



Legislative Committee

April 26, 2018

2:00 pm - 3:30 pm

Britta Guerrero, *Stand-in Chair*

Agenda

ORDER OF BUSINESS	RELEVANT ATTACHMENTS	REPORTING	ACTION A = Approval D = Discussion I = Information
I. Call to Order		Britta Guerrero	A
II. Approval of Agenda	<ul style="list-style-type: none"> Agenda Executive Summary 	Britta Guerrero	A
III. Approval of Minutes	<ul style="list-style-type: none"> January 2018 Minutes February 2018 Minutes March 2018 Minutes 	Britta Guerrero	A
IV. Federal Landscape	<i>Verbal Update</i>	Burt Margolin	D
V. State Landscape	State Political Landscape and 2018 Elections – <i>Verbal Update</i> <ul style="list-style-type: none"> State Legislative Update on Sponsored Bills and Bills of Interest CPCA's 2018 Bill Tracking Report with New Staff Recommended Positions and Recommended Changes in Position (click here to download bill report) 2018 Ballot Initiatives Memo 	Christy Bouma & Meagan Subers Beth Malinowski Beth Malinowski Victor Christy	D D A D
VI. FY18-19 State Budget	<ul style="list-style-type: none"> Update on Governor Brown's 2018-19 State Budget 	Beth Malinowski	D
VII. Visioning Workgroup Update	<ul style="list-style-type: none"> Proposed CPCA Health System Vision and Values 	Andie Patterson	A
VIII. Advocacy and Communications	<ul style="list-style-type: none"> Advocacy Update Communications Update 	Jana Castillo Andrea Chavez	I I
IX. Adjourn		Britta Guerrero	A

Date: April 2018

To: Legislative Committee

LEGISLATIVE COMMITTEE / EXECUTIVE SUMMARY

Federal Landscape – *Verbal Update*

State Landscape

- As we enter the second year of a two year state legislative cycle, we aim to continue legislative efforts launched in 2017 while introducing and supporting additional bills that are in keeping with our 2018 policy priorities.
- Newly introduced sponsored legislation – SB 1125 (Atkins), AB 2576 (Aguiar Curry), and AB 2428 (Gonzalez Fletcher) - all had their first policy committee hearings in April.
- Advocates' FY18-19 Budget advocacy is in full swing. While focused on addressing the Administration's 340B proposal, work is also happening to support partner efforts from funding for Medi-Cal expansion to meaningful use.
- As of January 2018, Staff tracked 6 ballot measures of interest. Of those ballot measures filed, Advocates staff identified 6 initiatives to be of particular interest and will continue to follow them through the qualification process. Signatures must be submitted to the Secretary of State by April 24, 2018.

Proposed CPCA Health System Vision and Values

- The Visioning WG met 3 times since the January Board meeting to craft Vision/ Values/ Principles for a future health care delivery system.
- The document attached is the final working document that reflects the position of the group.
- The Vision is meant to help staff better defend the interests of health centers on issues of legislation as well as be proactive in creating the system health centers envision.
- Staff recommend the Committee vote to approve the document as the Vision for CPCA to use moving forward.

Advocacy and Communications

- After months of uncertainty and advocacy, Congress voted to extend health center funding for two years.
- Sponsored legislation and Budget advocacy continues be a priority in 2018.
- During election years, CPCA alongside the consortia, aim to engage health centers in coordinated voter engagement campaigns.
- CaliforniaHealth+ Advocates and the California Primary Care Association have worked hard to streamline communication with members.
- Outlined in this memo are the communication channels from both organizations and the content you can find on each channel.

CALIFORNIA PRIMARY CARE ASSOCIATION

Legislative Committee

January 18, 2018

2:00 PM – 3:30 PM

Members: **Kevin Mattson – Chair,** Robin Affrime, Alex Armstrong, Linda Costa, Doreen Bradshaw, Eddie Chan, Jill Damian, Lynn Dorroh-Watson, Reymundo Espinoza, Debra Farmer, Rachel Farrell, Ben Flores, Susie Foster, Tim Fraser, Cathy Frey, Naomi Fuchs, Alvaro Fuentes, Jane Garcia, Greg Garrett, Dean Germano, Franklin Gonzalez, Britta Guerrero, Nik Gupta, Steve Heath, Virginia Hedrick, Kerry Hydash, Cathryn, Hyde, Tina Jagtiani, Daniel Kazakos, Constance Kirk, Deena Lahn, David Lavine, Becky Lee, Marty Lynch, Jyl Marden, Burt Margolin, Louise McCarthy, Scott McFarland, Leslie McGowan, Ana Melgoza, Angie Melton, Nichole Mosqueda, Danielle Myers, Rakesh Patel, Courtney Powers, Joanne Preece, Carole Press, Tim Pusateri, Lucresha Renteria, Tim Rine, Jacqueline Ritacco, Melinda Rivera, Esen Sainz, Corinne Sanchez, Michael Schaub, Laura Sheckler, Paulo Soares, Deanna Stover, Terri Lee Stratton, Mary Szecsey, Sabine Talaugon, Vernita Todd, Henry Tuttle, Jason Vega, Christine Velasco, Richard Veloz, David B. Vliet

Guests: Christine Noguera, Anitha Mullangi, Maria Paz, Melissa Eidman, Meryl Schlingheyde, Anthony White, Sergio Bautista, Julie Sinai, Paula Zandi, Ellen Piernot, Karen Lauterbach, Diana Kawasaki-Yee

Staff: Carmela Castellano-Garcia, Beth Malinowski, Kelley Aldrich, Victor Christy, Andie Patterson, Meaghan McCamman, Michael Helmick, Andrea Chavez, Jana Castillo, Mike Witte, Lucy Moreno, Emily LaBass, Jodi Samuels,

Call to Order

The meeting was called to order by the chair at 1:57 PM.

