

# CALIFORNIA ASSOCIATION OF HEALTH UNDERWRITERS

## TOP PRIORITY BILL STATUS REPORT

### JULY 5, 2017

BILL/AUTHOR	SUBJECT	POSITION	DESCRIPTION	STATUS
<a href="#">AB 156</a> ( <a href="#">Wood</a> D)	Individual market: single risk pool: index rate	<b>WATCH: PENDING AMENDMENT</b>	CAHU is closely watching AB 156 for amendments. AB 156, which is currently a spot bill, is very likely to become a prime vehicle for IFP health care reforms that will be added in reaction to changes made at the federal level in the coming weeks and months. Identical to SB 133.	<i>Passed ASSEMBLY</i>  <i>To SENATE HEALTH</i>  <b>HEARING: 7/19/2017</b>
<a href="#">AB 157</a> ( <a href="#">Wood</a> D)	Small group market: single risk pool: index rate	<b>WATCH: PENDING AMENDMENT</b>	CAHU is closely watching AB 157 for amendments. AB 157, which is currently a spot bill, is likely to become a prime vehicle for small group health care reforms that will be added in reaction to changes made at the federal level in the coming weeks and months. Identical to SB 134.	<i>Passed ASSEMBLY</i>  <i>To SENATE HEALTH</i>  <b>HEARING: 7/19/2017</b>
<a href="#">AB 251</a> ( <a href="#">Bonta</a> D)	Health and care facilities	<b>Re-Check</b>	This bill has been Gut and Amended and now would, for each fiscal year starting on or after January 1, 2019, require a chronic dialysis clinic to submit a report to the Department of Public Health detailing the total treatment revenue of the clinic, and the percentages of that total treatment revenue the clinic has expended on direct patient care services costs, health care quality improvements costs, federal and state taxes, facility license fees, and all other costs. The bill would, for each fiscal year starting on or after January 1, 2019, require a chronic dialysis clinic, if its direct patient care services costs, health care quality improvements costs, federal and state taxes, and	<i>To SENATE HEALTH</i>  <b>HEARING: 7/12/2017</b>

BILL/AUTHOR	SUBJECT	POSITION	DESCRIPTION	STATUS
			<p>facility license fees total less than 85% of the treatment revenue, to issue a rebate and reduction in billed amount to payers on a pro rata basis, as specified.</p> <p>Previously, CAHU SUPPORTS AB 251 which would ensure health care consumers are afforded better access to specialty clinics throughout California.</p>	
<a href="#">AB 417</a> ( <a href="#">Wood D</a> )	Health coverage: small employers	<b>WATCH: PENDING AMENDMENT</b>	CAHU is watching AB 417 for amendments. AB 417, which is currently a spot bill, is very likely to become a prime vehicle for small group health care reforms that will be added in reaction to changes made at the federal level in the coming weeks and months.	<i>To SENATE HEALTH 5/24/2017</i>  <b>HEARING: 7/12/2017</b>
<a href="#">AB 595</a> ( <a href="#">Wood D</a> )	Health Insurers: Mergers And Acquisitions	<b>WATCH: PENDING AMENDMENT</b>	CAHU is tracking AB 595 regarding health care service plan acquisitions and mergers. CAHU believes that it is necessary to ensure affordable choices for health care consumers that are only available through a competitive health insurance marketplace.	<i>HELD on ASSEMBLY Appropriations SUSPENSE FILE 5/26/17</i>  <b>TWO YEAR BILL</b>
<a href="#">AB 989</a> ( <a href="#">Cooper D</a> ) and ( <a href="#">Obernolte R</a> )	Health Savings Accounts: Tax Conformity	<b>SUPPORT</b>	CAHU is working in tandem with NAIFA California and IIABCAL to SUPPORT AB 989 which would conform state and federal tax laws pertaining to health savings accounts (HSAs) in order to provide needed savings to public and private sector employees and employers. Health Savings Accounts allow individuals to save tax-free dollars to pay for near-term medical expenses and also save for future longer-term costs, in particular, medical care costs that occur after retirement.	<b>HELD on ASSEMBLY Appropriations SUSPENSE FILE 5/26/17</b>

