



2007 MCH-Related Bills: Chaptered and Vetoed

Access and Insurance Coverage

AB 910

Author: Assemblymember Betty Karnette
Topic: Disabled Persons: Support and Health Care Coverage
Status: Chaptered into Law 10/13/07

Under existing law, a plan and a health insurer are required to provide that coverage for a dependent child who attains a limiting age specified in the plan or policy shall not terminate if the child is and continues to be both incapable of self-sustaining employment by reason of mental retardation or a physical handicap and chiefly dependent upon the subscriber or insured for support. This bill would change the first criterion, requiring a health care service plan and a health insurer to provide that coverage of a dependent child shall not terminate upon attaining the limiting age if the child is and continues to be incapable of self-sustaining employment by reason of mental disability, including, but not limited to, physically or mentally disabling injury, illness or condition. The bill would require the plan and insurer to notify the subscriber or insured 90 days before the dependent child attains the limiting age and to continue coverage pending its determination as to whether the child meets the criteria for coverage after attaining the limiting age. The bill would also require after a change in carriers, that the new plan or insurer accept the prior carrier's determination that a dependent child satisfies the criteria for continued coverage unless the director of the department or the Insurance Commissioner finds otherwise.

AB 8

Author: Assembly Speaker Fabian Nunez
Topic: Health Care Coverage: Employers and Employees
Status: Passed Assembly 6/01/07; Passed Senate 9/10/07; Enrolled 9/10/07; Vetoed by Governor 10/12/07

This bill reflects the intent of the Legislature to accomplish the goal of universal health care coverage for all California residents within five years. This bill would require the California Health and Human Services Agency to encourage fitness, wellness, and health promotion programs, create an advisory body, and to assume responsibility for professional review and development of best practice standards for high cost chronic diseases. As of January 1, 2009, this bill would create the California Cooperative Health Insurance Purchasing Program (Cal-CHIPP), which would function as a purchasing pool for health care coverage by employers and be administered by the Managed Risk Medical Insurance Board. The bill would require employers to make health care expenditures of an amount that is equivalent at a minimum of 7.5% of the employer's total social security wages or, alternatively, to elect to pay an employer fee for health care coverage provided through Cal-CHIPP. The bill provides that every health care service plan offering group health plan contracts shall provide as one coverage option of each group contract a benchmark plan established by the board so that group members and their dependents with family incomes at or below 300% of FPL that are determined eligible for coverage through the Medi-Cal or Healthy Families Programs can enroll in the benchmark plan. This bill would also expand the number of children eligible for coverage under the Healthy Families Program and the number of persons eligible for the Medi-Cal Program. The bill would delete as an eligibility requirement for a child under the Healthy Families Program and the Medi-Cal program that the child must meet citizen and immigration status requirements.

SB 260**Author:** Senator Darrell Steinberg**Topic:** Medi-Cal**Status:** Passed Senate 6/04/07; Passed Assembly 9/05/07; Enrolled and sent to Governor 9/06/07; **Vetoed by Governor, to Senate unfinished business 10/14/07**

Existing law provides that federally qualified health center services and rural health clinic services, as defined, are covered benefits under the Medi-Cal program to be reimbursed, to the extent that federal financial participation is obtained, to providers on a per-visit basis. "Visit" is defined as a face-to-face encounter between a patient of a federally qualified health center or a rural health clinic and specified health care professionals. This bill would provide that more than one encounter between a patient and the same health care professional on the same day and at a single location may each be separately reimbursed in specified circumstances. The bill would also provide that, under specified circumstances, visits with different health care professionals on the same day of service may be billed as separate visits. This bill is to be operative only if SB 238 and this bill are enacted.

