(Monning D)  Health care coverage: essential health benefits.
Status: 9/30/2012-Chaptered by the Secretary of State, Chapter Number 854, Statutes of 2012
Summary: Would require an individual or small group health care service plan contract issued, amended, or renewed on or after January 1, 2014, to cover essential health benefits, which would be defined to include the health benefits covered by particular benchmark plans. The bill would prohibit treatment limits imposed on these benefits from exceeding the corresponding limits imposed by the benchmark plans and would generally prohibit a plan from making substitutions of the benefits required to be covered. The bill would specify that these provisions apply regardless of whether the contract is offered inside or outside the Exchange but would provide that they do not apply to grandfathered plans, specialized plans, or Medicare supplement plans, as specified. The bill would prohibit a health care service plan from issuing, delivering, renewing, offering, selling, or marketing a plan contract as compliant with the federal essential health benefits requirement satisfies the bill's requirements. The bill would authorize the Department of Managed Health Care to adopt emergency regulations implementing these provisions until March 1, 2016, and would enact other related provisions. This bill contains other related provisions and other existing laws.

Position
Approve

(Carter D)  Practice of medicine: cosmetic surgery: employment of physicians and surgeons.
Status: 7/17/2012-Chaptered by the Secretary of State, Chapter Number 140, Statutes of 2012
Summary: Would prohibit construing its provisions to alter or apply to any arrangements currently authorized by law. Because the bill would expand a public offense, it would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

Position
Coordinate w/CMA

(Allen D)  Community mental health services: assisted outpatient treatment.
Status: 9/22/2012-Chaptered by the Secretary of State, Chapter Number 441, Statutes of 2012
Summary: Would extend authorization for the act to January 1, 2017, and would require the State Department of Health Care Services to submit the report by July 1, 2015.

Position
Sponsor

(Ma D)  Child custody: visitation.
Status: 9/28/2012-Chaptered by the Secretary of State, Chapter Number 692, Statutes of 2012
Summary: Would require any standards for supervised visitation providers adopted by the Judicial Council to conform to the provisions of the bill. The bill would require supervised visitation providers to be professional providers or nonprofessional providers, as specified. The bill would require the court, in any case in which it has determined there is domestic violence or child abuse or neglect, as specified, and it determines that supervision is necessary, to consider whether to use a professional or nonprofessional provider based upon the child's best interest. This bill contains other related provisions.

Position
Opposition
Withdrawn

(Hagman R)  Mental health: persons incompetent to stand trial: pilot program expansion.
Status: 8/17/2012-Failed Deadline pursuant to Rule 61(b)(14). (Last location was S. APPR. on 8/16/2012)
Summary: Would authorize the department to expand a specified pilot program to establish competency restoration programs in prescribed counties, to provide treatment in county jails to individuals found incompetent to stand trial, and who have not been committed to a state hospital. By requiring specified counties to participate in the pilot program if it is expanded, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.
Position
Approve

**AB 1800 (Ma D) Health care coverage.**
Status: 8/17/2012-Failed Deadline pursuant to Rule 61(b)(14). (Last location was S. APPR. on 8/16/2012)
Summary: Would, commencing January 1, 2014, require a health care service plan contract and a health insurance policy, except for a specialized plan or policy, to provide for a limit on annual out-of-pocket expenses for certain covered benefits, except as specified, and would provide that this limit shall not exceed that federal limit. The bill would also provide, commencing January 1, 2014, that these provisions shall not be construed to affect the reduction in cost sharing for eligible insureds described in federal law. This bill contains other related provisions and other existing laws.

Position
Approve

**AB 1803 (Mitchell D) Medi-Cal: emergency medical conditions.**
Status: 9/22/2012-Chaptered by the Secretary of State, Chapter Number 442, Statutes of 2012
Summary: Would, for Medi-Cal fee-for-service beneficiaries, add emergency services and care that are necessary for the treatment of an emergency medical condition and medical care directly related to the emergency medical condition to the schedule of benefits. This bill would provide that specified definitions shall apply for the purposes of this provision and that this provision shall not be construed to change the obligation of Medi-Cal managed care plans to provide emergency services and care.

