

MEMORANDUM

October 31, 2018
Board of Psychology
2ml
Jason Glasspiegel Central Services Coordinator
Agenda Item #24(c) – Review of Bills with Watch Status Approved by the Board

Background:

The enclosed matrix lists the legislative bills the Board of Psychology watched during the 2017-2018 legislative session, which references the status and location of the bills to date. Since the two-year session has ended, all bills introduced during this session have now either chaptered (been signed into law) or failed passage and are now dead.

Information on bills in the matrix can be found at: http://leginfo.legislature.ca.gov.

Action Requested:

This is for informational purposes only. No action is required.

Policy and Advocacy Committee Review of Watch Bills and Watch Status

<u>AB 93</u> (<u>Medina</u> D) Healing arts: marriage and family therapists: clinical social workers: professional clinical counselors: required experience and supervision.

Introduced: 1/9/2017 **Last Amend:** 8/13/2018

Status: 9/26/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 743,

Statutes of 2018.

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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.

AB 148 (Mathis R) California Physician Corps Program: practice setting.

Introduced: 1/10/2017 **Last Amend:** 7/17/2017

Status: 8/31/2018-Failed Deadline pursuant to Rule 61(b)(18). (Last location was S. APPR. SUSPENSE

FILE on 8/21/2017)

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Summary: Existing law establishes the Steven M. Thompson Physician Corps Loan Repayment Program (program) in the California Physician Corps Program within the Health Professions Education Foundation, which provides financial incentives, including repayment of educational loans, to a physician and surgeon who practices in a medically underserved area, as defined. Existing law establishes the Medically Underserved Account for Physicians, a continuously appropriated account, within the Health Professions Education Fund, to primarily provide funding for the ongoing operations of the program. Existing law requires the foundation and the Office of Statewide Health Planning and Development to develop guidelines using specified criteria for selection and placement of applicants. This bill would instead require, for purposes of this definition, only until January 1, 2020, and only for program participants who enroll in the program on or after January 1, 2018, and before January 1, 2020, that the clinic or the physician owned and operated medical practice setting have at least 30% of patients, if the area is a rural area, as defined, or at least 50% of patients, if the area is not a rural area, who are from the above-described populations. By expanding the authorization for the use of moneys in the Medically Underserved Account for Physicians, this bill would make an appropriation. This bill contains other related provisions and other existing laws.

AB 349 (McCarty D) Drug Medi-Cal Treatment Program: ratesetting process.

Introduced: 2/8/2017 **Last Amend:** 6/7/2018

Status: 9/21/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 643,

Statutes of 2018.

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Summary: Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income persons receive health care benefits. The Medi-Cal program is, in part, governed and funded by federal Medicaid provisions. This bill would instead authorize the department to implement, interpret, or make specific those provisions until the time that necessary regulations are adopted. The bill would require the department to adopt regulations by July 1, 2020, and to provide semiannual status reports to the Legislature until the regulations are adopted, as specified. The bill would authorize the department to annually establish and update the statewide maximum allowable reimbursement rates described above by means of

bulletins or similar instructions. This bill contains other existing laws.

AB 451 (Arambula D) Health facilities: emergency services and care.

Introduced: 2/13/2017 **Last Amend:** 7/5/2017

Status: 8/17/2018-Failed Deadline pursuant to Rule 61(b)(15). (Last location was S. 2 YEAR on

9/1/2017)

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Summary: (1)Existing law requires a health facility that maintains and operates an emergency department to provide emergency services and care to any person requesting the services or care for any condition in which the person is in danger of loss of life, or serious injury or illness, as specified. If a licensed health facility does not maintain an emergency department, its employees are nevertheless required to exercise reasonable care to determine whether an emergency exists and to direct the person seeking emergency care to a nearby facility that can render the needed services, as specified. Existing law makes a violation of these provisions a crime. This bill would specify that a psychiatric unit within a general acute care hospital, a psychiatric health facility, or an acute psychiatric hospital, excluding certain state hospitals, regardless of whether it operates an emergency department, is required to provide emergency services and care to treat a person with a psychiatric emergency medical condition who has been accepted by the facility, as specified, if the facility has appropriate facilities and qualified personnel. The bill would make conforming changes to related provisions. The bill would also prohibit a general acute care hospital or an acute psychiatric hospital, as a condition to accepting a transfer of a patient from another health facility, from requiring that the patient be in custody as a result of a mental health disorder causing him or her to be a danger to others or himself or herself, or is gravely disabled. By expanding these duties, this bill would expand the scope of a crime, thereby imposing a state-mandated local program. This bill contains other related provisions and other existing laws.

AB 456 (Thurmond D) Healing arts: associate clinical social workers.

Introduced: 2/13/2017 **Last Amend:** 5/7/2018

Status: 8/20/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 158,

Statutes of 2018.