Changes to Health and Social Service Programs, Including Eligibility and Enrollment

AB 381**Author:** Assemblymember Cathleen Galgiani**Topic:** Medi-Cal: Provider Reimbursement**Status:** **Chaptered into Law 10/5/07**

Existing law, subject to certain exceptions, prohibits a provider under the Medi-Cal program from submitting a reimbursement request to the Medi-Cal program that contains a beneficiary's social security number in order to receive payment if the department has issued that beneficiary a Medi-Cal beneficiary identification card containing a beneficiary number that includes the issuance date. This prohibition does not apply to a licensed hospital, long-term health care facility, a primary care clinic, or emergency medical transportation services. This bill would delete the limitation on this prohibition to those instances in which the request is submitted in order to receive payment, but would exempt the submission of a request by a provider for beneficiary eligibility from the prohibition. This bill would exempt from this prohibition a licensed hospital, long-term health care facility, a primary care clinic, a provider of medical transportation services, or a hospital-based physician, only if these providers have made a good faith effort to obtain a recipient's beneficiary identification card number. It would, however, terminate this exemption when the department establishes an automated system whereby a provider can access a beneficiary identification card number for submitting reimbursement requests.

AB 1324**Author:** Assemblymember Hector de la Torre**Topic:** Health Care Coverage: Treatment Authorization (formerly Rescinded Coverage)**Status:** **Chaptered into Law 10/14/07**

Existing law provides that a health care services plan or a health insurer that authorizes a specific type of treatment by a health care provider shall not rescind or modify this authorization after the provider renders the health care service in good faith and pursuant to the authorization. This bill would additionally specify that a health care service plan or health insurer is precluded from rescinding or modifying its authorization for any reason, including its subsequent rescission, cancellation or modification of the contract or its subsequent determination that it did not make an accurate eligibility determination. The legislature finds and declares that by adopting the amendments it does not intend to instruct a court as to whether or not the amendments are existing law.

AB 1642**Author:** Assemblymember Loni Hancock**Topic:** Medi-Cal: Noncontract Hospitals

Status: Chaptered into Law 10/10/07

This bill would permit a noncontract hospital in a closed health facility planning area to receive a Medi-Cal reimbursement when the noncontract hospital is a facility location of a nonprofit hospital which is an affiliate of a nonprofit health care service plan, the facility location is approved in accordance with the standards of the California Children's Services (CCS) program, the hospital is providing services medically necessary for the treatment of the CCS-eligible condition of a CCS-eligible patient who is a member of the health care service plan for all other health care services not related to that condition, and the services for the treatment of that condition are authorized by the CCS program. This bill would declare that it is to take effect immediately as an urgency statute.

AB 1328

Author: Assemblymember Mary Hayashi

Topic: Public Health (formerly Medi Cal: Accelerated Eligibility for Benefits)

Status: Passed Assembly 6/04/07; Passed Senate 9/06/07; To Enrollment 9/12/07; **Vetoed by Governor 10/14/07**

This bill originally addressed Medi Cal and Accelerated Enrollment for eligible children. After significant amendments were made, this bill now addresses eligibility requirements for Access for Infants and Mothers (AIM). Under existing law, one of the requirements for eligibility for health coverage under AIM is that a person be a resident of the state for a least 6 continuous months prior to application. This bill would delete this requirement. Language was deleted requiring implementation of eligibility requirements.

SB 137

Author: Senator Tom Torlakson

Topic: Children's Health, Medical Treatment

Status: Passed Senate 6/04/07; Passed Assembly 9/11/07; Enrolled and sent to Governor 9/19/07; **Vetoed by governor and sent to Senate unfinished business 10/10/07**

Existing law limits eligibility for treatment services under the California Children's Services Program to persons in families with an annual adjusted gross income of \$40,000 or less. This bill would change that eligibility limitation to include persons in a family with an annual or equivalent monthly income equal to or less than \$40,000 or that meets the income eligibility requirements for the Health Families Programs. Existing law requires the state to reimburse counties for 50% of the amount required to meet state administrative standards for that portion of the county caseload that is ineligible for MediCal. This bill would also require the state to reimburse for 100% for children in families with an adjusted gross income that exceeds 300% of the federal poverty level for a family of two. This bill would incorporate additional changes proposed by SB32 and AB1, to be operative only under circumstances specified in the bill.

