MEMORANDUM

DATE: January 29, 2018

TO: Board of Psychology

FROM: Konnor Leitzell
Central Services Student Assistant

SUBJECT: Agenda Item #20(b)(2) – Review for the Board on Watched Bills

Background:

The following attachment is a list of bills that the Board recommended watching throughout the 2017-2018 legislative session.

For all watch bills, staff reviewed the bills after each amendment was made, and staff reassessed the potential impacts of the amended language to determine if the bill would have required a full analysis to be submitted to the Policy and Advocacy Committee and/or the full Board.

During the 2017 legislative session, Board staff has reviewed bills addressing the following subject areas:

- Access to patient records,
- Confidentiality of communications between patients and service providers,
- Criminal justice issues surrounding diversion programs and access to mental health services focused on reducing recidivism,
- Regulations and oversight of Applied Behavior Analysis providers,
- DCA organization and operations,
- DCA Board and bureau operations and streamlining licensure requirements, and
- Expedited processing or fee waivers for special categories of applicants.

These trends in bill subject areas highlight the importance of these issues to the legislature and other policy makers this legislative session. Board staff will continue to watch these bills and their impacts to the Board, its licensees, and on access to and the provision of mental health services in California.

Action Requested:
No action is required at this time.

Attachment A: Legislative Matrix on Watched Bills
**AB 12**  
(D) **State government: administrative regulations: review.**  
*Introduced: 12/5/2016*

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**Summary:** Existing law authorizes various state entities to adopt, amend, or repeal regulations for various specified purposes. The Administrative Procedure Act requires the Office of Administrative Law and a state agency proposing to adopt, amend, or repeal a regulation to review the proposed changes for, among other things, consistency with existing state regulations. This bill would require each state agency to, on or before January 1, 2020, review that agency’s regulations, identify any regulations that are duplicative, overlapping, inconsistent, or out of date, to revise those identified regulations, as provided, and report to the Legislature and Governor, as specified. The bill would repeal these provisions on January 1, 2021.

**Position**
Watch

**AB 44**  
(D) **Workers’ compensation: medical treatment: terrorist attacks: workplace violence.**  
*Chapter Number: 736*

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**Summary:** Existing law establishes a workers’ compensation system, administered by the Administrative Director of the Division of Workers’ Compensation, to compensate an employee for injuries sustained in the course of his or her employment. Under existing law, an employer must provide reasonably required treatments, including, but not limited to, medical and surgical treatment, to cure or relieve an employee’s injuries sustained in the course of his or her employment. This bill would require employers to provide immediate support from a nurse case manager to employees injured in the course of employment by an act of domestic terrorism, as defined, would require employer-appointed nurse case managers to assist claimants to obtain medically necessary medical treatments, as specified, and would require an employer to provide a prescribed notice to claimants, as specified. The bill would make its provisions applicable only if the Governor declares a state of emergency, as defined, in connection with the act of domestic terrorism. This bill contains other related provisions.

**Position**
Watch

**AB 93**  
(D) **Healing arts: marriage and family therapists: clinical social workers: professional clinical counselors: required experience and supervision.**  
*Introduced: 1/9/2017*

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**Summary:** Existing law provides for the licensure and regulation of marriage and family therapists, clinical social workers, and professional clinical counselors by the Board of Behavioral Sciences, which is within the Department of Consumer Affairs. Existing law requires trainees, interns, and applicants for licensure in those professions to comply with specified educational and experience requirements, including, but not limited to, hours of supervised experience, and sets forth terms, conditions, and limitations for those hours of experience, including required supervision, as specified. Existing law also requires individuals seeking licensure in those professions to register with the board in order to gain experience hours. Under existing law, a violation of any of the requirements of the licensing acts for marriage and family therapists, clinical social workers, and professional clinical counselors is punishable as a misdemeanor. This bill would revise and recast those supervised experience requirements, as specified. The bill would place new requirements on supervisors of trainees, associates, and applicants for licensure and place new requirements on trainees, associates, and applicants for licensure who are under supervision, as specified. The bill would make conforming changes. By placing new requirements on trainees, associates, applicants for licensure, and their supervisors, a violation of which would be a crime, this bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