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Summary: Existing law provides for the licensure and regulation of clinical social workers by the Board of Behavioral Sciences, which is within the Department of Consumer Affairs. Existing law requires an applicant for licensure to comply with specified educational and experience requirements. Existing law requires a person who wishes to be credited with experience toward licensure to register with the board as an associate clinical social worker prior to obtaining that experience. This bill would revise and recast these provisions. The bill would instead require each applicant to have an active registration with the board as an associate clinical social worker in order to gain hours of supervised experience, except that the bill would authorize preregistered postdegree hours of experience to be credited toward licensure in certain circumstances. The bill would allow for this crediting of hours toward licensure if the applicant applies for the associate registration, the board receives the application within 90 days of the granting of the qualifying master's or doctoral degree, and the board subsequently grants the associate registration. The bill would also require, for applicants completing graduate study on or after January 1, 2020, that their experience be obtained at a workplace that requires completed live scan fingerprinting, and that the applicant provide the board with a copy of a completed live scan form, as specified. This bill contains other related provisions and other existing laws.

AB 700 (Jones-Sawyer D) Outdoor advertising displays: arenas.

Introduced: 2/15/2017 **Last Amend:** 6/4/2018

Status: 9/11/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 337,

Statutes of 2018.

Desk Policy Fiscal Floor	Desk Policy Fiscal	Floor Conf.	Enrolled	Votood	Chantered
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Summary: The Outdoor Advertising Act provides for the regulation by the Department of Transportation of advertising displays, as defined, within view of public highways. The act exempts from certain of its provisions specified advertising displays located on the premises of an arena or that have been authorized, as of January 1, 2019, by, or in accordance with, a local ordinance as part of a specific plan or sign district adopted in connection with the approval of the arena and that are subject to specified conditions. This bill would extend the date of this authorization to January 1, 2021.

AB 767 (Quirk-Silva D) GO-Biz Information Technology.

Introduced: 2/15/2017 **Last Amend:** 8/24/2018

Status: 9/23/2018-Vetoed by Governor.

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Summary: Existing law authorizes various state agencies to issue permits and licenses in accordance with specified requirements to conduct business within this state. Existing law establishes the Governor's Office of Business and Economic Development (GO-Biz) to serve the Governor as the lead entity for economic strategy and the marketing of California on issues relating to business development, private sector investment, and economic growth. This bill would, among other things, provide for a GO-Biz Information Technology Unit within GO-Biz, which would create an online Internet platform, called the California Business Development Portal, that is comprised of 3 elements, including economic and business development-related digital information, the systems and processes used to manage that information, and a public interface capability, as prescribed. This bill contains other related provisions and other existing laws.

Governor's Message: To the Members of the California State Assembly: I am returning Assembly Bill 767 without my signature. This bill codifies the Information Technology unit within the Governor's Office of Business and Economic Development and authorizes two positions in statute for this purpose. This bill is unnecessary given the 2018 Budget Act included funding for staff positions to perform activities substantially similar to those prescribed in this measure. The annual budget process is the best venue to evaluate the resources and staff needed for various state programs such as the one contemplated by this proposal. Sincerely, Edmund G. Brown Jr.

AB 827 (Rubio D) Department of Consumer Affairs: task force: foreign-trained professionals.

Introduced: 2/16/2017 **Last Amend:** 4/3/2017

Status: 8/17/2018-Failed Deadline pursuant to Rule 61(b)(15). (Last location was S. 2 YEAR on

9/1/2017)

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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 establishes the Bagley-Keene Open Meeting Act, which requires state boards, commissions, and similar state-created multimember bodies to give public notice of meetings and conduct their meetings in public unless authorized to meet in closed session. This bill, the California Opportunity Act of 2017, would require the Department of Consumer Affairs to create a task force, as specified, to study and write a report of its findings and recommendations regarding the licensing of foreign-trained professionals with the goal of integrating foreign-trained professionals into the state's workforce, as specified. The bill would authorize the task force to hold hearings and invite testimony from experts and the public to gather information. The bill would require the task force to submit the report to the Legislature no later than January 1, 2019, as specified. This bill contains other related provisions.

AB 1116 (Grayson D) Peer Support and Crisis Referral Services Pilot Program.

Introduced: 2/17/2017 **Last Amend:** 8/9/2018

Status: 9/27/2018-Vetoed by Governor.

