Services, the Department of Social Services, and the Department of Aging to report to the Legislature on the stakeholder workgroup's progress no later than December 1, 2016.	Enacted

<u>AB1436</u>	In-Home Support Services - Authorized Representative: Authorizes an applicant for, or recipient of, In-Home Supportive Services to designate an individual to act as his or her authorized representative for purposes of the IHSS program.	Enacted
<u>ACR38</u>	State Task Force on Family Caregiving: Establish the California Task Force on Family Caregiving to examine issues relative to the challenges faced by family caregivers and opportunities to improve caregiver support.	Adopted
<u>ACR49</u>	Senior Bill of Rights: Resolution expressing the state's commitment to provide older adults with supportive programs and services.	Adopted
<u>AJR8</u>	Older Americans Act of 1965: Urges Congress to reauthorize the Older Americans Act of 1965.	Adopted
<u>ABx2-15</u>	California End of Life Option Act: Authorizes a qualified adult suffering from a terminal disease to request a life-ending drug, and specifies procedures and protections for individuals involved in the request and administration of the drug.	Enacted
<u>SB19</u>	Physician Orders for Life Sustaining Treatment (POLST) Form: Requires the establishment of the POLST e-registry pilot.	Enacted
<u>SB196</u>	Elder Abuse – Protective Orders: Authorizes a county adult protective services agency to file a petition for a protective order on behalf of an older or dependent adult under specific circumstances.	Enacted
<u>SB36</u>	Medi-Cal - Demonstration Project: Authorizes the state to request a temporary extension of the current 1115 Medicaid waiver until the new 1115 waiver (Medi-Cal 2020) is approved by the Centers for Medicare and Medicaid Services.	Enacted
<u>SB575</u>	Long-Term Care Insurance: Requires long-term care insurance providers to notify people of available benefits when they cancel their policies.	Enacted
<u>SB613</u>	Public Health Department - Dementia Guideline Work Group: Requires Department of Public Health to convene a workgroup to update the Guidelines for Alzheimer's Disease Management in California, and submit a report to the Legislature on these updates and recommendations on or before March 1, 2017.	Enacted
<u>SB675</u>	Hospitals - Family Caregivers: Requires hospitals to provide caregiver and transitional support upon discharge.	Enacted

* The enacted bills are those the governor has signed, while the adopted bills are resolutions that were accepted by the legislature.

In most instances, bills that did not make it out of the legislature by September 11, 2015 can be carried-over to 2016 for the second year of the legislative session. Table 2 lists the bills related to aging and LTSS that are held over.

TABLE 2: 2015 Aging and LTSS Legislation in California, Held Over ¹			
Bill Number	Bill Title/Description	Final Action	
<u>AB11</u>	Employment Paid Sick Days - In-Home Supportive Services (IHSS): Revises the definition of an employee under the Healthy Workplaces, Health Families Act of 2014 to include IHSS providers.	Held in Assembly Appropriations	
<u>AB211</u>	In-Home Supportive Services: Modifies the definition of the Coordinated Care Initiative (CCI) to exclude the IHSS Employer-Employee Relations Act if the CCI becomes inoperative, and establishes the statewide authority and the IHSS fund.	Held in Senate Inactive File	
<u>AB310</u>	Long-Term Care Insurance: Requires the Insurance Commissioner to commission an annual study comparing the statutory requirements for California's long-term care (LTC) products with those in the Interstate Insurance Product Regulation Compact. Requires a report comparing the marketability and affordability of California's LTC insurance products with similar products in specific states.	Held in Assembly Insurance Committee	
<u>AB348</u>	Long-Term Care Facilities - Complaints Investigations: Requires investigations into long-term care facility complaints to be completed within 40 working days.	Held in Senate Appropriations	
<u>AB474</u>	Public Social Services - SSI/SSP: Requires the state maximum State Supplementary Payment (SSP) grant for individuals to be readjusted and increased annually so the combination of the SSP and federal Supplemental Security Income payment equal 112% of the federal poverty level.	Held in Assembly Budget Committee	
<u>AB763</u>	Medi-Cal - Program for Aged and Disabled Persons: Increases the income disregard amount for Medi-Cal eligibility for older adults and people with disabilities, and requires the income disregard be adjusted annually.	Held in Assembly Appropriations	
<u>AB1235</u>	Medi-Cal - Beneficiary Maintenance Needs - Home Upkeep Allowances – Transitional Personal Needs Funds: Establishes eligibility and other requirements for the home upkeep allowance or transitional personal needs fund for people with Medi-Cal residing in a LTC facility.	Held in Assembly Appropriations	