**Position**
Watch

**AB 148**  
(R) **California Physician Corps Program: practice setting.**  
*Introduced: 1/10/2017*
Summary: Existing law authorizes a court, with the consent of the defendant and a waiver of the defendant’s speedy trial right, to postpone prosecution of a misdemeanor and place the defendant in a pretrial diversion program if the defendant is suffering from sexual trauma, a traumatic brain injury, post-traumatic stress disorder, substance abuse, or mental health problems as a result of his or her military service. Existing law authorizes the defendant to be referred to services for treatment and requires the responsible agencies to report to the court and the prosecution not less than every 6 months. This bill would authorize a court, with the consent of the defendant and a waiver of the defendant’s speedy trial right, to postpone prosecution of a misdemeanor or a felony punishable in a county jail, and place the defendant in a pretrial diversion program for up to 2 years if the court is satisfied the defendant suffers from a mental disorder, that the defendant’s mental disorder played a significant role in the commission of the charged offense, and that the defendant would benefit from mental health treatment. For specified offenses, the bill would condition granting diversion on the consent of the prosecution. Specified driving-under-the-influence offenses would not be eligible for diversion under these provisions. The bill would require the defense to arrange, to the satisfaction of the court, for a program of mental health treatment utilizing existing inpatient or outpatient mental health resources. The bill would require the divertee’s mental health provider to provide reports on the defendant’s progress to the court, the defense, and the prosecution not less than every month if the offense is a felony, and every 3 months if the offense is a misdemeanor, as specified. By increasing the duties of local prosecutors and public defenders, this bill would impose a state-mandated local program. The bill would require, upon successful completion of the diversion program, that the charges be dismissed and the records of the arrest be restricted, as specified, and that the arrest be deemed never to have occurred, except as provided. The bill would state findings and declarations by the Legislature regarding the need for the diversion program. This bill contains other related provisions and other existing laws.

Position
Watch

SB 241
(Monning D) Medical records: access.
Chapter Number: 513
Introduced: 2/6/2017

Summary: Existing law governs a patient’s access to his or her health records. Existing law requires a health care provider to provide a patient or his or her representative with all or any part of the patient’s medical records that the patient has a right to inspect, subject to the payment of clerical costs incurred in locating and making the records available, following a written request from the patient. If the patient or patient’s representative presents proof to the provider that the records are needed to support an appeal regarding eligibility for a public benefit program, as defined, the health care provider must provide one copy of the relevant portion of the patient’s record at no charge under specified circumstances. Existing law makes a violation of these provisions by specified health care providers an infraction. This bill would change the basis of the fee that a health care provider is authorized to charge from clerical costs to specified costs for labor, supplies, postage, and preparing an explanation or summary of the patient record. The bill would require the health care provider to provide the patient or patient’s personal representative with a copy of the records in a paper or electronic copy, in the form or format requested if the records are readily producible in that form or format. By expanding the scope of a crime, this bill would create a state-mandated local program. This bill contains other related provisions and other existing laws.

Position
Watch

SB 244
(Lara D) Privacy: agencies: personal information.
Introduced: 2/6/2017

Summary: (1) Existing law regulates various professions and vocations by various boards within the Department of Consumer Affairs. Existing law requires those boards, the State Bar of California, and the Department of Real Estate to require a licensee, at the time of issuance of a license, to provide specified information, including the licensee’s federal employer identification number, if the licensee is a partnership, or his or her social security number or individual taxpayer identification number. Existing law provides that the applicant’s federal employer identification number, social security number, or individual taxpayer identification number information is not a public record and is not open to the public for inspection. This bill would revise this provision to provide that information is not open for public inspection, is confidential, and shall not be disclosed, except as specified. The bill would require information submitted by an applicant to be collected, recorded, and used only for the purpose of determining eligibility for a license and administering the licensing program. This bill contains other related provisions and other existing laws.