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Summary: Under existing law, the California Emergency Services Act, the Governor is authorized to proclaim a state of emergency, as defined, under specified circumstances. The California Emergency Services Act also authorizes the governing body of a city, county, city and county, or an official designated by ordinance adopted by that governing body, to proclaim a local emergency, as defined. Existing law provides that a person has a privilege to refuse to disclose, and prevent another from disclosing, a confidential communication with specified persons, except in specified circumstances. This bill would, until January 1, 2024, create the Peer Support and Crisis Referral Services Pilot Program. The bill would, for purposes of the act, define a "peer support team" as a team composed of emergency service personnel, as defined, hospital staff, clergy, and educators who have been appointed to the team by a Peer Support Labor-Management Committee, as defined, and who have completed a peer support training course developed and delivered by the California Firefighter Joint Apprenticeship Committee or the Commission on Correctional Peace Officer Standards and Training, as specified. The bill would provide that a communication made by emergency service personnel or a peer support team member while the peer support team member provides peer support services, as defined, is confidential and shall not be disclosed in a civil, administrative, or arbitration proceeding. Notwithstanding that prohibition, the bill would authorize the disclosure of that communication under limited circumstances, including, among others, when disclosure is reasonably believed to be necessary to prevent death, substantial bodily harm, or commission of a crime, or when disclosure is reasonably believed to be required pursuant to the peer support policy, as specified. The bill would

also provide that, except for an action for medical malpractice, a peer support team member providing peer support services as a member of a peer support team is not liable for damages, as specified, relating to an act, error, or omission in performing peer support services, unless the act, error, or omission constitutes gross negligence or intentional misconduct. The bill would further provide that a communication made by emergency service personnel to a crisis hotline or crisis referral service, as defined, is confidential and shall not be disclosed in a civil, administrative, or arbitration proceeding, except as specified.

Governor's Message: To the Members of the California State Assembly: I am returning Assembly Bill 1116 without my signature. This bill creates a pilot peer support program for state correctional and parole officers, firefighters, paramedics, emergency medical technicians, and dispatchers. I appreciate the author's sincere attempt to address the occupational stress experienced by some of our bravest public servants. However, I believe that the scope of confidentiality afforded under this bill is too broad and fails to strike the right balance between fostering collegial trust and concealing information necessary to ensure safe and healthy workplaces. Further, peer support programs are already in place for many public safety personnel, making this narrow pilot program largely duplicative and potentially in conflict with existing programs. I would recommend that instead of new statutory provisions, the sponsors and author work with the affected agencies to improve existing programs. Sincerely, Edmund G. Brown Jr.

AB 1136 (Eggman D) Health facilities: residential mental health or substance use disorder treatment.

Introduced: 2/17/2017 **Last Amend:** 7/2/2018

Status: 8/17/2018-Failed Deadline pursuant to Rule 61(b)(15). (Last location was S. APPR. SUSPENSE

FILE on 8/6/2018)

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Summary: Under existing law, the State Department of Public Health licenses and regulates health facilities, defined to include, among others, acute psychiatric hospitals. A violation of these provisions is a crime. This bill would require the State Department of Public Health, in consultation with specified entities, to develop and submit a proposal to solicit a grant under the federal 21st Century Cures Act to develop a real-time, Internet-based database to collect, aggregate, and display information about the availability of beds in inpatient psychiatric facilities, crisis stabilization units, residential community mental health facilities, and licensed residential alcoholism or drug abuse recovery or treatment facilities for treatment purposes. The bill would require a database created using grant funds received as a result of the submission of that proposal to have the capacity to collect data and enable a specified search to identify beds that are appropriate for the treatment of individuals and to include specified information, including, among other things, the contact information for the facility's designated employee and information on beds. The bill would require the department to confer with specified stakeholders to inform the development of the proposal and to submit an evaluation to the federal Health and Human Services Secretary and to the Legislature. This bill contains other existing laws.

AB 1659 (Low D) Healing arts boards: inactive licenses.

Introduced: 2/17/2017 **Last Amend:** 1/3/2018

Status: 9/5/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 249, Statutes

of 2018.

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Summary: Existing law establishes healing arts boards in the Department of Consumer Affairs to ensure private businesses and professions deemed to engage in activities which have potential impact upon the public health, safety, and welfare are adequately regulated in order to protect the people of California. Existing law requires each healing arts board to issue inactive licenses to holders of active licenses whose license is not punitively restricted by that board. Existing law prohibits the holder of an inactive license from engaging in any activity for which an active license is required. Existing law requires the renewal fee for an active license to apply to an inactive license. This bill would prohibit the holder of an inactive license from representing that he or she has an active license. The bill would also authorize a healing arts board to establish a lower inactive license renewal fee.

AB 1779 (Nazarian D) Sexual orientation: change efforts.