Approval of Agenda

A motion was made and seconded to approve the agenda as written. **The motion carried.**

Approval of Minutes

A motion was made and seconded to approve the minutes as written. **The motion carried.**

Beth Malinowski started the committee meeting by highlighting a few things in the Legislative Committee 2017 Year in Review memo: most notably CPCA's three sponsored bills, one of which, SB 323, was signed into law; the 2017 budget act which reflects a commitment to creating a healthy California and our federal advocacy, which was very active and complicated with threats to the ACA, Health Center Funding reauthorization and Tax Reform.

Federal Landscape

Burt Margolin gave members an overview of the chaos going on in DC and with the Trump administration and noted that it appears to be working to our advantage since they have failed to repeal the ACA.

Angie Melton discussed how 2017 was an amazing year for advocacy..."We helped stop the repeal of the ACA!" She gave an update on appropriations, the health center funding cliff and the 340B Drug Pricing Program.

Angie also gave a big push for members to attend NACHC's Policy and Issues Forum, noting that we will be right back in the fight for funding in just a few months and our advocacy efforts must continue.

State Landscape

Christy Bouma laid out California's current political landscape, touching on the following:

- Big election year here in CA
 - Change in Senate leadership, Pro Tem Atkins takes over on 3/21
 - Governor's race has 60 candidates (5-8 are legitimate)
 - Frontrunners – Villaraigosa, Chiang & Newsom
 - Single Payer is a big issue
 - Special elections - 3 members out for harassment
- Governor's budget - pretty consistent with last year but still open for changes in the May revise
- Get out the Vote – very important this year.

Beth gave members a two year bill update, discussed our 2018 bill concepts, ballot initiatives and the state budget:

- As we enter the second year of a two year state legislative cycle, we aim to continue legislative efforts launched in 2017 while introducing and supporting additional bills that are in keeping with our 2018 policy priorities.
 - Additionally, work will continue on two-year bills, including, but not limited to, SB 456 (Pan), AB 1003 (Bloom), and AB 1250 (Jones-Sawyer).
 - Sponsored legislation in the following areas is currently being explored: Declared Emergencies; Same Day Billing; Consolidated Licensing; and Educational Equity.
- Advocates Budget Analysis was sent out yesterday and our big fight continues to be 340B.

Victor Christy gave an overview of the 2018 Ballot Initiatives, noting the following:

- As of January 1, 2018, there have been 53 ballot measures submitted to the Attorney General's office for the November 6, 2018 General Election.
 - Signatures must be submitted to the Secretary of State by April 28, 2018.
 - Of those ballot measures filed, CPCA staff has identified 6 initiatives to be of particular interest and will continue to follow them through the qualification process.
 - #17-0047 California Tax on Incomes Exceeding \$1M for Hospitals, Clinics and Workforce Training Initiative. This is a local UHW, CPCA has not taken a position nor has the Hospitals.

Health System Visioning

Andie Patterson summarized her notes from yesterday's (January 17) Visioning for a Future Health Systems Meeting, asking members to think about the following questions:

- What is the health system going to look like in the future?
- How do we feel about SB 562 – Universal Health Care?
- Where do we begin?
- What do we care about?
- What's our vision?

Andie recommended we form a CPCA Taskforce for 2 months and bring back to this group a proposal for a Future Health System Vision.

Motion Summary:

A motion was made and seconded to form a CPCA Taskforce to work on a proposal for the future health system vision and bring it back to the Legislative Committee in April.
(Tuttle/McCarthy) The motion carried.

Andie asked members to e-mail her directly if they would like to be a part of the taskforce.

Advocacy and Communications

Jana Castillo gave members an overall assessment of advocacy in 2017 and what to expect in 2018, noting the increase in federal advocacy activities continued into the fourth quarter of 2017. With health center funding still in a state of limbo, we anticipate additional federal advocacy to keep the pressure on Congress to fix the cliff.

Andrea Chaves reminded members that at the October 2017 Board Meeting, staff presented an external communications strategy to help deliver greater impact on key priorities and since then has started to lay the foundation for the communications strategy. Given that the Health Center funding cliff is a top priority for health centers in California – and around the nation – staff will focus media relations the first part of the year on telling the health center story and the importance of Federal funding until the health center funding cliff is fixed, starting with a coordinated January media blitz.

Adjourn

The meeting was adjourned at 3:38 PM.

Submitted by Kelley Aldrich

CALIFORNIA PRIMARY CARE ASSOCIATION
Legislative Committee On-line Meeting

February 28, 2018
11:00 AM – 12:00 PM

Members: **Kevin Mattson – Chair,** Joey Acuna, Javier Alvarado, Elizabeth Bille, Warren Brodine, Sylvia Castillo, Trisha Cooke, Reymundo Espinoza, Rachel Farrell, Cathy Frey, Greg Garrett, Franklin Gonzalez, Haleh Hatami, Virginia Hedrick, Cathryn Hyde, Tina Jagtiani, Saaliha Khan, Barbara Kidder Garcia, David Klinetobe, Neil Kozuma, Deena Lahn, Gaston Lassalle, Karen Lauterbach, David Lavine, Margie Martinez, Sabra, Matovsky, Njeri McGee-Tyner, Julie Mindardi, Nicole Mosqueda, George Navarro, Katja Nelson, Elisa Nicholas, Brande Orr, Luzita Pineda, Joanne Preece, John Price, Lucresha Renteria, Melinda Rivera, Sarah Ross, Esen Sainz, Andrea San Miguel, Sendy Sanchez, Jennifer Self, Laura Sheckler, Andrew Signey, Doug Subers, Meagan Subers, Dong Suh, Mary Szecsey, Sabine Talaugon, Sonya Tetnowski, Jose Tienda, Vernita Todd, Marcela Vargas, Jason Vega, Christina Velasco, Richard Veloz, David B. Vliet, Anthony White, Carl Coan, Britta Guerrero, Becky Lee