Position
**SB 247**  
(***Moorlach*** R)  
**Professions and vocations: license requirement: business: surety bond requirement.**  
*Introduced: 2/6/2017*

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**Summary:** Existing law, the Speech-Language Pathologists and Audiologists and Hearing Aid Dispensers Licensure Act, makes it unlawful for an individual to engage in the practice of fitting or selling hearing aids, or to display a sign or in any other way to advertise or hold himself or herself out as being so engaged without having first obtained a license from the Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board. This bill would repeal this license requirement. This bill contains other related provisions and other existing laws.

**Position**  
Watch

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**SB 399**  
(***Portantino*** D)  
**Health care coverage: pervasive developmental disorder or autism.**  
*Introduced: 2/15/2017*

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**Summary:** Existing law, the Lanterman Developmental Disabilities Services Act, requires the State Department of Developmental Services to contract with regional centers to provide services and supports to individuals with developmental disabilities and their families. Existing law defines developmental disability for these purposes, to include, among other things, autism. This bill, among other things, would expand the definition of “qualified autism service professional” to include behavioral service providers who meet specified educational, professional, and work experience qualifications. The bill, with regard to the definition of “qualified autism service paraprofessional,” would also authorize the substitution of specified education, work experience, and training qualifications, or the substitution of specified credentialing or certification, for the requirement to meet the criteria set forth in regulations adopted by the State Department of Social Services, as described above. The bill would also require providers to pass a background check, as specified, in order to meet the definition of a qualified autism service professional or a qualified autism service paraprofessional. This bill contains other related provisions and other existing laws.

**Position**  
Watch

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**SB 538**  
(***Monning*** D)  
**Hospital contracts.**  
*Introduced: 2/16/2017*

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**Summary:** Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care and makes a willful violation of the act a crime. Existing law also provides for the regulation of health insurers by the Department of Insurance. Existing law provides for the licensure and regulation of health facilities, including general acute care hospitals, acute psychiatric hospitals, and special hospitals, administered by the State Department of Public Health. A violation of these provisions is a crime. Existing law, the Health Care Providers' Bill of Rights, prescribes restrictions on the types of contractual provisions that may be included in agreements between health care service plans and health care providers and agreements between health insurers and health care providers. This bill, the Health Care Market Fairness Act of 2017, would prohibit contracts between hospitals and contracting agents, health care service plans, or health insurers from containing certain provisions, including, but not limited to, setting payment rates or other terms for nonparticipating affiliates of the hospital, requiring the contracting agent, plan, or insurer to keep the contract’s payment rates confidential from any payor, as defined, that is or may become financially responsible for the payment, and requiring the contracting agent, plan, or insurer to submit to arbitration, or any other alternative dispute resolution program, any claims or causes of action that arise under state or federal antitrust laws after those claims or causes of action arise, except as provided. The bill would make any prohibited contract provision void and unenforceable. The bill would define “contracting agent” and “hospital” for those purposes. The bill would enact an identical provision under the health facility licensure and regulation provisions as that provision described above for contracts between hospitals and contracting agents. The bill would provide that its provisions are severable. This bill contains other related provisions and other existing laws.

**Position**  
Watch

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**SB 575**  
(***Leyva*** D)  
**Patient access to health records.**
Summary: (1) Existing law generally governs a patient’s access to his or her health records. Existing law requires a health care provider to provide any patient, former patient, or the representative of a patient or former patient a copy, at no charge, of the relevant portion of the patient’s health records upon presenting to the health care provider a written request and proof that the health records are needed to support an appeal regarding eligibility for specified public benefit programs. Existing law makes a violation of these provisions by certain health care providers an infraction. This bill would make those health care providers provide those patients with a copy of those health records at no charge to support a claim for eligibility for a public benefit program. The bill would specify additional public benefit programs to which these requirements would apply. The bill would make related conforming changes. By making the existing criminal penalties applicable to additional duties of a health care provider, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