Introduced: 1/4/2018 **Last Amend:** 4/5/2018

Status: 4/27/2018-Failed Deadline pursuant to Rule 61(b)(5). (Last location was B.&P. on 1/22/2018)

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Summary: Existing law provides for the licensure and regulation of various professions in the healing arts, including physicians and surgeons, licensed psychologists, psychiatric technicians, marriage and

family therapists, licensed educational psychologists, clinical social workers, and licensed professional clinical counselors. Existing law prohibits mental health providers, as defined, from performing sexual orientation change efforts, as specified, with a patient under 18 years of age. Existing law provides 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 would additionally prohibit a mental health provider from engaging in sexual orientation change efforts with a patient, regardless of age, under a conservatorship or a guardianship. The bill would provide that any sexual orientation change efforts attempted on a patient under a conservatorship or a guardianship shall be considered unprofessional conduct and shall subject the provider to discipline by the provider's licensing entity.

AB 1893 (Maienschein R) Maternal mental health: federal funding.

Introduced: 1/18/2018 **Last Amend:** 4/9/2018

Status: 7/20/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 140,

Statutes of 2018.

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Summary: Existing law finds and declares that prenatal care, delivery service, postpartum care, and neonatal and infant care are essential services necessary to assure maternal and infant health. Existing law requires the State Department of Public Health to develop and maintain a statewide community-based comprehensive perinatal services program to, among other program objectives, ensure the appropriate level of maternal, newborn, and pediatric care services necessary to provide the healthiest outcome for mother and infant. This bill would require the department to investigate and apply for federal funding opportunities regarding maternal mental health, as specified. This bill would require the department to notify the Legislature on or before January 1, 2020, on the department's efforts to secure and utilize the federal funding it receives.

AB 1896 (Cervantes D) Sexual assault counselor-victim privilege.

Introduced: 1/22/2018 **Last Amend:** 5/10/2018

Status: 7/18/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 123,

Statutes of 2018.

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Summary: Existing law establishes a privilege for a victim of a sexual assault to refuse to disclose, and to prevent another from disclosing, a confidential communication between the victim and a sexual assault counselor, if the privilege is claimed by the holder of the privilege, a person who is authorized to claim the privilege by the holder of the privilege, or the person who was the sexual assault counselor at the time of the confidential communication, except as specified. The definition of "sexual assault counselor" includes a person who is engaged in any office, hospital, institution, or center commonly known as a rape crisis center, whose primary purpose is the rendering of advice or assistance to victims of sexual assault and who meets certain requirements. This bill would specifically include within the definition of "sexual assault counselor" for these purposes a person who is engaged in a program on the campus of a public or private institution of higher education, with the same primary purpose of rendering advice or assistance to victims of sexual assault and the same qualifications. This bill contains other related provisions and other existing laws.

AB 1968 (Low D) Mental health: firearms.

Introduced: 1/31/2018 **Last Amend:** 8/17/2018

Status: 9/28/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 861,

Statutes of 2018.

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Summary: Existing law makes it a crime for a person who has been taken into custody, assessed, and admitted to a designated facility because he or she is a danger to himself, herself, or others, as a result of a mental health disorder to own a firearm for a period of 5 years after the person is released from the facility. Existing law allows a person who is prohibited from owning a firearm pursuant to these provisions to petition the court for a hearing in which the district attorney is required to show by a preponderance of the evidence that the person would not be likely to use firearms in a safe and lawful manner. If the people do not meet this burden, existing law requires the court to order that the person not be subject to this prohibition on the possession of firearms. This bill would prohibit a person who has been taken into custody, assessed, and admitted to a designated facility because he or she is a danger to himself, herself, or others, as a result of a mental health disorder and who was previously taken into custody, assessed, and admitted one or more times within a period of one year preceding the most recent admittance from owning a firearm for the remainder of his or her life. The bill

would extend the above hearing process to a person under these provisions. Because a violation of the firearm prohibition would be a crime, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

AB 2018 (Maienschein R) Mental health workforce planning: loan forgiveness, loan repayment, and scholarship programs.

Introduced: 2/5/2018 Last Amend: 6/12/2018

Status: 8/31/2018-Failed Deadline pursuant to Rule 61(b)(18). (Last location was S. APPR. SUSPENSE

FILE on 6/25/2018)

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Summary: Existing law establishes the Steven M. Thompson Physician Corps Loan Repayment Program (program) in the California Physician Corps Program within the Health Professions Education Foundation, which provides financial incentives, including repayment of educational loans, to a physician and surgeon who practices in a medically underserved area, as defined. Existing law establishes the Medically Underserved Account for Physicians, a continuously appropriated account, within the Health Professions Education Fund, to primarily provide funding for the ongoing operations of the program. This bill also would define "practice setting" to include a program or facility operated by, or contracted to, a county mental health plan. By expanding the group of persons eligible for financial incentives payable from a continuously appropriated fund, this bill would make an appropriation. This bill contains other related provisions and other existing laws.

AB 2022 (Chu D) Pupil mental health services: school notification.