Child Health

AB 673

Author: Assemblymember Mary Hayashi

Topic: Child Abuse or Neglect: Mandated Reports

Status: Chaptered into Law 10/10/07

For the purposes of provisions of existing law, the Child Abuse and Neglect Reporting Act, the terms "child abuse or neglect in out-of-home care" and "child abuse or neglect" is defined as including physical injury inflicted by other than accidental means. This bill would amend the terms "child abuse or neglect in out-of-home care" and "child abuse or neglect" to include death inflicted by other than accidental means. Existing law also provides that any other person who has knowledge of or observes a child whom he or she knows or reasonably suspects has been a victim of child abuse or neglect may report the known or suspected instance of child abuse or neglect. This bill would specify that these provisions apply to a mandated reporter who acts in his or her private capacity and not in his or her professional capacity or within the scope of his or her employment.

ACR 34

Author: Assemblymember Alan Nakanishi
Topic: Shaken Baby Syndrome Awareness Week
Status: Chaptered into Law 4/23/07

This measure recognizes April 15 to April 21, 2007 as "Shaken Baby Syndrome Awareness Week."

SCR 8

Author: Senator James Battin
Topic: Child Abuse Prevention Month
Status: Chaptered into Law 4/30/07

This measure acknowledges the month of April 2007 as Child Abuse Prevention Month, and encourages the people of the State of California to work together to support youth-serving child abuse prevention activities in their communities and schools.

AB 81

Author: Assemblymember Alberto Torrico
Topic: Child Protection: Safe Surrender
Status: Passed Assembly 6/06/07; Passed Senate 9/06/07; Enrolled and sent to Governor 9/21/07; Vetoed by Governor 10/13/07

Existing law designates certain locations as safe-surrender sites for the safe surrender of newborn children who are 72 hours of age or younger. This bill would expand the scope of those provisions to apply to children who are 7 days old or younger (amended from 30, then 21 days). The bill would also permit a local fire agency, upon the approval of the appropriate local governing body of the agency, to designate a safe-surrender site. Language was deleted requiring safe-surrender site personnel to provide to the parent or other individual with information regarding alternative options to surrender. The bill would also require, to the extent resources are available, as specified, the State Department of Social Services to conduct a statewide awareness campaign publicizing the existence of the program and to establish a toll-free telephone number for the purpose of providing education and assistance to the public regarding the program. The bill would specify certain circumstances in which a safe-surrender site and its personnel have no liability for a surrendered child. This bill was amended to eliminate the \$5,000,000 appropriation monies.

Environmental Exposure

AB 1108

Author: Assemblymember Fiona Ma
Topic: Children's Products: Phthalates
Status: Chaptered into Law 10/14/07

This bill would, commencing January 1, 2009, prohibit the manufacture, sale, or distribution in commerce of certain toys and child care articles, as defined, if those products contain types of phthalates in concentrations exceeding 1/10 of 1%. This bill would also require manufacturers to use the least toxic alternative when replacing phthalates in their products and would prohibit manufacturers from replacing phthalates with certain carcinogens and reproductive toxicants.

Health Education

AB 629

Author: Assemblymember Julia Brownley
Topic: Sex Education Programs: Requirements

Status: Chaptered into Law 10/13/07

This bill would enact the Sexual Health Education Accountability Act, which would require any program that provides education to prevent adolescent or unintended pregnancy or to prevent sexually transmitted infections and that is conducted, operated, or administered by the state or any state agency, or is funded directly or indirectly by the state, or receives any financial assistance from state funds or funds administered by the state to meet specified requirements, including: 1) All information shall be medically accurate, current, and objective; 2) Individuals providing instruction or information shall know and use the most current scientific data on human sexuality, human development, pregnancy, and sexually transmitted diseases; 3) The program content shall be age appropriate for its targeted population; 4) The program shall be culturally and linguistically appropriate for its targeted populations; 5) The program shall not teach or promote religious doctrine; 6) The program shall not reflect or promote bias against any person on the basis of disability, gender, nationality, race or ethnicity, religion, or sexual orientation, as defined in Section 422.56 of the Penal Code; 7) The program shall provide information about the effectiveness and safety of at least one or more drug or device approved by the federal Food and Drug Administration for preventing pregnancy and for reducing the risk of contracting sexually transmitted infections. These provisions apply only to grants that are funded pursuant to contracts entered into or amended on or after January 1, 2008.