**Position**

Watch

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**(Mitchell D) SB 612**

**Foster care: transitional housing.**

Summary: Existing law, the California Community Care Facilities Act, requires the State Department of Social Services to license and regulate transitional housing placement providers as a community care facility. A “transitional housing placement provider” is defined as an organization licensed by the department to provide transitional housing to foster children at least 16 years of age and not more than 18 years of age, and nonminor dependents, as defined, to promote their transition to adulthood. Existing law provides for a “Transitional Housing Placement Program” serving foster children at least 16 years of age and not more than 18 years of age, and provides for a “Transitional Housing Placement-Plus Foster Care Program” serving nonminor dependents at least 18 years of age and not more than 21 years of age. Existing law requires transitional housing to include, among others, programs in which a participant lives independently in an apartment, single-family dwelling, or condominium owned or leased by the provider either with an adult employee of the provider or in a building in which one or more adult employees of the provider reside and provide supervision, and programs in which a participant, who is either a minor foster child placed prior to October 1, 2012, or a nonminor dependent, lives independently in an apartment, single-family dwelling, or condominium owned or leased by a provider under the supervision of the provider if the department approves. A violation of the act is a misdemeanor. This bill would revise and recast the above-described provisions, by among other things, redefining “transitional housing placement provider” to mean an organization licensed by the department to provide transitional housing to foster children who are at least 16 years of age to promote their transition to adulthood. The bill would authorize transitional housing placement providers to operate either a “Transitional Housing Placement Program for minor foster children,” a program serving foster children at least 16 years of age and not more than 18 years of age, or a “Transitional Housing Placement Program for nonminor dependents,” a program serving nonminor dependents at least 18 years of age and not more than 21 years of age. The bill would provide that transitional housing units include a host family certified by a transitional housing placement provider with whom a participant lives, as provided, a staffed site in which the participant lives, as provided, and a remote site in which the participant lives independently, as provided. The bill would authorize a transitional housing placement provider to cosign a lease with a nonminor dependent, as specified by the department. The bill would require the department to adopt regulations to govern transitional housing placement providers that meet minimum requirements, as specified, including regulations that expand provisions relating to the persons with whom a participant may reside. This bill contains other related provisions and other existing laws.

**Position**

Watch

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**(Bates R) SB 684**

**Incompetence to stand trial: conservatorship: treatment.**

Summary: (1) Existing law prohibits a person from being tried or adjudged to punishment while that person is mentally incompetent. Existing law establishes a process by which a defendant’s mental competency is evaluated and by which the defendant receives treatment with the goal of returning the
defendant to competency. Existing law allows a mentally incompetent defendant to be committed to the State Department of State Hospitals or other public or private treatment facility for a period of 3 years or to a period of commitment equal to the maximum term of imprisonment provided by law for the most serious offense charged, whichever is shorter, and requires the defendant to be returned to the committing court after his or her maximum period of commitment. If the defendant is gravely disabled upon his or her return to the committing court, existing law requires the court to order the conservatorship investigator of the county to initiate conservatorship proceedings on the basis that the indictment or information pending against the person charges a felony involving death, great bodily harm, or a serious threat to the physical well-being of another person. This bill would also allow the initiation of conservatorship proceedings on the basis that the person is gravely disabled due to a condition in which the person, as a result of a mental health disorder, is unable to provide for his or her basic personal needs for food, clothing, or shelter. This bill contains other related provisions and other existing laws.

**Position**

Watch

**SB 715**

(Newman D) **Department of Consumer Affairs: regulatory boards: removal of board members.**

**Introduced:** 2/17/2017

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**Summary:** Existing law provides for the licensure and regulation of various professions and vocations by boards within the Department of Consumer Affairs. Existing law authorizes the Governor to remove from office any member of any board within the department appointed by him or her, on specific grounds, including continued neglect of duties required by law. This bill would specifically include the failure to attend meetings of the board as one example of continued neglect of duties required by law that the Governor can use as a reason to remove a member from a board.