Position
Approve

**AB 1849 (Carter D) Juveniles: restorative justice.**
Status: 5/25/2012-Failed Deadline pursuant to Rule 61(b)(8). (Last location was A. APPR. SUSPENSE FILE on 4/18/2012)
Summary: Would authorize the juvenile court of a county to adopt a restorative justice program to address the needs of minors, victims, and the community. The bill would require a restorative justice program adopted by a juvenile court to be implemented through a restorative justice protocol developed by the court with the prosecutor, public defender, and, when possible, representatives from other interested groups. Under this bill, certain enumerated offenses would not be eligible for inclusion within a restorative justice program. Additionally, this bill would authorize a court not to refer an eligible minor to a restorative justice program if the court determines that the program is not in the minor's best interest. The bill would require the Administrative Office of the Courts to establish restorative justice pilot programs in 5 or more counties, provided that the presiding judge in a selected county supports participation in the pilot program. Under the bill, by July 1, 2013, the Administrative Office of the Courts would be required to make a recommendation to the Judicial Council which courts should be selected for the program. After the Judicial Council selects the participating courts, the courts would begin implementing restorative justice programs by January 1, 2014. The bill would also require the Administrative Office of the Courts to report to the Judicial Council on the performance of the pilot programs by July 1, 2018. This bill contains other related provisions.

Position
Approve

**AB 1896 (Chesbro D) Tribal health programs: health care practitioners.**
Status: 7/13/2012-Chaptered by the Secretary of State, Chapter Number 119, Statutes of 2012
Summary: Would codify that federal requirement by specifying that a person who is licensed as a health care practitioner in any other state and is employed by a tribal health program is exempt from this state's licensing requirements with respect to acts authorized under the person's license where the tribal health program performs specified services. This bill contains other existing laws.

Position
Watch

**AB 1907 (Lowenthal, Bonnie D) Inmates: psychiatric medication.**
Status: 9/30/2012-Chaptered by the Secretary of State, Chapter Number 814, Statutes of 2012
Summary: Would contain findings and declarations to the effect that it is the intent of the Legislature in enacting specified legislation, which was previously enacted, to terminate the permanent injunction stemming from the decision in Keyhea v. Rushen providing a process for the involuntary administration of psychotropic medication to prisoners, and to replace those provisions with the provisions previously enacted, as specified. This bill contains other
related provisions and other existing laws.

Position
Support

AB 2134 (Chesbro D)  Community mental health services: assisted outpatient treatment.
Status: 7/6/2012-Failed Deadline pursuant to Rule 61(b)(13). (Last location was S. HEALTH on 6/28/2012)
Summary: Would require a county that elects to provide these services to develop specified best practices for the purposes of responding to a mental health crisis, and to provide for services in connection with these best practices. The bill would exempt counties that, as of January 1, 2012, are providing services pursuant to Laura's Law.
Position
Oppose

AB 2228 (Hayashi D)  Mental Health Services Act: family justice centers.
Status: 4/27/2012-Failed Deadline pursuant to Rule 61(b)(5). (Last location was A. HEALTH on 3/12/2012)
Summary: Would require the county mental health programs for children and for adults and seniors to include services that address the needs of crime victims who seek services at a family justice center, if the county has a family justice center, thereby imposing a state-mandated local program. This bill would declare that it is consistent with and furthers the intent of the Mental Health Services Act. This bill contains other related provisions and other existing laws.
Position
Watch

AB 2266 (Mitchell D)  Medi-Cal: Health Homes for Medi-Cal Enrollees and 1115 Waiver Demonstration Populations with Chronic and Complex Conditions.
Status: 9/1/2012-Failed Deadline pursuant to Rule 61(b)(17). (Last location was S. INACTIVE FILE on 8/29/2012)
Summary: Would authorize the department, subject to federal approval, to create a health home program for enrollees with chronic conditions, as prescribed, as authorized under federal law. This bill would provide that those provisions shall not be implemented unless federal financial participation is available and additional state general funds are not used to fund the administration and service costs, except as specified. This bill would require the department to ensure that an evaluation of the program is completed, if created by the department, and would require that the department submit a report to the appropriate policy and fiscal committees of the Legislature within 2 years after implementation of the program.
Position
Approve