Infectious Diseases

AB 682

Author: Assemblymember Patty Berg

Topic: HIV/AIDS Testing

Status: Chaptered into Law 10/12/07

The bill would revise the written and informed consent standards associated with HIV testing. Specifically, this bill would require, prior to ordering an HIV test, the medical care provider to inform the patient that the test is planned, provide information about the test, inform the patient regarding specified treatment options and further testing needed, and advise the patient that he or she has the right to decline the test. The bill would require the medical provider, if a patient declines the test, to note that fact in the patient's medical file. Additionally, this bill would revise the prenatal HIV testing standard from providing a pregnant woman the right to "accept or refuse" the test, to instead, "decline" the test. This bill would repeal requirements that the acceptance of testing for HIV be documented on a specified form, signed by the patient, and maintained in the medical record. This bill would clarify a requirement that the prenatal care provider offer, at a minimum in-person, oral or written HIV information and counseling to every pregnant patient. This bill states that health care providers are strongly encouraged to seek consultation with HIV specialists who provide care for pregnant and postpartum HIV-positive women. This bill was amended to include language prohibiting a medical care provider, licensed physician, surgeon or other person engaged in prenatal care to unlawfully disclose an individual's HIV status. Furthermore, this bill would prohibit a person from administering a test for HIV infection unless the person being tested or his or her parent, guardian, conservator, or other specified person, signs a written statement documenting the person's informed consent to the test. The bill would provide an exception to that requirement for tests to detect HIV on a cadaver when an autopsy is performed, or when blood is tested as part of a scientific investigation conducted by a medical researcher operating under the approval of an institutional review board or by the department, in accordance with a prescribed protocol.

Maternal and Child Health Miscellaneous

AB 34

Author: Assemblymember Anthony J. Portantino

Topic: Umbilical Cord Blood Collection Program

Status: Chaptered into Law 10/11/07

***Related bills: AB 40 and SB 962**

This bill is designed to create an inventory of genetically diverse umbilical cord blood to increase the likelihood of a patient obtaining a suitable donor match. This bill would require the department to establish, by January 1, 2010, and until January 1, 2015, the Umbilical Cord Blood Collection Program for the purpose of increasing the amount of umbilical cord blood that is donated in the state and that will be added to the national inventory. The bill would authorize the department, to the extent private or public funds are identified for this purpose, to contract with blood banks that are licensed or accredited to provide umbilical cord blood banking storage services, for the purpose of collecting and storing umbilical cord blood. The bill would require that any funds available for purposes of the program be deposited into the Umbilical Cord Blood Collection Program Fund, which this bill would create. The bill would also require that information collected pursuant to the program be confidential, and be used solely for the purposes of the program, as prescribed. The bill would provide that its provisions shall only become operative if SB 962 of the 2007-2008 Regular Session is enacted and becomes operative.

SB 102

Author: Senator Carole Migden

Topic: Blood Transfusions

Status: [Chaptered into Law 7/20/07](#)

Existing law requires, whenever there is a reasonable possibility, as determined by a physician, that a blood transfusion may be necessary as a result of a medical procedure, that the physician, by means of a standardized written summary that is published by the Medical Board of California, inform the patient of the positive and negative aspects of receiving autologous blood and directed and nondirected homologous blood from volunteers. This bill also includes a doctor of podiatric medicine within the scope of these requirements. It requires the information to be given by the physician or doctor of podiatric medicine, directly or through a nurse practitioner, certified nurse midwife, or physician assistant, authorized to order a blood transfusion.