BILL/AUTHOR	SUBJECT	POSITION	DESCRIPTION	STATUS
<a href="#">AB 1584</a> <a href="#">(Gonzalez Fletcher D)</a>	Insurance: production agents: license examination: contracts	<b>OPPOSE UNLESS AMEND</b>	CAHU OPPOSES AB 1584 unless amended which attempts to mandate agents who take the license examination in Spanish to provide all contracts, policies, certificates, riders, and any other required notices in Spanish, if Spanish was principally used in the negotiation of the contract. The mandate would be more appropriately placed on health plans and carriers who are the source of all documents listed in the bill.	<b>ASSEMBLY INSURANCE</b>  <b>TWO YEAR BILL 5/12/2017</b>
<a href="#">AB 1601</a> <a href="#">(Bloom D)</a>	New Mandate: Hearing aids: minors	<b>OPPOSE UNLESS AMEND</b>	CAHU OPPOSES AB 1601 that mandates all health plans provide coverage for hearing devices for those under 18 years of age unless amended to include reasonable cost controls.	<b>HELD on ASSEMBLY Appropriations SUSPENSE FILE 5/26/17</b>  <b>TWO YEAR BILL</b>
<a href="#">SB 17</a> <a href="#">(Hernandez D)</a>	Health care: prescription drug costs.	<b>SUPPORT</b>	CAHU supports SB 17 that seeks to improve transparency of prescription drug costs by requiring health care service plans and carriers that report rate information to also include information regarding the percentage of the premium dollar spent on prescription drugs. This bill also requires drug manufacturers to provide prior notice of rate increases for prescription drugs, as specified.	<b>Passed ASSEMBLY HEALTH COMMITTEE &amp; ASM. APPROPS</b>  <b>ASSEMBLY FLOOR: ON SECOND READING FILE-</b>
<a href="#">SB 133</a> <a href="#">(Hernandez D)</a>	Individual market: single risk pool: index rate.	<b>WATCH: PENDING AMENDMENT</b>	CAHU is closely watching SB 133 for amendments. SB 133, which is currently a spot bill, is very likely to become a prime vehicle for IFP health care reforms that will be added in reaction to changes made at the federal level in the coming weeks and months. Identical to AB 156.	<b>To ASSEMBLY HEALTH</b>  <b>HEARING: 7/11/2017</b>

BILL/AUTHOR	SUBJECT	POSITION	DESCRIPTION	STATUS
<a href="#"><u>SB 134</u></a> ( <a href="#"><u>Hernandez D</u></a> )	Small group market: single risk pool: index rate.	<b>WATCH: PENDING AMENDMENT</b>	CAHU is closely watching SB 134 for amendments. SB 134, which is currently a spot bill, is very likely to become a prime vehicle for small group health care reforms that will be added in reaction to changes made at the federal level in the coming weeks and months. Identical to AB 157.	To ASSEMBLY HEALTH  <b>HEARING: 7/11/2017</b>
<a href="#"><u>SB 172</u></a> ( <a href="#"><u>Portantino D</u></a> )	Health Care Coverage: Fertility Preservation	<b>OPPOSE</b>	CAHU OPPOSES SB 172 that increases the cost of health care by mandating all new individual or group health insurance policies issued, amended, or renewed on and after January 1, 2018, provide fertility preservation coverage for any and all situations, direct or indirect, where fertility may be impacted.	<b>HELD on SENATE Appropriations SUSPENSE FILE</b>  <b>2 YEAR BILL 5/25/2017</b>
<a href="#"><u>SB 199</u></a> ( <a href="#"><u>Hernandez D</u></a> )	Advisory Committee: Health Care Cost, Quality and Equity Atlas	<b>NEUTRAL</b>	As amended, CAHU no longer opposes SB 199 and is now NEUTRAL on the bill. SB 199 now calls for DMHC to convene a broad spectrum of health care stakeholders and experts, to identify the type of data, purpose of use, and entities and individuals that are required to report to, or that may have access to, a health care cost, quality, and equity atlas.	Passed ASSEMBLY HEALTH & PRIVACY CMTE  <b>REFERRED to ASM APPROPS</b>  <b>HEARING: NOT SCHEDULED</b>
<a href="#"><u>SB 288</u></a> ( <a href="#"><u>Hernandez D</u></a> )	Health coverage: small employers.	<b>WATCH</b>	CAHU is closely monitoring SB 288 for amendments. SB 288, which is currently a spot bill, is very likely to become a prime vehicle for small group health care reforms that will be added in reaction to changes made at the federal level in the coming weeks and months. Identical to AB 417.	To ASSEMBLY HEALTH 6/1/2017  <b>HEARING: 7/11/2017</b>

BILL/AUTHOR	SUBJECT	POSITION	DESCRIPTION	STATUS
<a href="#">SB 515</a> (Fuller R)	Health care coverage: individual market.	WATCH	CAHU is closely watching SB 515 for amendments. SB 515, which is currently a spot bill, is very likely to become a prime vehicle for individual and family plan health care reforms that will be added in reaction to changes made at the federal level in the coming weeks and months. Identical to AB 156.	SENATE RULES <b>2 YEAR BILL</b> <b>5/12/2017</b>
<a href="#">SB 562</a> (Lara D)	Universal Single Payer Health System	OPPOSE	CAHU is working with NAIFA California and IIABCal to OPPOSE SB 562 (Lara/Atkins) which seeks to replace California's healthcare marketplace with a universal Single Payer system that would reduce competition, limit options for consumers, raise costs, and threaten access to care.	Passed SENATE FLOOR 6/1/17  TO ASSEMBLY DESK  <b>HELD AT ASM DESK PER SPEAKER RENDON</b>
<a href="#">SB 640</a> (Hertzberg D)	New Tax: Services	OPPOSE	CAHU OPPOSES SB 640, which proposes to establish a first-time sales tax on services, including services provided by independent health insurance agents.	SENATE GOVERNANCE & FINANCE 3/2/2017  <b>2-YEAR BILL</b>