<u>AB1518</u>	Medi-Cal - Nursing Facilities: Authorizes the increase in slots for the community-based nursing facility/acute hospital waiver.	Held in Senate Inactive File
<u>SB33</u>	Medi-Cal Estate Recovery: Limits Medi-Cal estate recovery to only those services required to be recovered under federal Medicaid law. Eliminates estate recovery against the estate of a surviving spouse of a deceased Medi-Cal beneficiary.	Held in Assembly Inactive File
<u>SB323</u>	Nurse Practitioners - Scope of Practice: Allows nurse practitioners to practice to the full extent of their education and training without the supervision of a physician or surgeon.	Held in Assembly Business and Professions Committee
<u>SB338</u>	Elder Abuse: Imposes stricter penalties on perpetrators of elder abuse.	Held in Senate Public Safety Committee
<u>SB492</u>	Coordinated Care Initiative - Consumer Guide: Requires DHCS to develop and post on the department's internet website, a guide to assist individuals in understanding the rights afforded to them under the CCI no later than July 1, 2016.	Held in the Senate
<u>SB547</u>	Assistant Secretary of Aging and Long-Term Care: Creates a Department of Community Living, the position of Assistant Secretary of Aging and Long-Term Care, and requires the state to develop a long-term care plan.	Held in Senate Health Committee
<u>SB571</u>	Long-Term Care - Cal CareNet: Requires the state to develop an internet portal that provides information on aging and LTSS.	Held in Senate Appropriations Committee

The legislature sent 1,214 bills on various topics of state interest to the governor in 2015, 11% of which he vetoed. Table 3 identifies bills vetoed in 2015 that address aging and LTSS measures, including links to the Governor's veto message.

TABLE 3: 2015 Aging and LTSS Legislation in California, Vetoed ¹		
Bill Number	Bill Title/Description	Final Action
<u>AB97</u>	In-Home Supportive Services - Provider Wages: Requires the Department of Social Services to program the Case Management Information and Payroll System (CMIPS) to receive payments from managed care health plans.	<u>Vetoed</u>

<u>SB199</u>	In-Home Supportive Services - Reading Services for the Blind: Allows the definition of supportive services to include up to 2 hours per month of assistance in reading and completing financial and other documents under the IHSS program for a person who is blind.	<u>Vetoed</u>
<u>AB332</u>	Long-Term Care Insurance: Establishes the Long-Term Care Insurance Task Force.	<u>Vetoed</u>
<u>AB1261</u>	Community-Based Adult Services (CBAS) - Adult Day Health: Establishes CBAS as a Medi-Cal managed care benefit. CBAS would be provided as a fee-for-service benefit for individuals exempt from enrolling in Medi-Cal managed care.	<u>Vetoed</u>
<u>AB1526</u>	Behavioral Risk Factor Surveillance Survey - Caregivers: Requires the Caregiver module be included in California's Behavioral Risk Factor Surveillance Survey.	<u>Vetoed</u>

Special Session on Health Care Financing

In June, the governor called for a special session on health care financing to specifically consider and act upon legislation necessary to enact permanent and sustainable funding through a new Managed Care Organization (MCO) tax and/or alternative fund sources in order to:

- Stabilize Medi-Cal funding through \$1.1 billion in financing from the MCO tax;
- Continue restoration of seven percent reduction in IHSS service hours beyond 2015-16; and
- Identify funding for increased provider rates for both providers of Medi-Cal and developmental disability services.²

The MCO tax, a revenue tax on Medi-Cal managed care plans, is a key financing resource for certain LTSS funded by Medi-Cal. Half of these total funds draw down federal matching funds and reimburse Medi-Cal managed care plans for the incurred taxes. The other half of the funds are used to offset General Fund expenditures for Medi-Cal managed care rates.³ According to federal guidance, California's current MCO tax is inconsistent with federal Medicaid regulations because the tax is only applied to Medi-Cal managed care plans verses all managed care plans in the state. The state's current MCO tax will not be renewed when it expires on June 30, 2016.⁴

Legislation to address the MCO tax was introduced during the special session. As no agreement regarding the MCO Tax could be reached, this legislation is expected to carry over for debate in January 2016.

Looking Forward

California is in the early stages of transforming systems of care for older adults and persons with disabilities. Using the Senate Select Committee's report as a launching pad, the California legislature and administration have begun the work necessary to develop a high performing LTSS system. It is critical that California and its local communities are prepared to meet the needs of the growing older adult population. Taking action now will help the state develop the infrastructure necessary to support people to live independently with dignity and choice as they grow older. There are both several opportunities for innovation as well as competing budgetary demands. Therefore, it is imperative California policymakers establish a clear vision and a thoughtful strategic plan for aging services and LTSS in order to be prepared to serve the expanding aging population over the next two decades.

References

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