SB 962

Author: Senator Carole Migden

Topic: Umbilical Cord Blood Biomedical Resources Program

Status: [Chaptered into Law 10/11/07](#)

Related bills: AB 34 and AB 40

Existing law, the Hereditary Disorders Act, requires the State Department of Health Services to establish regulations and standards for a hereditary disorders program, including with respect to prenatal testing programs for newborns. Pursuant to this act, existing regulations require clinicians to provide all pregnant women, at the first prenatal visit, with information about the use and availability of prenatal screening for birth defects of the fetus. This bill would also authorize (amended from "require") a primary prenatal care provider to provide this information to a woman who is known to be pregnant during the first prenatal visit. This bill would establish a state umbilical cord blood biomedical resources program to collect, process, and store umbilical cord blood stem cells for the purposes of transplantation and research, and would require the department to establish fees relating to these purposes to cover the costs of administering the program. The bill would require the fees to be deposited into the Birth Defect Monitoring Program Fund. This bill would require the Committee for the Protection of Human Subjects (CPHS) to determine if certain criteria relating to the security and confidentiality of donor's personal information are met before umbilical cord blood collected under the program may be used for research activities. This bill would provide that these provisions shall only become operative if AB 34 is enacted and becomes operative on or before January 1, 2008.

Mental Health

AB 423

Author: Assemblymember Jim Beall

Topic: Healthcare Coverage: Mental Health Services

Status: Passed Assembly 6/04/07; Passed Senate 9/06/07; To enrollment 9/07/07; **Vetoed by Governor 10/14/07**

This mental health parity expansion bill would require a health plan and health insurer to provide for the diagnosis and medically necessary treatment of a mental illness of a person of any age, including a child, under the same terms and conditions applied to other medical conditions, including but not limited to: a) maximum lifetime benefits; b) co-payments; and c) individual and family deductibles. The bill would define mental illness for this purpose as a mental disorder defined in the Diagnostic and Statistical Manual IV. The mental health parity provisions in current law define severe mental illness as one of 9 specific conditions.

Nursing and Physician Workforce

AB 1226

Author: Assemblymember Mary Hayashi

Topic: Medi-Cal: Provider Enrollment

Status: Chaptered into Law 10/14/07

This bill would provide, as of July 1, 2008, that a physician enrolled and in good standing in the Medi-Cal program and who is changing locations within the same county is eligible to continue enrollment at the new location by filing a change of location form, to be developed by the department, in lieu of submitting a complete application package. The bill would require the department to provide notice upon receipt of a form under this provision. The bill would also provide, as of July 1, 2008, for the expedited enrollment in the Medi-Cal program of any physician and surgeon licensed by the Medical Board of California or the Osteopathic Medical Board of California who meets specified conditions and submits a short form application to be developed by the department. The bill would grant an applicant under these circumstances provisional provider status for 12 months, after which the provider would receive permanent provider status.

Nutrition

SB 22

Author: Senator Carole Migden

Topic: Breastfeeding

Status: Chaptered into Law 10/11/07

This bill would provide that the State Department of Public Health shall recommend (amended from "require") that general acute care hospitals and special hospitals that provide maternity care, and that have exclusive patient breastfeeding rates in the lowest 25%, as described, offer a minimum of eight hours of training to appropriate administrative and supervisory staff on hospital policies and recommendations that promote exclusive breastfeeding, as prescribed. The bill would require the department to notify the hospital director or other person in charge of the hospital that the training is available, upon request, to the hospital. This bill would also require the department not later than July 1, 2008, to the extent that specified federal funds and private grants or donations are made available for this purpose, to begin expansion of the breast-feeding peer counseling program at local agency WIC sites. It would further require the department to streamline and simplify existing Medi-Cal program procedures to improve access to lactation supports and breast pumps among Medi-Cal recipients. The appropriation of \$2,250,000 from the General Fund to the State Department of Public Health was pulled from the bill.

SB 48

Author: Senator Elaine Alquist

Topic: Community Development: Healthy Food Choices

Status: Chaptered into Law 10/13/07

Existing law requires the State Department of Public Health to develop a "Healthy Food Purchase" pilot program and to establish and implement a "5 A Day--For Better Health" program to promote consumption of fruit and vegetables. This bill would require the State Department of Public Health, until January 1, 2015, in partnership with other programs and services within the Business, Transportation and Housing Agency, and to the extent funds are appropriated, to establish the "Healthy Food Retail Innovations Fund" to provide residents of underserved communities with retail food markets that would offer high quality fruit, vegetables, and other healthy foods and encourage retail innovation. The bill would also require the department to provide grants and loans on a competitive basis for land acquisition, business plan development, feasibility studies, refrigeration units, outside technical assistance, and other startup costs.