Staff: Carmela Castellano-Garcia, Beth Malinowski, Kelley Aldrich, Victor Christy, Andie Patterson, Meaghan McCamman, Andrea Chavez, Michael Helmick, Elizabeth Oseguera

Call to Order

The meeting was called to order by the chair at 11:02 AM.

Approval of Agenda

A motion was made and seconded to approve the agenda as written. **The motion carried.**

Beth Malinowski reviewed her on-line slide deck covering the following:

- CPCA’s Policy Priorities for 2018
 - Coverage and Access for All
 - Delivery of Culturally Competent Whole Person Health Care, Preventative Care and Core Support
 - Services
 - Building Healthy Communities
- FY17-18 Sponsored Legislation Review – these bills should be considered in the context of the full package of sponsored bills that were introduced between the 1st and 2nd years of session.
 - Coverage and Access for All
 - **AB 2576 (Aguiar-Curry): Declared Emergencies** [NEW Co-sponsored Bill w Redwood Community Health Coalition]
 - Delivery of Whole Person Care
 - **SB 323 (Mitchell): Improving Access to Drug Medi-Cal and Specialty Mental Health Services** [2017 Co-Sponsored Bill w CCALAC - Chaptered]

- **SB 456 (Pan): Coordinated Care** [Sponsored Two Year Bill]
- **SB 1125 (Atkins): Same Day Billing** [NEW Co-Sponsored Bill w Steinberg Institute]
- **AB 2428 (Gonzalez-Fletcher): Consolidated Licensing** [NEW Sponsored Bill]
- Building Healthy Communities
 - **AB 1003 (Bloom): Sugar Sweetened Beverage Tax** [Coalition Effort – Dead, Pursuant to Joint Rule 56].

Beth then gave a quick refresher on how to read CPCA’s bill tracking report, broke down the bill categories used in the report and gave a 101 on the legislative process from introduction to the governor’s desk. The chair then asked for a motion.

LEGISLATIVE COMMITTEE ACTION ITEM #1

Re: CPCA’s 2018 Bill Package

Action Request: To give staff approval to move forward with the bill package presented to the Legislative Committee on 2/28/18, including sponsor and support bills.

Motion Summary: A motion was made and seconded for CPCA/Advocates staff to move forward with the bill package presented on 2/28/18, with the addition of AB 2204 as a WATCH bill. (J. Price/V. Todd) The motion carried.

Beth gave an update on the state budget and the chair asked for a motion.

LEGISLATIVE COMMITTEE ACTION ITEM #2

Re: CPCA’s 2018 Budget Advocacy

Action Request: As staff reflect on process, they’ve recognized that in recent years we have not taken an official position on our budget advocacy. In general, staff use the policy priorities to guide budget work – depending when and how to support different budget items.

Motion Summary: CPCA staff are directed to use the 2018 policy priorities to guide budget advocacy. Staff are advised to prioritize 340B and Medi-Cal coverage expansion, while also being supportive of other budget proposals that are in keeping with our core priorities. (D. Vliet/L. Renteria) The motion carried.

The chair made members aware of the additional on-line committee meetings scheduled on 3/23, 5/15, 6/7 and 8/7.

Adjourn

The meeting was adjourned at 12:04 PM.

Submitted by Kelley Aldrich

CALIFORNIA PRIMARY CARE ASSOCIATION
Legislative Committee On-line Meeting

March 23, 2018
11:00 AM – 12:00 PM

Members: **Kevin Mattson – Chair,** Doreen Bradshaw, Sylvia Castillo, Colleen Curtis, Gilbert Fimbres, Cathy Frey, Dean Germano, Haleh Hatami, Cathryn Hyde, Isaias Iniguez, Constance Kirk, David Klinetobe, Deena Lahn, Karen Lauterbach, Jyl Marden, Sabra Matovsky, Njeri McGee-Tyner, Bill Phelps-Ramos, Joanne Preece, John Price, Melinda Rivera, Sarah Ross, Esen Sainz, Sendy Sanchez, Michael Schaub, Jennifer Self, Dong Suh, Sabine Talaugon, Vernita Todd, Marcela Vargas, Denis Vega Tapia, Carmen Villanueva, Deborah Villar, Anthony White, Britta Guerrero, Becky Lee

Staff: Beth Malinowski, Kelley Aldrich, Andrea Chavez

Call to Order

The meeting was called to order by the chair at 11:04 AM.

Approval of Agenda

A motion was made and seconded to approve the agenda as written. **The motion carried.**

Beth Malinowski gave members an update on our FY17-18 Sponsored Legislation.

