


MEMORANDUM

DATE	May 3, 2017
TO	Policy and Advocacy Committee
FROM	 Jason Glasspiegel Central Services Coordinator
SUBJECT	Agenda Item #6 (a)(4) – SB 762 (Hernandez) Healing Arts Licensee: License Activation Fee: Waiver

Background:

This bill waives the renewal license fee for inactive licensees under all allied health boards and bureaus 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.

Location: Senate Committee on Appropriations

Status: 4/25/2017 From committee: Do pass and re-refer to Senate Committee on Appropriations with recommendation: To consent calendar

Votes: 4/24/2017 Senate Committee on Business, Professions and Economic Development (9-0-0)

Action Requested:

Staff recommends that the Committee take an **Oppose Unless Amended** position on SB 762 (Hernandez), and delegate staff to work with the Authors office to determine the appropriate amendments and applicable section of the Business and Professions Code for this provision.

Attachment A: AB 762 (Hernandez) Analysis

Attachment B: AB 762 (Hernandez) Text

2017 Bill Analysis

Author: Hernandez	Bill Number: SB 762	Related Bills:
Sponsor: Author	Version: Amended 4/17/2017	
Subject: Healing arts licensee: license activation fee: waiver		

SUMMARY

This bill waives the renewal license fee for inactive licensees under all allied health boards and bureaus, when the sole purpose licensure is 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.

RECOMMENDATION

OPPOSE UNLESS AMENDED – Staff recommend an Oppose Unless Amended position on SB 762 to make the provisions of this bill optional rather than mandated. While the Board can see merit in having the authority to create a license type that allows for limited voluntary practice in underserved areas, the mandate in this bill as written is not the best solution. Staff would like to communicate with the author the desire for language which provides healing arts board’s the authority to promulgate regulations to adopt this type of program (should they choose to do so), and to discuss a more appropriate place in the Business and Professions Code for this language.

REASON FOR THE BILL

According to the Author, “The coverage expansions under the Affordable Care Act (ACA) led to 20 million newly insured individuals in this country, including over 5 million Californians. While a monumental step towards ensuring access, these expansions came with increased demand for services on an already strained system, particularly in medically underserved areas. Furthermore, fundamental to health care reform is the evolution in how care is delivered. The ACA included incentives for expanded and improved primary care and to create team-based models of service delivery, both of which may affect demand for services from certain health care professionals. Given the

Other Boards/Departments that may be affected:	
<input type="checkbox"/> Change in Fee(s) <input type="checkbox"/> Affects Licensing Processes <input type="checkbox"/> Affects Enforcement Processes	
<input type="checkbox"/> Urgency Clause <input type="checkbox"/> Regulations Required <input type="checkbox"/> Legislative Reporting <input type="checkbox"/> New Appointment Required	
Policy & Advocacy Committee Position:	Full Board Position:
<input type="checkbox"/> Support <input type="checkbox"/> Support if Amended <input type="checkbox"/> Oppose <input type="checkbox"/> Oppose Unless Amended <input type="checkbox"/> Neutral <input type="checkbox"/> Watch	<input type="checkbox"/> Support <input type="checkbox"/> Support if Amended <input type="checkbox"/> Oppose <input type="checkbox"/> Oppose Unless Amended <input type="checkbox"/> Neutral <input type="checkbox"/> Watch
Date: _____	Date: _____
Vote: _____	Vote: _____

shortage of primary care physicians in certain regions and the continued advancements in training of other health care professionals, SB 762 will help ease the strain on the system by providing the opportunity for all health care professionals to deliver volunteer services under their licenses.”

ANALYSIS

Staff believes that the intent of this bill is to provide licensees with an opportunity to provide voluntary, unpaid services to a public agency, not-for-profit agency, institution, or corporation that provides health services to indigent patients in medically underserved or critical-need population areas of the state without having to pay a renewal fee. As written, this bill creates multiple significant concerns for Board staff:

Intent Versus As Written

As stated above, the intent is different from the language currently provided in SB 762. As written, this bill would provide a fee waiver for licensees working in those specified settings only if they are renewing a license that is already in an inactive status. After a discussion with the Authors office, staff believe that is not the intent of the bill and the language would need to be amended to apply to licensees that are currently in an active status. Additionally, as written, it is unclear whether this license status is meant to be a continuous or one-time option for licensees since under the current provisions licensees can only renew to the volunteer status from an inactive status.

Undetermined Fiscal Impact

Without knowing the potential size of the inactive licensee population that would be interested in using this option, let alone the number of currently active licensees who would be interested in the option, staff is unable to determine the fiscal impact of this bill at this time. Staff is unable to quantify how many current inactive licensees would be interested in serving this specific population in order to determine a loss in revenue. Additionally, this loss could be compounded because it is unclear if this option is meant to be an ongoing license status that can be renewed continuously or only a one-time renewal. Most importantly for Board operational considerations, the amount of additional staff workload cannot be quantified due to the unknown level of interest by our licensees, and due to administrative concerns with the language as written.

Undetermined Need

Staff is unaware of the desire for this level of licensure within our current population. Staff believes having the opportunity to communicate with licensees and stakeholders to determine the potential interest in this option and the operational feasibility for the Board would be beneficial. The current mandate in the bill could potentially result in significant workload for staff without a population of licensees interested in using it.

Due to staff concerns with the technical provisions, administrative considerations, and lack of necessity demonstrated for the bill, staff is recommending an Oppose Unless Amended position to allow staff to work with the author to clean-up the bill's provision

and advocate against the mandate in the current bill. Instead the Board would like the authority to determine the need for this change for itself and to take appropriate action if deemed appropriate.

LEGISLATIVE HISTORY

SB 450 (Speier, Chapter 631, Statutes of 1999) originally waived renewal fees for inactive physician licensees 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. The Senate floor analysis, dated September 2, 1999, states:

“Finally, in regard to waiving the physician’s fee for volunteer work, the author provided information about a program that started in South Carolina called the Volunteers in Medicine Institute that used retired physicians to provide care to the needy, and the author suggests that this provision will assist organizations such as this one to operate in California.”

OTHER STATES' INFORMATION

In South Carolina, there is a program called the Volunteers in Medicine Institute that uses retired physicians to provide care to the needy. Staff is unaware of any additional states with a similar provisions and whether or not they apply to psychologists.

PROGRAM BACKGROUND

The Board advances quality psychological services for Californians by ensuring ethical and legal practice and supporting the evolution of the practice. To accomplish this, the Board regulates licensed psychologists, psychological assistants, and registered psychologists, including enforcing standards of ethical conduct.

It is unclear with the bill as written what programmatic changes would be necessary to implement this volunteer license status because of the lack of clarity in the provisions of the bill. Without better clarification, staff estimates that the bill would at a minimum require regulations in order to implement the bill, new renewal forms for this license type, policies and procedures for processing these renewals, IT and BreZE changes, and unknown additional workload for staff.

FISCAL IMPACT

For the Board, this bill would create an unknown reduction in revenue and an increase in workload to process the applications. Additionally, there would be IT and BreZE costs to add this license type to the system. However, staff is unable to quantify the specific costs to the Board and DCA as staff has no way to quantify how many licensees would take advantage of this license status.

ECONOMIC IMPACT

None

LEGAL IMPACT

None

APPOINTMENTS

None

SUPPORT/OPPOSITION

Support: None on File

Opposition: None on File

ARGUMENTS

Proponents: None

Opponents: None



California
LEGISLATIVE INFORMATION