Introduced: 2/5/2018 **Last Amend:** 8/17/2018

Status: 9/18/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 484,

Statutes of 2018.

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Summary: Existing law requires the governing board of any school district to give diligent care to the health and physical development of pupils and authorizes the governing board of a school district to employ properly certified persons for the work. This bill would require a school of a school district or county office of education and a charter school to notify pupils and parents or guardians of pupils no less than twice during the school year on how to initiate access to available pupil mental health services on campus or in the community, or both, as provided. By imposing an additional requirement on schools of school districts and county offices of education and charter schools, the bill would impose a state-mandated local program. The bill would authorize a county to use funds from the MHSA to provide a grant to a school district or county office of education, or to a charter school, within the county, for purposes of funding those notification requirements, and would authorize a school district or county office of education, or a charter school, to apply to its respective county for a grant for those purposes. This bill contains other related provisions and other existing laws.

AB 2044 (Stone, Mark D) Domestic violence: family court.

Introduced: 2/6/2018 **Last Amend:** 8/16/2018

Status: 9/30/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 941,

Statutes of 2018.

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Summary: Existing law requires a family court to determine the best interests of the child for purposes of deciding child custody in proceedings for dissolution of marriage, nullity of marriage, legal separation of the parties, petitions for exclusive custody of a child, and proceedings under the Domestic Violence Prevention Act. In making that determination, existing law requires the court to consider specified factors, including whether either of the child's parents habitually or continually uses alcohol or illegal drugs. This bill would require the court to make the determination consistent with specified findings. The bill would include in those findings that children have the right to be safe and free from abuse and that domestic violence in a household where a child resides is detrimental to the health, safety, and welfare of the child. This bill contains other related provisions and other existing laws.

AB 2117 (Arambula D) Marriage and family therapists: clinical social workers: professional clinical counselors.

Introduced: 2/8/2018 **Last Amend:** 8/6/2018

Status: 9/18/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 486,

Statutes of 2018.

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Summary: (1)Existing law provides for the licensure, registration, and regulation of marriage and family therapists, associate marriage and family therapists, clinical social workers, associate clinical social workers, professional clinical counselors, and associate professional clinical counselors by the Board of Behavioral Sciences. Existing law provides that the registration for an associate marriage and family therapist, associate clinical social worker, or associate professional clinical counselor may be renewed before its expiration date by taking specified actions. This bill would authorize renewal of an expired registration for an associate marriage and family therapist, associate clinical social worker, or associate professional clinical counselor in the same manner in which an unexpired registration is renewed. This bill contains other related provisions and other existing laws.

AB 2119 (Gloria D) Foster care: gender affirming health care and mental health care.

Introduced: 2/8/2018 **Last Amend:** 8/20/2018

Status: 9/14/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 385,

Statutes of 2018.

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Summary: Existing law provides that it is the policy of the state that all minors and nonminors in foster care have specified rights, including, among others, the right to receive medical, dental, vision, and mental health services, the right to be involved in the development of their own case plans and plans for permanent placement, and the right to be placed in out-of-home care according to their gender identity, regardless of the gender or sex listed in their court or child welfare records. This bill would provide that the rights of minors and nonminors in foster care, as described above, include the right to be involved in the development of case plan elements related to placement and gender affirming health care, with consideration of their gender identity. The bill would also provide that the right of minors and nonminors in foster care to health care and mental health care includes covered gender affirming health care and gender affirming mental health care, as defined. The bill would require the State Department of Social Services, in consultation with the State Department of Health Care Services and other stakeholders, to develop guidance and describe best practices to identify, coordinate, and support foster youth seeking access to gender affirming health care and gender affirming mental health care and to incorporate current quidance on ensuring access to Medi-Cal services for transgender beneficiaries. The bill would require the department to issue written guidance by January 1, 2020. The bill would also include a statement of legislative findings and declarations.

AB 2193 (Maienschein R) Maternal mental health.

Introduced: 2/12/2018 **Last Amend:** 8/17/2018

Status: 9/26/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 755,

Statutes of 2018.

Desk Policy Fiscal Floo	Desk Policy Fiscal Floor	Conf			
1st House	2nd House	Conc.	Enrolled	Vetoed	Chaptered

Summary: Existing law provides for the licensure and regulation of various healing arts professions, including, but not limited to, physicians and surgeons, by various boards within the Department of Consumer Affairs. Existing law imposes certain fines and other penalties for, and authorizes these boards to take disciplinary action against licensees for, violations of the provisions governing those professions. This bill would require, by July 1, 2019, a licensed health care practitioner who provides prenatal or postpartum care for a patient to offer to screen or appropriately screen a mother for maternal mental health conditions. This bill contains other related provisions and other existing laws.

AB 2302 (Baker R) Child abuse: sexual assault: mandated reporters: statute of limitations.