- Coverage and Access for All
 - **AB 2576 (Aguiar-Curry): Declared Emergencies** [NEW Co-sponsored Bill w Redwood Community Health Coalition]
- Delivery of Whole Person Care
 - **SB 323 (Mitchell): Improving Access to Drug Medi-Cal and Specialty Mental Health Services** [2017 Co-Sponsored Bill w CICALAC - Chaptered]
 - **SB 456 (Pan): Coordinated Care** [Sponsored Two Year Bill]
 - **SB 1125 (Atkins): Same Day Billing** [NEW Co-Sponsored Bill w Steinberg Institute]
 - **AB 2428 (Gonzalez-Fletcher): Consolidated Licensing** [NEW Sponsored Bill]
- Building Healthy Communities
 - **AB 1003 (Bloom): Sugar Sweetened Beverage Tax** [Coalition Effort – Dead, Pursuant to Joint Rule 56].

Beth then reviewed each of the 7 new bills with the staff recommended position and the 5 bills that staff recommended moving from WATCH to SUPPORT, the chair then asked for a motion.

LEGISLATIVE COMMITTEE ACTION ITEM #1

Re: CPCA's 2018 Bill Package

Action Request: To approve staffs recommended positions on new bills of interest and changes in position to bills currently on CPCA's bill tracking list.

Motion Summary: A motion was made and seconded to approve all recommended bill positions from staff on both new bills of interest and changes to current bills as presented on March 23. (D. Bradshaw/V. Todd) The motion carried.

Britta Guerrero gave members an update on the 340B hearing at which she testified on Thursday, March 22.

The chair made members aware of the additional on-line committee meetings scheduled on 5/15, 6/7 and 8/7.

Adjourn

The meeting was adjourned at 11: 44 AM.

Submitted by Kelley Aldrich



DISCUSSION

Date: April 17, 2018
To: Legislative Committee
From: Beth Malinowski, Deputy Director of Government Affairs
Re: 2018 State Legislative Update

MEMORANDUM

The California Legislature is in full swing, as is our state legislative program. With the direction provided in the January Legislative Committee in-person meeting, and subsequent calls, CPCA staff, working with consultants, lobbyists, and CaliforniaHealth+ Advocates (Advocates) are working hard to strengthen California's community health centers. In the below memo, we provide an update on introduced legislation, bills of interest, capitol approach and partner engagement, and member opportunities.

Bill Package and Bill Review Process

CPCA's bill package reflects a commitment to its core policy priorities. Over the 1st quarter of 2018, CPCA staff reviewed a few hundred bills that reflect the diversity of health center interests. While many associations take a very narrow approach to their bill review, CPCA staff review bills in the following subject areas:

ACA Repeal	Immigration	Opioid
Behavioral Health	Managed Care	Pharmacy
Building Licensure	Cannabis/Prop 64	School Based Health
Clinicians	Medi-Cal	Social Determinants of
Educational Equity	Mental Health Services Act	Health (SDoH)
Fire Response	(MHSA)	Special Populations
Housing	Oral Health	Workforce

While a daunting task, staff are commitment to uncovering every bill that may have an impact on health centers and the communities they serve. With direction from this committee, staff are able to take positions and adjust positions, as bills are amended and bill dynamics evolve. Since taking positions, Advocates, on CPCA's behalf, has submitted letters of support, dialoged with authors and sponsors, and provided in-committee support, as needed.

Trying to be as strategic as possible, CPCA staff often consult with members, other partners, and consultants before determining positions. When controversial bills arise, CPCA will take extra time to hold members calls, get leadership feedback, and consider the upside (or downside) to engagement. Last year, this could be seen in our engagement with AB 1250 (Jones-Sawyer). Over a period of weeks, we met with a variety of interests and engaged all sides before determining our approach. In

doing so, we were able to preserve and build new relationships, use our political power most effectively, and most clearly communicate health center interests.

2018 Introduced Legislation

Earlier this year, CPCA, working with Advocates, successfully introduced three new bills. These bills, all features of the 2018 Advocates Day at the Capitol, include:

(1) Coverage and Access for All

- ***Declared Emergencies [Potential Advocates Sponsored Legislation]***

AB 2576 by Assembly member Cecilia Aguiar-Curry

In partnership with Redwood Community Health Coalition (RCHC), Advocates is co-sponsoring AB 2576, which is comprehensive legislation that builds on the lessons learned from the 2017 fire season. AB 2576 is critical to ensure that communities continue to receive timely access to care when disaster strikes. In particular, this bill aims to address payment for services during declared emergencies, including telephonic visits, telehealth visits, and payment for care provided at alternative locations. This bill also addresses the need for timely pharmacy access by allowing for health centers to create temporary pharmacy sites.

***Status:** Passed - Assembly Health Committee; Upcoming Hearing - Assembly Business and Professions (4/24); Amendments being considered to address Board of Pharmacy concerns.*

(2) Delivery of Culturally Competent Whole Person Health Care, Preventive Care, and Support Services

- ***Same Day Billing***

SB 1125 by Senator Toni Atkins

The integration of mental health and SUD services into comprehensive primary care settings, like FQHCs and RHCs, makes services more accessible, improves coordination of care, and supports a “whole person care” approach to serving Medi-Cal beneficiaries. Advocates is excited to be partnering with the Steinberg Institute to advance same day billing legislation. SB 1125 will allow community health centers, Federally Qualified Health Centers (FQHC) and Rural Health Centers (RHC), to bill Medi-Cal for two visits if a patient is provided mental health services on the same day they receive other medical services. With a raging opioid epidemic, a greater appreciation for the intersection of primary care and mental health services, and the need to increase access to preventive and diagnostic mental health services, Advocates is excited to be working with the Steinburg Institute on this important effort.