Public Health

AB 28

Author: Assemblymember Jared Huffman

Topic: Personal Income Taxes: Contributions: California Breast Cancer Research Fund

Status: Chaptered into Law 10/11/07

This bill would extend the operational provisions of the Personal Income Tax Law which allows taxpayers to designate on their tax returns that a specified amount in excess of their tax liability be contributed to the State Breast Cancer Research Fund. This fund would remain on tax returns until January 1, 2013.

SB 7

Author: Senator Jenny Oropeza

Topic: Smoking in Vehicles with Minor Passengers

Status: Chaptered into Law 10/10/07

This bill would make it an infraction punishable by a fine not exceeding \$100 for a person to smoke a pipe, cigar, or cigarette in a motor vehicle, whether in motion or at rest, in which there is a minor. Language was removed requiring the State Department of Public Health to conduct a public education program regarding the dangers of secondhand smoke in confined places. This bill would prohibit a law enforcement officer from stopping a vehicle for the sole purpose of determining whether the driver is in violation of the provisions of the bill.

AB 834

Author: Assemblymember Mary Hayashi

Topic: Dental Disease Prevention Programs

Status: Passed Assembly 6/05/07; Passed Senate with amendments 9/05/07; Passed Assembly with amendments 9/05/07; Passed Senate 9/07/07; To enrollment 9/07/07; Vetoed by Governor 10/10/07

Existing law authorizes local sponsors, as defined, to offer community dental disease prevention programs approved by the State Department of Health Services to school children in preschool through 6th grade, and in classes for individuals with exceptional needs. This bill would require the educational programs to be age appropriate and focused on development of personal practices by children in preschool through 6th grade and parents, and would require the preventive services to be age appropriate and to include dietary fluoride supplements. The bill would also require acts performed or services provided that constitute the practice of dentistry to be performed by a licensed dentist or a licensed or registered dental health professional. This bill would revise existing law to require a local health officer that seeks to participate in the community dental disease prevention program to submit a proposal for the program to the department every 3 years annually. Language was removed requiring the department to establish a state dental disease prevention program advisory committee. The bill would also, commencing July 1, 2008, permit increases in reimbursement rates to local sponsors. This

bill specifies that the CDDPP is exempt from the full regulatory process for the purpose of establishing and periodically revisiting program standards.

SB 533

Author: Senator Leland Yee

Topic: Health: Immunizations: Pneumococcus

Status: Passed Senate 6/06/07; Passed Assembly with amendments 9/11/07; Passed Senate 9/11/07; To enrollment 9/11/07; **Vetoed by Governor and sent to Senate Unfinished Business 10/5/07**

***Related Bill: AB 16**

Existing law states the intent of the Legislature to provide a means for the eventual achievement of total immunization against certain childhood diseases. This bill would add pneumococcus to that list. Existing law also prohibits the governing authority of a school or other institution from unconditionally admitting any person as a pupil of any private or public elementary or secondary school, child care center, day nursery, nursery school, family day care home, or development center, unless prior to his or her first admission to that institution he or she has been fully immunized against various diseases. This bill would, on and after July 1, 2008, add pneumococcus to the list of diseases, except for children who are 24 months of age and older in which case the governing authority shall not be required to verify documentation. The bill would, commencing July 1, 2010, revise the list of institutions that are subject to the prohibition, and would require the State Public Health Officer to create and maintain a list of immunizations and doses that shall be required prior to conditional and unconditional entry into the above-described institutions. The bill would, commencing July 1, 2010, also require the State Department of Public Health to annually publish and post on its website the list of immunizations that are required under these provisions, and to adopt regulations necessary to administer the immunization requirements by July 1, 2010.