AB 2369 (Valadao R)  Prisoners: pharmacy services.
Status: 9/1/2012-Failed Deadline pursuant to Rule 61(b)(17). (Last location was S. THIRD READING on 7/3/2012)
Summary: Would require the use of less expensive medications as achieved by the statewide pharmaceutical program, when those medications are available, unless an exception is reviewed and approved in accordance with an established nonformulary approval process, or unless the prescriber has indicated on the face of the prescription or on any other appropriate form for electronic prescriptions "dispense as written".
Position
Opposition
Withdrawn

AB 2370 (Mansoor R)  Mental retardation: change of term to intellectual disabilities.
Status: 9/22/2012-Chaptered by the Secretary of State, Chapter Number 448, Statutes of 2012
Summary: Would also state the intent of the Legislature that the bill not be construed to change the coverage, eligibility, rights, responsibilities, or substantive definitions referred to in the amended provisions of the bill. This bill contains other existing laws.
Position
Approve

AB 2371 (Butler D)  Veterans: criminal defendants: mental health issues and restorative relief.
Status: 9/20/2012-Chaptered by the Secretary of State, Chapter Number 403, Statutes of 2012
Summary: Would authorize a court to grant restorative relief to a criminal defendant who comes within the description set forth above if the court finds, at a public hearing held after not less than 15 days' notice to the prosecution, the defense, and any victim of the offense, that the defendant meets specified criteria, including that he
or she does not represent a danger to the health and safety of others. The bill would authorize the court to take any of specified actions, including deeming all conditions of probation, except victim restitution, to be satisfied, including fines, fees, assessments, and programs, and terminating probation prior to the expiration of the term of probation, reducing a felony to a misdemeanor, as specified, setting aside the conviction and dismissing the action, or providing other specified relief. The bill would provide that a dismissal of the action pursuant to these provisions releases the defendant from all penalties and disabilities resulting from the offense of which the defendant has been convicted in the dismissed action, except as specified.

**Position**

**Approve**

**AB 2397**  
(Allen D)  
**Mental health: state hospitals: staff-to-patient ratios.**  
**Status:** 8/17/2012-Failed Deadline pursuant to Rule 61(b)(14). (Last location was S. APPR. on 8/16/2012)  
**Summary:** Would require the department to reimburse an independent entity to conduct a review and analysis of staffing ratios to determine the appropriate levels for effective patient treatment, and would require a report with findings to be submitted to the Legislature by August 1, 2013. This bill contains other related provisions.

**Position**

**Approve**

**AB 2399**  
(Allen D)  
**Mental health: state hospitals: injury and illness prevention plan.**  
**Status:** 9/29/2012-Chaptered by the Secretary of State, Chapter Number 751, Statutes of 2012  
**Summary:** Would require state hospitals to update their injury and illness prevention plans at least once every year, as specified, and would require the department to submit those plans to the Legislature every 2 years. This bill would require each state hospital to establish an injury and illness prevention committee, which would meet at least 4 times a year, to provide recommendations to the hospital's director on updates to the injury and illness prevention plan, and would also require each state hospital to develop an incident reporting procedure that can be used to, at a minimum, develop reports of patient assaults on employees and assist the hospital in identifying risks of patient assaults on employees.

**Position**

**Approve**

**AB 2531**  
(Allen D)  
**State hospitals: prohibited items.**  
**Status:** 9/19/2012-Chaptered by the Secretary of State, Chapter Number 385, Statutes of 2012  
**Summary:** Would authorize a state hospital under the jurisdiction of the State Department of State Hospitals to develop a list of items that are deemed contraband and prohibited on hospital grounds. This bill would require the hospital to form a contraband committee, as prescribed, to develop the list of contraband items, and would require the list of contraband items developed by the state hospital to be subject to review and approval by the Director of State Hospitals or his or her designee, and updated no less often than every 6 months. This bill would also require the State Department of State Hospitals to develop a list of items that shall be deemed contraband at every state hospital, subject to review and approval by the Director of State Hospitals. This bill would require a state hospital to post the lists developed pursuant to these provisions throughout the hospital and on its Internet Web site. This bill would authorize a hospital and the department to implement, interpret, and make specific these provisions without taking regulatory action.