**Position**

Watch

**SB 755**

(Beall D) **Civil discovery: mental examination.**

**Chapter Number:** 133

**Introduced:** 2/17/2017

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**Summary:** Existing law authorizes any party to obtain discovery by means of a physical or mental examination of a party to the action, an agent of any party, or a natural person in the custody of or under the legal control of a party, in any action in which the mental or physical condition of that party or other person is in controversy. Existing law requires a party to obtain leave of court to conduct a mental examination of a party, and requires a court to grant a motion for a mental examination only for good cause shown. Existing law also requires a mental examination to be performed by a licensed physician or licensed clinical psychologist with specified training. This bill would, in any action involving allegations of sexual abuse of a minor, further require that a mental examination of a child less than 15 years of age be conducted by a licensed physician or clinical psychologist with expertise in child abuse and trauma and limit the examination to no more than 3 hours, including any breaks, unless the court grants an extension for good cause.

**Position**

Watch

**SB 762**

(Hernandez D) **Healing arts licensee: license activation fee: waiver.**

**Introduced:** 2/17/2017

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**Summary:** Existing law requires a healing arts board, as defined, to issue, upon application and payment of the normal renewal fee, an inactive license or certificate to a current holder of an active license or certificate whose license or certificate is not suspended, revoked, or otherwise punitively restricted by the board. Existing law requires the holder of an inactive license or certificate to, among other things, pay the renewal fee in order to restore his or her license or certificate to an active status. Existing law requires the renewal fee to be waived for a physician and surgeon who certifies to the Medical Board of California that license restoration is for the sole purpose of providing voluntary, unpaid service to a public agency, not-for-profit agency, institution, or corporation that provides medical services to indigent patients in medically underserved or critical-need population areas of the state. This bill would require the renewal fee to be waived for any healing arts licensees who certify to his or her respective board that license restoration is for the sole purpose of providing voluntary, unpaid service to a public agency, not-for-profit agency, institution, or corporation that provides medical services to indigent patients in medically underserved or critical-need population areas of the state.
**SB 798**

*Healing arts: boards.*

**Chapter Number:** 775  
**Introduced:** 2/17/2017

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**Summary:** Existing law, the Medical Practice Act, establishes the Medical Board of California for the licensure and regulation of physicians and surgeons. Existing law requires the Governor to appoint members to the board, as provided. Existing law authorizes the board to employ an executive director, investigators, legal counsel, medical consultants, and other assistance as specified. Existing law requires the Attorney General to act as legal counsel for the board, as specified. Existing law provides that those provisions will be repealed on January 1, 2018. This bill would instead repeal those provisions on January 1, 2022. This bill contains other related provisions and other existing laws.

**Governor's Message:** To the Members of the California State Senate: I am signing Senate Bill 798, which extends the sunset for the Medical Board of California and the Osteopathic Medical Board of California from January 1, 2018, to January 1, 2022. Two issues were identified during the legislative process requiring further review: vertical enforcement and the exchange of expert witness reports between a doctor under investigation and the Medical Board. I am directing my staff to work with the Legislature and the Attorney General's Office to determine what changes are needed. Sincerely, Governor Edmund G. Brown JR.

**Position**

Watch

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**SB 800**

*(Committee on Business, Professions and Economic Development)*  
*Professions and vocations.*

**Chapter Number:** 573  
**Introduced:** 2/17/2017

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**Summary:** (1) The Pharmacy Law provides for the licensure and regulation of pharmacies, pharmacists, and other associated persons and entities by the California State Board of Pharmacy. This law requires the Joint Committee on Boards, Commissions, and Consumer Protection to review the state's shortage of pharmacists and make recommendations on a course of action to alleviate the shortage, including, but not limited to, a review of the current California pharmacist licensure examination. This bill would repeal that requirement of a review. This bill contains other related provisions and other existing laws.

**Position**

Watch

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**Total Measures:** 60  
**Total Tracking Forms:** 60