Introduced: 2/13/2018 Last Amend: 8/13/2018

Status: 9/30/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 943,

Statutes of 2018.

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Summary: Existing law, the Child Abuse and Neglect Reporting Act, makes certain persons, including teachers and social workers, mandated reporters. Under existing law, mandated reporters are required to report whenever the mandated reporter, in his or her professional capacity or within the scope of his or her employment, has knowledge of or observes a child whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or neglect. Failure by a mandated reporter to report an incident of known or reasonably suspected child abuse or neglect is a misdemeanor. Existing law generally requires prosecution of a misdemeanor to commence within one year after commission of the offense. Under existing law, if the mandated reporter intentionally conceals his or her failure to report an incident known by the mandated reporter to be abuse or

severe neglect, it is a continuing offense until discovered by the appropriate law enforcement agency. This bill would allow a case involving the failure to report an incident known or reasonably suspected by the mandated reporter to be sexual assault, as defined, to be filed at any time within 5 years from the date of occurrence of the offense.

AB 2324 (Rubio D) Elder or dependent adult abuse: disorderly conduct: mandated reporters.

Introduced: 2/13/2018 **Last Amend:** 4/26/2018

Status: 5/25/2018-Failed Deadline pursuant to Rule 61(b)(8). (Last location was A. APPR. on

4/30/2018)

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Summary: Existing law, the Elder Abuse and Dependent Adult Civil Protection Act, establishes procedures for the reporting, investigation, and prosecution of abuse of an elder or dependent adult, which is defined to mean physical abuse, neglect, abandonment, and financial abuse, among other forms of abuse. Existing law requires specified persons, known as mandated reporters, who, have observed or have knowledge of an incident that reasonably appears to be, or is told by an elder or dependent adult that he or she has experienced behavior constituting, physical abuse, abandonment, abduction, isolation, financial abuse, or neglect to report the known or suspected instance of abuse, as specified. A failure to report is a misdemeanor. Under existing law, it is disorderly conduct, punishable as a misdemeanor, to use a concealed camera to secretly record another identifiable person who may be in a state of full or partial undress, for the purpose of viewing the body or undergarments of that other person, without the consent or knowledge of the other person, in the interior of a bedroom, bathroom, changing room, fitting room, dressing room, or tanning booth, or the interior of any other area in which that other person has a reasonable expectation of privacy, with the intent to invade the privacy of that person. This bill would require a mandated reporter to report a violation of the above-specified disorderly conduct crimes committed against an elder or dependent adult, as specified. The bill would make a violation of this requirement a misdemeanor. By expanding the application of a crime, this bill would impose a state-mandated local program. laws.

AB 2442 (Santiago D) Mental health.

Introduced: 2/14/2018 Last Amend: 3/23/2018

Status: 4/27/2018-Failed Deadline pursuant to Rule 61(b)(5). (Last location was HEALTH on 3/22/2018)

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Summary: Existing law, the Lanterman-Petris-Short Act, provides for the involuntary detention and treatment of persons with specified mental health disorders for the protection of the persons so committed. Under the act, when a person, as a result of a mental health disorder, is a danger to others, or to himself or herself, or gravely disabled, he or she may, upon probable cause, be taken into custody and placed in a facility designated by the county and approved by the State Department of Social Services for up to 72-hours for evaluation and treatment. Existing law requires specified mental health professionals to assess a person to determine whether the person can be properly served without being detained, and if so, to provide evaluation, crisis intervention, or other inpatient or outpatient services on a voluntary basis. This bill would further require that if a determination is made that a person may be treated without being detained, and if the person is experiencing homelessness, he or she shall also be provided written information about local housing options, employment opportunities, and available public social services. By imposing additional duties on counties, the bill would impose a state-mandated local program. This bill contains other existing laws.

AB 2539 (Mathis R) California Physician Corps Program: practice setting.

Introduced: 2/14/2018 **Last Amend:** 4/5/2018

Status: 8/31/2018-Failed Deadline pursuant to Rule 61(b)(18). (Last location was S. APPR. SUSPENSE

FILE on 6/25/2018)

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Summary: Existing law establishes the Steven M. Thompson Physician Corps Loan Repayment Program (program) in the California Physician Corps Program within the Health Professions Education Foundation, which provides financial incentives, including repayment of educational loans, to a physician and surgeon who practices in a medically underserved area, as defined. Existing law establishes the Medically Underserved Account for Physicians, a continuously appropriated account, within the Health Professions Education Fund, to primarily provide funding for the ongoing operations of the program. Existing law requires the foundation and the Office of Statewide Health Planning and Development to develop guidelines using specified criteria for selection and placement of applicants. This bill would instead require, for purposes of this definition, only until January 1, 2021, and only for program participants who enroll in the program on or after January 1, 2019, and before

January 1, 2021, that the clinic or the physician owned and operated medical practice setting have at least 30% of patients, if the area is a rural area, as defined, or at least 50% of patients, if the area is not a rural area, who are from the above-described populations. By expanding the authorization for the use of moneys in the continuously appropriated Medically Underserved Account for Physicians, this bill would make an appropriation. This bill contains other related provisions and other existing laws.