**Position**

**Approve**

**AB 2547**  
(Blumenfield D)  
**Homeless youth: Statewide Office of the Homeless Youth Advocate.**  
**Status:** 8/17/2012-Failed Deadline pursuant to Rule 61(b)(14). (Last location was S. APPR. on 8/16/2012)  
**Summary:** Would establish the Statewide Office of the Homeless Youth Advocate in the California Health and Human Services Agency. This bill would require the office, among other things, to provide information and assistance to reduce the provision of overlapping services to, identify obstacles to the provision of services to, make recommendations to remove those obstacles and improve the quality of services provided to, and update and disseminate information received from service providers relating to services available for, homeless youth.

**Position**

**Watch**

**AB 2611**  
(Butler D)  
**Veterans treatment courts.**  
**Status:** 9/23/2012-Vetoed by the Governor  
**Summary:** Would authorize superior courts to develop and implement veterans treatment courts for eligible veterans of the United States military with the objective of, among other things, creation of a dedicated calendar or a locally
developed, collaborative, court-supervised veterans' mental health program or system that leads to the placement of as many mentally ill offenders who are veterans of the United States military, including those with post-traumatic stress disorder, traumatic brain injury, military sexual trauma, substance abuse, or any mental health problem stemming from military service, in community treatment as is feasible and consistent with public safety. The bill would provide that county participation is voluntary. The bill would declare the intent of the Legislature that, where there are statutory requirements for certain education or counseling programs to be included in the terms of probation, the components of those counseling terms be incorporated into the treatment programs that are designed to treat the underlying psychological disorders rather than requiring them in lieu of the psychological treatments. This bill contains other related provisions.

Position
Approve

SB 951 (Hernandez D) Health care coverage: essential health benefits.
Status: 9/30/2012-Chaptered by the Secretary of State, Chapter Number 866, Statutes of 2012
Summary: Would require an individual or small group health insurance policy issued, amended, or renewed on or after January 1, 2014, to cover essential health benefits, which would be defined to include the health benefits covered by particular benchmark plans. The bill would prohibit treatment limits imposed on these benefits from exceeding the corresponding limits imposed by the benchmark plans and would generally prohibit an insurer from making substitutions of the benefits required to be covered. The bill would specify that these provisions apply regardless of whether the policy is offered inside or outside the Exchange but would provide that they do not apply to grandfathered plans or plans that cover excepted benefits, as specified. The bill would prohibit a health insurer, when issuing, delivering, renewing, offering, selling, or marketing a policy, from indicating or implying that the policy covers essential health benefits unless the policy covers essential health benefits as provided in the bill. The bill would authorize the Department of Insurance to adopt emergency regulations implementing these provisions until March 1, 2016, and enact other related provisions. This bill contains other existing laws.

Position
Approve

SB 1048 (Liu D) Juveniles.
Status: 7/13/2012-Chaptered by the Secretary of State, Chapter Number 130, Statutes of 2012
Summary: Would authorize the court, at any time after a petition has been filed, to join in a juvenile court proceeding any governmental agency, private service provider, or individual, as specified, that the court determines has failed to meet a legal obligation to provide services to a child who is the subject of a dependency proceeding, a minor who is the subject of a delinquency proceeding, a nonminor person over whom the juvenile court has retained dependency or delinquency jurisdiction, or a nonminor dependent, as defined.

Position
Watch

SB 1050 (Alquist D) Autism: telehealth task force.
Status: 9/19/2012-Vetoed by the Governor
Summary: Would, until January 1, 2019, require the department to establish an autism telehealth task force and identify a lead administrator to be responsible for the activities and work of the task force. The task force would be required to provide the department with recommendations in the area of telehealth services for individuals with autism spectrum disorders, as specified.

Position
Watch

SB 1134 (Yee D) Persons of unsound mind: psychotherapist duty to protect.
Status: 7/17/2012-Chaptered by the Secretary of State, Chapter Number 149, Statutes of 2012
Summary: Would revise these provisions by removing any duty to warn. The bill would also express the intent of the Legislature that this bill changes only the name of the duty described above from a duty to warn and protect to a duty to protect.