***Status:** Upcoming Hearing - Senate Health (4/25)*

- ***Consolidated Licensing***

AB 2428 by Assembly member Lorena Gonzalez Fletcher

This bill would build upon the prior legislation from 2016 (AB 2053, Gonzalez Fletcher) to ensure that the consolidated license process is being utilized by health centers in the most effective way. More specifically, AB 2428 amends the Welfare and Institutions code to allow for a health center that chooses to utilize the consolidated license process to have the option to share all administrative functions of the licensed facility, including Medi-Cal enrollment and PPS rate. Additionally, this bill works to ensure that all health centers have the ability to

employ the consolidated license process, regardless of any previous consolidated-license arrangement the health center had prior to the passage of AB 2053.

Status: *Passed - Assembly Health Committee; Upcoming Hearing - Assembly Appropriations (date not set)*

Additional Sponsored Legislation and Key Partner Legislation

In addition to our newly sponsored legislation, CPCA, working with Advocates, continues to prioritize engagement on the following legislative effort, all features of the 2018 Advocates Day at the Capitol:

(1) Coverage and Access for All

- ***Medi-Cal Expansion***

AB 2965 by Assembly member Joaquin Arambula and SB 974 by Senator Ricardo Lara The Health4All Act(s), remove an eligibility barrier to full-scope Medi-Cal for low-income undocumented adults. SB 974, and its companion bill in the Assembly (AB 2965), builds on the gains California has made and takes the Golden State one step closer to universal coverage. Ensuring that everyone has access to health care, regardless of their immigration status, is a key part of any strategy to reach this goal. CaliforniaHealth+ Advocates continues to participate in Health Access led statewide coalition to defend the Affordable Care Act, Medicaid, and immigrant communities.

(2) Delivery of Culturally Competent Whole Person Health Care, Preventive Care, and Support Services

- ***Coordinated Care***

SB 456 by Senator Richard Pan

Sponsored by CaliforniaHealth+ Advocates, this two-year bill seeks to improve the health of California's most vulnerable people by allowing FQHCs to be directly reimbursed for services that promote continuity of care and wellness in ways not covered by PPS, including services associated with innovative projects like the Whole Person Care pilots. While we expect that this bill will reduce overall costs to the health care system through better care coordination, addressing social determinants of health, and incentivizing wellness services that keep patients healthy and out of the emergency room, DHCS has significant concerns with the bill. With this in mind, and working closely with the author, it was determined that this bill would become a two-year bill effort to allow for greater discussion with DHCS.

Status: Staff are working on amendments to be brought to the Author in May.

- ***Intermittent Clinics***

AB 2204 by Assembly member Adam Gray

Sponsored by Central California Partnership for Health, AB 2204 seeks to improve the ability of CCHCs to provide access to high-quality healthcare to California's safety-net population by increasing the hours of operation for intermittent clinics from 30 to 40 hours a week.

Intermittent clinics have been effective tools in increasing services for hard to reach populations, and frequently have been used to provide care for homeless, rural and agricultural communities, and school-age children. Intermittent clinics have been undoubtedly effective, however there remains a need for continued growth to serve the needs of these vulnerable populations.

Hot Topic Bills of Interest

In the first year of the legislative session, a number of bills of interest to the membership received particular attention by the legislature. As the politics of the capitol shifted between 2017 and 2018, and battles over policy raged between support and opposition groups, so did the fate of some of these efforts. Of particular note, **AB 1250 (Jones-Sawyer)** and **SB 562 (Lara)** are no longer the focus of their respective author's attention and are not actively moving in the capitol.

As newly introduced legislation moves out of their first policy committees, we are seeing new bills take their place, garnering much debate and attention. In the health care arena, of particular note is **AB 3087 (Kalra)**. This California Health Care Cost, Quality, and Equity Commission bill, sponsored by health consumer groups and SEIU, is yet to have its first hearing (scheduled for 4/24).

Capital Approach and Partner Engagement

Through CaliforniaHealth+ Advocates and a highly respected contract lobbying team, health centers are able to maximize their collective voice in the capitol. With direction from health center leaders, capitol work is highly targeted. While prioritizing our sponsored bills and budget advocacy, we also use resources to support key partner legislation and engage in important dialog with sponsors and authors when members voice bill concerns, when clarity in intent is needed, or when bills must be amended.

Currently, much attention is being given to meet with authors and sponsors working on behavioral health-related legislation. With bills ranging from MHSA to behavioral health workforce, Advocates is making sure that key players appreciate the role of health centers in behavioral health delivery.

In cases where CPCA takes a "support unless amended position," particular attention is given to communicate bill concerns, and recommended amendments, directly with authors and sponsors. As we seek to strengthen partner relationships, we only submit a "support unless amended" letter to a committee when necessary, as these letters can be met with hostility from author and sponsors alike.

Member Opportunities

CPCA Government Affairs team is always seeking to improve its member legislative engagement. In addition to increased Legislative Committee calls, staff are also taking time to engage with member content experts through peer network and workgroup calls. This member expert feedback is critical to making informed decisions on bill direction. This year, we've been fortunate to have health center leaders testify on sponsored legislation, budget, and other priorities.

Date: April 16, 2018
To: Legislative Committee
From: Victor Christy, Assistant Director of Legislative Affairs
Re: Proposed 2018 Ballot Initiatives

I. Overview

As of April 9, 2018, there have been six statewide ballot propositions certified for the ballot. That specifically includes five during the June 5th Primary:

1. Proposition 68 – Issues \$4 billion in bonds for parks, environmental protection and water infrastructure
2. Proposition 69 – Requires certain tax and fee revenue related to transportation be used for transportation purposes
3. Proposition 70 – Requires a one-time two-thirds vote to use revenue from the cap-and-trade program
4. Proposition 71 – Changes the date for when voter-approved ballot measures take effect
5. Proposition 72 – Excludes rainwater capture systems from property tax assessments

And one during the November 6th General:

1. No Number assigned yet – Issues \$4 billion in bonds for housing programs and veterans' home loans

Please note that June 28, 2018 is the last day for the Secretary of State to determine and certify if the measure qualifies for the ballot. In addition, the state legislature has until August 31, 2018 to refer additional propositions.