Reproductive Health and Perinatal Care

SB 443

Author: Carole Migden

Topic: HIV Positive Sperm Donation

Status: **Chaptered Into Law 9/11/07**

This bill allows partners of HIV-positive men to conceive as long as “sperm-washing” techniques are used to minimize the infection risk to mother and child. Existing law bans the transfer of bodily fluids from HIV+ donors.

AB 741

Author: Assemblymember Karen Bass

Topic: Infant Mortality: Interpregnancy Care

Status: Passed Assembly 6/06/07; Passed Senate with amendments 9/10/07; Passed Assembly 9/11/07; To enrollment 9/11/07; **Vetoed by Governor 10/13/07**

This bill would require the State Department of Public Health to develop a 3 year (time amended from 5 years) demonstration program that would offer interpregnancy care, as defined, to women who enroll in the program and meet specified criteria, in an effort to improve the child spacing and adverse pregnancy outcomes for women who have had a previous very low birth weight delivery, as specified. The program would commence March 1, 2008, would operate in at least three community-based organizations or service providers (amended from two hospitals), and would provide specified services to eligible participants, including primary health care and social services. This bill would also require the community-based organizations or service providers to contract with an external evaluator to evaluate the effectiveness of the program using specified criteria, to submit the evaluation to the department on or before September 1, 2011 (amended from 2013), and would require the department, by March 1,

2012 (amended from 2014), to submit a report on the program's progress to the Legislature, as specified.

AB 1429

Author: Assemblymember Noreen Evans

Topic: Human Papillomavirus Vaccination

Status: Passed Assembly 5/29/07; Passed Senate with amendments 9/4/07; Passed Assembly 9/5/07; Enrolled and sent to Governor 9/10/07; **Vetoed by Governor 10/13/07**

Under existing law, a plan and a health insurer that include coverage for the treatment or surgery of cervical cancer are deemed to provide coverage, upon the referral of a patient's physician and surgeon, a nurse practitioner, or a certified nurse midwife providing care to the patient and operating within the scope of practice permitted for the licensee, for an annual cervical cancer screening test. This bill would instead require the referral to be from the licensed health care practitioner who is providing care to the patient and operating within the scope of practice permitted for the licensee. This bill would expand the coverage to include a human papillomavirus vaccination, as specified.

Safety

SB 33

Author: Senator Joe Simitian

Topic: Teens and Cell Phones

Status: **Chaptered Into Law 9/13/07**

This bill, on and after July 1, 2008, prohibits a person under the age of 18 years from driving a motor vehicle while using a wireless telephone, even if equipped with a hands-free device, or while using a mobile service device, as defined. The prohibition would not apply to such a person using a wireless telephone or a mobile service device for emergency purposes.

AB 881

Author: Assemblymember Gene Mullin

Topic: Vehicles: Child Passengers: Restraint Systems

Status: Passed Assembly 5/07/07; Passed Senate with amendments 9/06/07; Passed Assembly 9/10/07; To enrollment 9/10/07; **Vetoed by Governor 10/10/07**

This bill would require a child who is under 8 years of age to be secured in a rear seat in an appropriate child passenger restraint system. It would provide an exception from this requirement for a child who is under 8 years of age, but who is 4 feet 9 inches tall or taller and who is properly restrained by a safety belt. The bill would also prohibit a parent or legal guardian or driver from transporting in a motor vehicle, a child or ward who is 8 years of age or older, but less than 16 years of age, without properly securing the child or ward in an appropriate child passenger restraint system or a safety belt. Additionally it would require, for transport upon a highway in a motor vehicle, that a parent or legal guardian properly secure his or her child or ward who is under one year of age or weighs less than 20 pounds in a rear-facing child passenger restraint system in a rear seat. The bill would impose a similar requirement on the driver of a motor vehicle, unless the parent or legal guardian of the child is also present in the vehicle and is not the driver. The bill would also require public and private hospitals, clinics or birthing centers to, at the time of discharge of a child, provide and discuss information on the current law requiring child passenger restraint systems, safety belts, and transporting children in rear seats to the parents or to the person to whom the child is being released if the child is under eight years of age. The bill includes protective legal language for these institutions so they will not be held responsible for the failure of a parent or guardian to properly transport the child. The bill's provisions would become operative June 30, 2008 (amended date).