Position
Watch

SB 1136 (Steinberg D) Health: mental health: Mental Health Services Act.
Status: 7/6/2012-Failed Deadline pursuant to Rule 61(b)(13). (Last location was A. HEALTH on 6/7/2012)
Summary: Would require the commission to assist in providing technical assistance, as specified, and would require the commission to work in collaboration with, and in consultation with, various entities in designing a comprehensive
joint plan for coordinated evaluation of client outcomes. This bill would require the California Health and Human Services Agency to lead the comprehensive joint plan effort. This bill would transfer various functions of the State Department of Mental Health under the Mental Health Services Act to the State Department of Health Care Services and the Office of Statewide Health Planning and Development. This bill would make various technical and conforming changes to reflect the transfer of those mental health responsibilities. This bill would require all projects included in the innovative programs portion of the county plan to meet specified requirements. This bill contains other related provisions and other existing laws.

Position
Watch

**SB 1172**  (Lieu D)  Sexual orientation change efforts.
Status: 9/30/2012-Chaptered by the Secretary of State, Chapter Number 835, Statutes of 2012
Summary: Would prohibit a mental health provider, as defined, from engaging in sexual orientation change efforts, as defined, with a patient under 18 years of age. The bill would provide that any sexual orientation change efforts attempted on a patient under 18 years of age by a mental health provider shall be considered unprofessional conduct and shall subject the provider to discipline by the provider's licensing entity. This bill contains other related provisions.

Position
Oppose Unless
Amended

**SB 1281**  (Blakeslee R)  Criminal procedure: not guilty by reason of insanity.
Status: 7/17/2012-Chaptered by the Secretary of State, Chapter Number 150, Statutes of 2012
Summary: Would require the report to also include the defendant's substance abuse history, his or her substance use history on the day of the commission of the offense, a review of the police report of the offense, and any other credible and relevant material reasonably necessary to describe the facts of the offense.

Position
Watch

**SB 1301**  (Hernandez D)  Prescription drugs: 90-day supply.
Status: 9/22/2012-Chaptered by the Secretary of State, Chapter Number 455, Statutes of 2012
Summary: Would authorize a pharmacist to dispense not more than a 90-day supply of a dangerous drug other than a controlled substance pursuant to a valid prescription if the patient has completed an initial 30-day supply of the drug, except as specified, the pharmacist is exercising his or her professional judgment, the pharmacist dispenses no more than the total amount prescribed, including refills, and the prescriber has not specified on the prescription that dispensing the prescription in an initial amount followed by periodic refills is medically necessary. The bill would prohibit a pharmacist from dispensing a dangerous drug pursuant to these provisions if the prescriber indicates "No change to quantity" or words of similar meaning, as specified. The bill would require a pharmacist dispensing an increased supply of a dangerous drug pursuant to these provisions to notify the prescriber of the increase in the quantity of dosage units dispensed. The bill would provide that these provisions are not applicable to psychotropic medication or psychotropic drugs, as described.

Position
Opposition
Withdrawn

**SB 1363**  (Yee D)  Juveniles: solitary confinement.
Status: 4/27/2012-Failed Deadline pursuant to Rule 61(b)(5). (Last location was S. PUB. S. on 4/24/2012)
Summary: Would provide that a minor or ward who is detained in, or sentenced to, any juvenile facility or other secure state or local facility shall not be subject to solitary confinement, as defined, unless the minor or ward poses an immediate and substantial risk of harm to others or to the security of the facility, and all other less-restrictive options have been exhausted. The bill would permit the minor or ward to be held in solitary confinement only in accordance with specified guidelines, including that the minor or ward be held in solitary confinement only for the minimum time required to address the safety risk, and that does not compromise the mental and physical health of the minor or ward. The bill would require clinical staff to evaluate a minor or ward face to face within one hour after placement, and every 4 hours thereafter, as specified. The bill would require treatment staff to implement an individualized suicide crisis intervention plan, as specified, before subjecting a minor or ward who has exhibited suicidal behavior or committed acts of self-harm to solitary confinement. By increasing the duties of local juvenile facilities, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