As a reminder, In California, one needs to complete the following four steps in order to qualify an initiative for the ballot:

- STEP 1: Proponents of an initiative file their proposal with the attorney general's office, which prepares the language used on petitions for the initiative.
- STEP 2: The measure must receive the circulating title and summary, allowing proponents to begin collecting signatures. The Secretary of State assigns the initiative with a signature filing deadline.
- STEP 3: Proponents must notify the Secretary of State's office that at least 25 percent of the required signatures have been collected for the initiative.

- STEP 4: Proponents submit signatures for a ballot initiative or referendum and Secretary of State's office verifies the unduplicated signatures.

II. Ballot Initiatives of Interest

As of January 2018, Staff tracked 6 ballot measures of interest. Of those ballot measures filed, two have not qualified and thus will not appear on the ballot and four are currently going through the process of collecting signatures. Staff will continue to follow them through the qualification process and identify others that are newly filed.

1) Initiative #17-0014

The California Limits on Charges for Dialysis and Minimum Staffing of Clinics Initiative

UPDATE: Random Sample of signatures is currently in process.

- SUMMARY: The measure would establish minimum staff requirements for dialysis clinics. The minimum staffing ratios would be as follows:
 - i. one nurse to eight patients (1:8) receiving direct clinic care;
 - ii. one hemodialysis technician to three patients (1:3) receiving direct clinic care; and
 - iii. one social worker and one registered dietitian to 75 patients (1:75) per full-time equivalent schedule.

The measure would require dialysis clinics to issue annual refunds to patients or the patients' payers, such as insurers, who were charged more than 115 percent of the average cost of dialysis treatment in California and the proportional costs to improve the clinic's healthcare quality that year. Clinics that do not issue required refunds would be fined in an amount equal to 5 percent of their required refunds, but not to exceed \$100,000.

- PROPONENT: The Service Employees International Union-United Healthcare Workers (SEIU-UHW)

2) Initiative #17-0015

The California Limits on Charges for Dialysis Initiative

UPDATE: Cleared to circulate in order to gather signatures.

- SUMMARY: The measure would require dialysis clinics to issue annual refunds to patients or the patients' payers, such as insurers, who were charged more than 115 percent of the average cost of dialysis treatment in California and the proportional costs to improve the clinic's healthcare quality that year. Clinics that do not issue required refunds would be fined in an amount equal to 5 percent of their required refunds, but not to exceed \$100,000. The measure would also prohibit dialysis clinics from discriminating or refusing services based on a patient's payer, including the patient himself or herself, a private insurer, Medi-Cal, Medicaid, or Medicare.
- PROPONENT: The Service Employees International Union-United Healthcare Workers (SEIU-UHW)

3) Initiative #17-0019

The California Healthcare Trust Fund Exempt from Revenue Restrictions Initiative

UPDATE: Cleared to circulate in order to gather signatures.

- SUMMARY: The measure would create a healthcare trust fund called the *Healthy California Trust Fund* (HCTF). The HCTF would be used to fund, promote, support, and improve healthcare and healthcare-related goods, services, education, and outcomes in California. The HCTF would be independent of the General Fund.

According to the *Findings and Declaration* section of the measure, the state's constitutional fiscal rules (Proposition 4 and Proposition 98) need to be amended to make "a stable, reliable universal healthcare system," such as a single-payer system, possible. The initiative itself would not establish a single-payer or other type of healthcare system; a legislative statute or a different citizen's initiative would be required.

- PROPONENT: Enact Universal Healthcare for CA, 501(c)(4) political non-profit whose mission is to educate all Californians about universal healthcare and single-payer

4) Initiative #17-0040

The California Sanctuary State Law Veto Referendum

UPDATE: Will not be on the November Ballot.

- SUMMARY: The measure was designed to overturn the statewide sanctuary jurisdiction law, passed as Senate Bill 54 (SB 54) in 2017. SB 54, which was slated to go into effect on January 1, 2018, was designed to prohibit state law enforcement agencies from using state and local resources for the purposes of reporting, investigating, detaining, or arresting an individual to enforce federal immigration laws, unless that individual has been convicted of one of 800 crimes.
- PROPONENT: Latinos for Trump, an online organization dedicated to promoting the candidacy of Donald Trump in the 2016 presidential election

5) Initiative #17-0047

The California Tax on Incomes Exceeding \$1 Million for Hospitals, Health Clinics, and Workforce Training Initiative

UPDATE: Cleared to circulate in order to gather signatures.

- SUMMARY: The measure would enact a 1 percent tax on income in excess of \$1 million and distribute revenue from the tax as follows:
 - i. 70 percent to the Safety Net Hospital Fund, which would be used to support *Safety-Net Hospitals*. The initiative would define a Safety-Net Hospital as nonprofit or local healthcare district general acute care hospitals that qualify as disproportionate share hospitals and are located in federally-designated medically underserved areas.