AB 2608 (Stone, Mark D) Licensed Mental Health Service Provider Education Program: former foster youth.

Introduced: 2/15/2018

Introduced: 2/15/2018 Last Amend: 7/5/2018

Status: 9/20/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 585,

Statutes of 2018.

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Summary: Existing law authorizes any licensed mental health service provider, as defined, including a marriage and family therapist, associate marriage and family therapist, licensed clinical social worker, and associate clinical social worker, who provides direct patient care in a publicly funded facility or a mental health professional shortage area, as defined, to apply for grants under the Licensed Mental Health Service Provider Education Program to reimburse his or her educational loans related to a career as a licensed mental health service provider, as specified. Existing law establishes the Mental Health Practitioner Education Fund and provides that moneys in that fund are available, upon appropriation by the Legislature, for purposes of the Licensed Mental Health Service Provider Education Program. This bill would require an account to be created within the Mental Health Practitioner Education Fund and, upon appropriation by the Legislature, would require moneys in that account to be used solely to fund grants to repay educational loans for applicants who commit to practice in specified facilities for at least 24 months, who are marriage and family therapists, associate marriage and family therapists, licensed clinical social workers, associate clinical social workers, licensed professional clinical counselors, or associate professional clinical counselors, and who were formerly in California's foster youth care system.

AB 2780 (Bloom D) Family law: support orders.

Introduced: 2/16/2018 **Last Amend:** 6/11/2018

Status: 8/20/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 178,

Statutes of 2018.

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Summary: (1)Existing law authorizes the court, in a proceeding for dissolution of marriage or for legal separation of the parties, to order a party to submit to an examination by a vocational training counselor to assess the party's ability to obtain certain employment, as specified. Existing law requires a vocational training counselor performing these examinations to possess specific educational and professional experiences, including, among other qualifications, a master's degree in the behavioral sciences. This bill would modify the required qualification to serve as a vocational training counselor by allowing, in the alternative to the master's degree, a vocational training counselor to possess another postgraduate degree that the court finds provides sufficient training to perform a vocational evaluation. This bill contains other related provisions and other existing laws.

AB 2861 (Salas D) Medi-Cal: telehealth: alcohol and drug use treatment.

Introduced: 2/16/2018 Last Amend: 8/6/2018

Status: 9/18/2018-Approved by the Governor. Chaptered by Secretary of State - Chapter 500,

Statutes of 2018.

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Summary: Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. Existing law establishes the Drug Medi-Cal Treatment Program (Drug Medi-Cal), under which the department is authorized to enter into contracts with each county, or enter into contracts directly with certified providers, for the provision of various alcohol and drug use treatment services to Medi-Cal beneficiaries. This bill would, to the extent federal financial participation is available and any necessary federal approvals have been obtained, require that a Drug Medi-Cal certified provider receive reimbursement for individual counseling services provided through telehealth by a licensed practitioner of the healing arts or a registered or certified alcohol or other drug counselor, when medically necessary and in accordance with the Medicaid state plan. The bill would require the department to adopt regulations to implement these provisions by July 1, 2022, but would authorize the department to do so by means of provider bulletins, written guidelines, or similar instructions, until

regulations are adopted. This bill contains other existing laws.

SB 142 (Beall D) Criminal offenders: mental health.

Introduced: 1/13/2017 **Last Amend:** 8/6/2018

Status: 8/17/2018-Failed Deadline pursuant to Rule 61(b)(15). (Last location was A. APPR. SUSPENSE

FILE on 8/8/2018)

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Summary: (1)Existing law generally requires, if a person is convicted of a felony and is eligible for probation, before judgment is pronounced, the court to immediately refer the matter to a probation officer to investigate and report to the court upon the circumstances surrounding the crime and the prior history and record of the person. Existing law also authorizes, when a defendant has been granted probation, the court to impose conditions of probation, including, among others, that the probationer go to work and earn money for the support of his or her dependents or to pay any fine imposed or reparation condition. This bill would authorize a defendant to provide documentation to the court that he or she is currently, or was at any prior time, eligible for public mental health services due to a serious mental illness or eligible for Social Security Disability Insurance due to a diagnosed mental illness. The bill would prohibit a finding that the defendant has a mental disorder, any progress report concerning his or her treatment, or any other record related to a mental disorder from being used in any other civil or administrative proceeding without the defendant's consent. The bill would also require the court to consider the defendant's mental health history when determining sentencing and whether referral to the county behavioral health system for treatment in the community, including residential treatment, is appropriate in lieu of incarceration. This bill contains other related provisions and other existing laws.