Position
SB 1410 (Hernandez D) Independent medical review.
Status: 9/30/2012-Chaptered by the Secretary of State, Chapter Number 872, Statutes of 2012
Summary: Would make certain changes to requirements applicable to an independent medical review organization, effective on July 1, 2015. The bill would require the medical professional to be a clinician expert in the treatment of the enrollee's medical condition and knowledgeable about the proposed treatment through recent or current actual clinical experience treating patients with the same or similar condition. The bill would require the application form provided to an enrollee or insured seeking independent review to be one or 2 pages and to include a section designed to collect information on the enrollee's or insured's ethnicity, race, and primary language spoken, which would be provided at the option of the enrollee or insured and used only for statistical purposes. This bill contains other related provisions and other existing laws.

Position
Approve

SB 1416 (Rubio D) Medical residency training program grants: grants.
Status: 8/17/2012-Failed Deadline pursuant to Rule 61(b)(14). (Last location was A. APPR. on 8/16/2012)
Summary: Would create the Graduate Medical Education Trust Fund in the State Treasury to consist of private moneys donated to the commission for deposit into the fund and any interest that accrues on those moneys, and would require that moneys in the fund be used, upon appropriation by the Legislature, to fund grants to graduate medical residency training programs, as specified. The bill would require the Office of Statewide Health Planning and Development, in consultation with the California Healthcare Workforce Policy Commission, to develop criteria, upon receipt of private donations of sufficient moneys to develop the criteria, for distribution of available funds. The bill would state that no General Fund moneys shall be used to implement the provisions of the bill. This bill contains other existing laws.

Position
Watch

SB 1425 (Negrete McLeod D) Juveniles: dependent children.
Status: 8/17/2012-Chaptered by the Secretary of State, Chapter Number 179, Statutes of 2012
Summary: Would require a court to order a hearing on a proposed modification of reunification services, custody, or visitation orders concerning a child for whom reunification services were not ordered if the court finds that the best interests of the child would be met by the proposed change. Additionally, this bill would require a court to modify an order finding that reunification services were not necessary when a party has petitioned the court prior to the issuance of an order terminating parental rights only if the court finds, by clear and convincing evidence, that the proposed change is in the child's best interests. The bill would apply the same requirements to petitions to modify an order relating to custody or visitation of the dependent child. This bill contains other related provisions.

Position
Watch

SB 1483 (Steinberg D) Physicians and surgeons.
Status: 9/1/2012-Failed Deadline pursuant to Rule 61(b)(17). (Last location was A. INACTIVE FILE on 8/28/2012)
Summary: Would create the Physician Health Program, administered by the Physician Health, Recovery, and Monitoring Oversight Committee within the department, with 14 members to be appointed as specified. The purpose of the program would be, among other things, to promote awareness and education relative to physician and surgeon health issues, including impairment due to alcohol or substance abuse, mental disorders, or other health conditions that could affect the safe practice of medicine, and to make treatment available to all physicians and surgeons subject to a written agreement with the program that includes agreement by the physician and surgeon to pay for expenses associated with the treatment. The bill would also provide for referral by the program of physicians and surgeons, as defined, to certified monitoring programs on a voluntary basis, governed by a written agreement between the participant and the program. The bill would require the department to select a contractor to implement the program, with the committee serving as the evaluation body for submitted proposals. The bill would require the program to report the name of a participant to the board and the committee when it learns of the participant's failure to meet the requirements of the program. The bill would require the committee to report to the department certain statistics received from the program, would require the department to report to the Legislature on the outcomes of the program, and would require regular audits of the program. This bill contains other related provisions.

Position
Sponsor

SB 1524 (Hernandez D) Nursing.
Summary: Would delete the requirement for at least 6 months’ duration of supervised experience. The bill would authorize a physician and surgeon to determine the extent of the supervision in connection with the furnishing or ordering of drugs and devices by a nurse practitioner or certified nurse-midwife.

Position
 Coordinate w/CMA

Total Measures: 35

Total Tracking Forms: 35