- ii. 25 percent to the Community Health Clinic Fund, which would be used to support *Community Health Clinics*. The initiative would define Community Health Clinics as nonprofit clinics that are in medically-underserved communities and where patients receive free care or are charged based on a sliding scale.
- iii. 5 percent to the Healthcare Workforce Training Fund, which would be used to fund workforce development and training projects for *frontline healthcare workers* in California. The initiative would define frontline healthcare workers as “workers who provide direct patient care and supporting services in healthcare facilities that provide primary, outpatient, or acute care, including practical and vocational nurses, nursing aides, medical assistants, patient care technicians, environmental services workers, mental health counselors and aides, medical equipment preparers, dietary technicians and aides, occupational therapy assistants and aides, administrative personnel, and others.”

- PROPONENT: The Service Employees International Union-United Healthcare Workers (SEIU-UHW)

6) Initiative #17-0048

The California Managed Health Insurance Premiums Initiative

UPDATE: Will not be on the November Ballot.

- SUMMARY: The measure would prohibit a managed health insurance company from increasing premiums if the company's tangible net equity is equal to or greater than five times the minimum reserve requirements set by the state.
- PROPONENT: The Service Employees International Union-United Healthcare Workers (SEIU-UHW)

III. Resources

1. Office of the Attorney General: <https://oag.ca.gov/initiatives/active-measures>
2. BALLOTPEdia: https://ballotpedia.org/California_2018_ballot_propositions

Date: April 16, 2018
To: Legislative Committee
From: Beth Malinowski, Deputy Director of Government Affairs
Re: CA FY18-19 Budget Advocacy Update

MEMORANDUM

Overall Budget Priority

Unlike CPCA's FY17-18 Budget Strategy, which equally prioritized a number of interests, the FY 18-19 Budget Strategy is far more targeted. With the Administration's focus on eliminating 340B Drug Discount Program from Medi-Cal, CPCA is too focusing its resources on 340B. With the ultimate goal of seeing this proposal rejected during budget negotiations, CPCA, as well as its partner associations, are well aware that this year's fight will require even greater attention than it did in 2017. An outright rejection, without an alternative proposal, is highly unlikely as the battle over duplicate discounts enters its second year. *Fuller details on the 340B budget strategy can be found in the Government Programs Committee 340B Memo.*

Additional Budget Interests

While 340B is the top priority, and the proposal from the Administration of greatest impact to health centers, a variety of additional budget items and stakeholder proposals are also being monitored closely by staff, strategists, and lobbyists. Of particular note, we continue to be a part of the coalition of organizations fighting to expand comprehensive full-scope Medi-Cal to all income-eligible adults. In addition to AB 2965 (Arambula), and SB 974 (Lara), the multipronged Health Access and California Immigrant Policy Center (CIPC) led strategy to expand Medi-Cal by removing immigration status as an eligibility exclusion includes a budget augmentation request.

The following budget items are a priority for health centers partners, and have potential impacts on health centers and the communities we serve. For this reason, as requested by partners or electeds, CPCA is providing support to the following items:

- Continuation of \$100 Million Primary Care Residency Funding
- Two Year No Cost Extension for CTAP
- Proposition 56 Oral Health Plan
- Proposition 56 Residency Funding
- Lactation Support
- UCD Train the Trainer (THT) Program

Budget Strategy

Targeted budget advocacy is being focused on key members of the Budget Committee and their staff. Between 2017 and 2018 there has been tremendous stability in the budget subcommittees of

greatest interest to us, both at the elected and staff level. This has allowed us to build on relationships from prior years for our advocacy purposes. Broadly speaking, advocacy is happening through individual meetings with key members of the legislature, their staff, or committee staff. In particular, with all of our items being heard in the Health & Human Services Subcommittees (Sub 1 in the Assembly and Sub 3 in the Senate) we are giving particular attention to educating those members and staff that can impact our priorities early in the process. Senate and Assembly leadership also plays a key role in final negotiations, and meetings with their offices is also being prioritized. Here is a full list of our targets:

Senate

Senator Atkins, Pro Tem (SD 39)

Senator Mitchell, Chair, Budget & Fiscal Review (SD 30)

Senator Pan, Chair, Subcommittee 3 on Health and Human Services (SD 6)

Members of Senate Subcommittee 3 on Health and Human Services (Sub 3):

Senator Monning (SD 17)

Senator Stone (SD 28)

Assembly

Assemblymember Rendon; Speaker (AD 76)

Assemblymember Ting, Chair, Budget (AD 19)

Assemblymember Arambula, Chair, Subcommittee 1 on Health and Human Services (AD 31)

Members of Assembly Subcommittee 1 on Health and Human Services (Sub 1):

Assemblymember Harper (AD 74)

Assemblymember Mathis (AD 26)

Assemblymember Rubio (AD 48)

Assemblymember Wood (AD 02)

Assemblymember Ting, alternate (AD 19)

Assemblymember Obernolte, alternate (AD 33)

In cases where our advocacy efforts are building on prior 2017-18 legislative priorities, we are also engaging our prior legislative champions.

Working with Partners

We are fortunate that we are not alone in our vision for California's health care delivery system. CaliforniaHealth+ Advocates is working with a full range of associations and groups from health system associations and professional associations to consumer groups. Among our current partners are:

- California Hospital Association
- California Public Hospital and Health System Association
- California Academy of Family Physicians
- Planned Parenthood Affiliates of California
- California Pan Ethnic Health Network
- California Dental Association
- California Immigrant Policy Center
- Health Access

Resources

- [Navigating the State Budget Process](#) (California Budget and Policy Center Resource)
- [Tobacco Tax Initiative Funding For the State Oral Health Plan](#) – Coalition Sign-On Letter
- [Support Letter for CMA Proposal on Enhanced Federal Matching Funds for HIE](#)

**California Health Center Vision and Principles
for the Future of a Health Care System**

March 6, 2018

- I. **Health care is a human right that** optimally helps to ensure a state of wellness through a focus on prevention and the delivery of comprehensive primary care services inclusive of the mind, mouth, body and soul, as well as acute services, interwoven and connected to the social and economic influences in a person's life.