SB 215 (Beall D) Diversion: mental disorders.

Introduced: 2/1/2017 **Last Amend:** 8/23/2018

Status: 9/30/2018-Approved by the Governor. Chaptered by Secretary of State. Chapter 1005,

Statutes of 2018.

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Summary: Existing law authorizes a court to grant pretrial diversion, for a period no longer than 2 years, to a defendant suffering from a mental disorder, on an accusatory pleading alleging the commission of a misdemeanor or felony offense, in order to allow the defendant to undergo mental health treatment. Existing law conditions eligibility on, among other criteria, a court finding that the defendant's mental disorder played a significant role in the commission of the charged offense. Existing law requires, if the defendant has performed satisfactorily in diversion, that the court dismiss the defendant's criminal charges, with a record filed with the Department of Justice indicating the disposition of the case diverted, that the arrest is deemed never to have occurred, and requires the court to order access to the record of the arrest restricted, except as specified. This bill would make defendants ineligible for the diversion program for certain offenses, including murder, voluntary manslaughter, and rape. The bill would authorize a court to require the defendant to make a prima facie showing that the defendant will meet the minimum requirements of eligibility for diversion and that the defendant and the offense are suitable for diversion, as specified. The bill would also require the court, upon request, to conduct a hearing to determine whether restitution is owed to any victim as a result of the diverted offense and, if owed, to order its payment during the period of diversion. The bill would provide that a defendant's inability to pay restitution due to indigence or mental disorder would not be grounds for denial of diversion or a finding that the defendant has failed to comply with the terms of diversion. The bill would also make technical changes.

SB 399 (Portantino D) Health care coverage: pervasive developmental disorder or autism.

Introduced: 2/15/2017 **Last Amend:** 8/23/2018

Status: 9/29/2018-Vetoed by the Governor. In Senate. Consideration of Governor's veto pending.

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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 a "qualified autism service professional" to include behavioral service providers who meet specified educational and professional or work experience qualifications. The bill would revise the definition of a "qualified autism service paraprofessional" by deleting the reference to an unlicensed and uncertified individual and by requiring the individual to comply with revised educational and training, or professional, requirements. The bill would also revise

the definitions of both a qualified autism service professional and a qualified autism service paraprofessional to include the requirement that these individuals complete a background check. This bill contains other related provisions and other existing laws.

Governor's Message: To the Members of the California State Senate: I am returning Senate Bill 399 without my signature. This bill would revise qualification standards for providers of behavioral health treatment for individuals with autism. Standards for autism providers were updated last year. I'm not inclined to revise them again. Sincerely, Edmund G. Brown Jr.

SB 984 (Skinner D) State boards and commissions: representation: appointments.

Introduced: 2/5/2018 **Last Amend:** 7/3/2018

Status: 8/17/2018-Failed Deadline pursuant to Rule 61(b)(15). (Last location was A. APPR. SUSPENSE

FILE on 8/8/2018)

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Summary: Existing law establishes various boards and commissions within state government. Under existing law, it is the policy of the State of California that the composition of these state boards and commissions broadly reflect the general public, including ethnic minorities and women. Under existing law, the Governor and other appointing authorities are responsible for nominating to these boards and commissions persons of different backgrounds, abilities, interests, and opinions. This bill, on and after January 1, 2024, would require the composition of each appointed state board and commission to have a specified minimum number of women board members or commissioners based on the total number of board members or commissioners on that board. The bill would also require the office of the Governor to collect and release, annually, at a minimum, aggregated demographic data provided by state board and commission applicants, nominees, and appointees.

SB 1298 (Skinner D) The Increasing Access to Employment Act.

Introduced: 2/16/2018 **Last Amend:** 4/4/2018

Status: 5/25/2018-Failed Deadline pursuant to Rule 61(b)(8). (Last location was S. APPR. SUSPENSE

FILE on 5/7/2018)

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Summary: Existing law requires the Department of Justice to maintain state summary criminal history information, as defined, and requires the Attorney General to furnish state summary criminal history information to specified entities and individuals, including an authorized entity for employment, licensing, or certification relative to community care facilities, residential care facilities, and other specified health facilities. Existing law requires the department to provide the requester with every conviction of an offense rendered against the applicant, except for a conviction for which relief was granted to a victim of human trafficking, as specified. This bill would prohibit the department from releasing, for these purposes, the record of convictions that were dismissed pursuant to specified provisions. This bill contains other related provisions and other existing laws.

Total Measures: 33 Total Tracking Forms: 33