SB 171

Author: Senator Don Perata
Topic: Hospitals: Lift Teams
Status: Passed Senate 6/04/07; Passed Assembly 9/06/07; Enrolled and sent to Governor 9/10/07; **Vetoed by Governor 10/13/07**

This bill would require, as of July 1, 2009, each general acute care hospital to establish a patient protection and health care worker back injury prevention plan. Each hospital would be required to conduct a needs assessment to identify patients needing lift teams, and lift, repositioning, or transfer devices. This bill would mandate that these hospitals use lift teams, and lift, repositioning, and transfer devices, and to train health care workers on the appropriate use of these devices. This bill would further provide that a health care worker who refuses to lift a patient could be disciplined only if the worker has been trained on appropriate patient and equipment lifting procedures and has appropriate and functional lift, repositioning, or transfer devices available to perform the requested action.

Vital Statistics

SB 850

Author: Senator Abel Maldonado
Topic: Vital Statistics: Certificate of Still Birth
Status: **Chaptered into Law 10/13/07**

Existing law requires that each fetal death in which the fetus has advanced to or beyond the 20th week of uterogestation to be registered with the local registrar of births and deaths of the district in which the fetal death was officially pronounced within 8 calendar days following the event and prior to any disposition of the fetus. This bill would specify that those provisions shall not apply to the termination of a pregnancy performed in compliance with a prescribed law governing reproductive privacy. The bill would further enact the Missing Angels Act, which would require the local registrar of births and deaths of the county in which a fetal death, in which the fetus has advanced to or beyond the 20th week of uterogestation is registered, to issue, upon request, to the father or mother, a Certificate of Still Birth on a form prescribed by the State Registrar of Vital Statistics. The bill would define still birth for this purpose to be delivery of a fetus where there was a naturally occurring intrauterine fetal death that occurred after a gestational age of not less than 20 weeks. The bill would prescribe information to be contained in a Certificate of Still Birth. The bill would also authorize the state registrar to charge a fee for issuing a Certificate of Still Birth not to exceed \$20.00 adjusted annually as prescribed. This bill would also authorize a local registrar of births and deaths to charge an appropriate fee not to exceed the cost of issuance.

Workplace Policy

AB 537

Author: Assemblymember Sandre Swanson
Topic: Family and Medical Leave
Status: Passed Assembly 6/05/07; Passed Senate 9/06/07; To enrollment 9/07/07; **Vetoed by Governor 10/13/07**

This bill would increase the circumstances under which an employee is entitled to protected leave pursuant to the Family Rights Act by (1) eliminating the age and dependency elements from the definition of "child," thereby permitting an employee to take protected leave to care for his or her independent adult child suffering from a serious health condition, (2) expanding the definition of "parent" to include an employee's parent-in-law, and (3) permitting an employee to also take leave to care for a seriously ill grandparent, sibling, grandchild, or domestic partner, as defined.

SB 727

Author: Senator Sheila Kuehl
Topic: Expand Paid Family Leave

Status: Passed Senate 06/07/07; Passed Assembly 9/05/07; Enrolled and sent to Governor 9/11/07, **Vetoed by Governor 10/13/07**

This bill would expand the scope of the family temporary disability insurance program to allow workers to receive wage replacement benefits while they take time off work to care for seriously ill siblings, grandparents, grandchildren, and parents-in-law. The bill clarifies existing law to ensure that Paid Family Leave must be taken concurrently with the California's Family Rights Act and the federal Family and Medical Leave Act. The bill becomes operative July 1, 2008.

SB 836

Author: Senator Sheila Kuehl

Topic: Employment Discrimination

Status: Passed Senate 5/31/07; Passed Assembly 9/06/07; To enrollment 9/07/07; **Vetoed by Governor 10/13/07**

This bill proposes the addition of "familial status" to the list of prohibited bases for employment discrimination in the Fair Employment and Housing Act; i.e., race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, marital status, sex, age or sexual orientation.