- II. **A health care system should...**
 1. Treat all people equitably and with dignity.
 2. Respect all people regardless of age, sex, gender, race, disabilities, language preferences, cultural heritage, sexual orientation, religion, immigration status, or ability to pay.
 3. Reflect the decisions and desires of patients and communities.
 4. Put the patient first and integrate the providers and services around the individual needs to ensure holistic care.
 5. Aim to produce equal outcomes for all people.

- III. **Principles for a future, patient-centered health care system**
 1. Coverage should be universal, include a core set of benefits for all people, and be affordable at all income levels.
 2. Governance of the system should be community and consumer informed and influenced.
 3. Delivery of care should be integrated across private and public providers and services, and be inclusive of primary, behavioral health, oral health, specialty, hospital, and end-of-life care.
 4. Delivery of care should include a structure to organize services, coordination, and payments that facilitates collaboration for economies of scale.
 5. The health care infrastructure should be based upon and continuously improved with quality data helping to connect the organizers and providers to optimally deliver patient centered care.
 6. Access to care should be convenient and timely for the patient, and delivered in the most efficient manner.
 7. Value should be derived from a combination of cost, health care quality, patient outcomes and satisfaction.
 8. Providers of health care and services should be financially compensated commensurate to the value they afford the larger system in a sustainable and predictable manner.
 9. The community health center model of care (e.g. open door access, comprehensive services, located where the patient is, culturally competent, consumer directed) should be a central model for primary health care delivery available to all people.

Date: April 13, 2018
To: Legislative Committee
From: Janalynn Castillo, Advocacy Coordinator
Re: Advocacy Update

MEMORANDUM

I. Background

Below is a comprehensive update on our state and federal advocacy that took place in the first quarter of the year. California's community health centers continue to strengthen their advocacy force through the enacted advocacy infrastructure. Thank you for your continued engagement, our success reflected in the updates below could not happen without you.

II. Updates

▪ **Health Center Funding Cliff**

After months of consistent advocacy, on Friday, February 9th, Congress voted to extend health center funding – fixing the health center funding cliff for two years. This was a major victory for community health centers across the country. Our member's strength and commitment to advocacy was the driving factor for our collective victory. Below are a few highlights from California's funding cliff advocacy efforts from September 2017 through February 2018 through NACHC's Phone2Action platform:

- Calls through NACHC Grassroots Hotline = 2,881
- Total emails sent to Congress = 18,764
- Total Tweets sent to Congress = 788
- Total Facebook Posts = 239
- Petition signatures sent to Congress = 3,000

▪ **State Advocacy**

With the state legislature in full swing – advocacy is now transitioning from federal to state affairs. 2018 state advocacy is focused on supporting sponsored bills, key partner legislation, and addressing state budget concerns and opportunities.

This April, all of CPCA's advocacy affiliate CaliforniaHealth+ Advocates' sponsored legislation will be heard in their first policy committee. We would like to thank you for your timely responses and engagement to letter of support (LOS) requests. Letters of support continue to be an effective tool in our advocacy because they establish an official record and show our statewide strength. It is important to recognize that letters of support must be updated as the bills move through the legislative process. Advocates' will continue to send weekly advocacy alert email communications requesting updated letters of support and additional ways to participate in state

advocacy to support our 2018 policy priorities. Below are the total number of health centers we have on record supporting our 2018 bills:

- AB 2576 (Aguiar Curry): 33
- AB 2428 (Gonzalez Fletcher): 35
- SB 1125 (Atkins): LOS is due 4/17. As of 4.13, we have 24

Budget advocacy continues to also be a priority in 2018. With a focus on defending and educating on the 340B program. Advocates is working with a strong coalition of covered entity-affiliated associations and other partners to send a strong message. As part of this work, Advocates led the drafting and submission of a coalition letter of opposition that included 30 partners, ranging from counties to health system and consumer advocates. Additionally, health centers stepped up to submit letters opposing the budget proposal. In advance of the March 22nd hearing, 55 health center letters were submitted.

■ Voter Engagement

During election years, CPCA alongside the consortia, aim to engage health centers in coordinated voter engagement campaigns. In March, we collected feedback from NACHC, CPCA membership, and Public Affairs Peer Network regarding a statewide coordinated voter engagement campaign. The member discussions has identified a theme regarding the importance of identifying state or national coalition partners CPCA can collaborate with to provide resources, outreach materials, and messaging. In addition, coalition partners we identify should include traditional and non-traditional partners. Expanding our partnerships is important for reaching non-traditional audiences and increase public support of community health centers. With NACHC's help, CPCA will be reaching out to state and federal coalition partners and provide information on our progress in the next couple of months. Below are voter engagement activities membership has identified as priority:

- Voter education materials printed and online
- Messaging for social media
- Posters and printed outreach materials
- Incentives to offer health centers for participating in voter engagement activities
- Series of webinars focused on voter engagement, voter registration, c3 and c4 rules for advocacy, and best practices.

III. Important Dates / Events

Below are upcoming opportunities to strengthen our federal and statewide advocacy efforts:

■ **Voter Engagement: National Voter Registration Day is September 25, 2018**

Health centers have a long history of supporting voter registration activities. During elections years, CPCA alongside the consortia, aim to engage health centers in coordinated voter engagement campaigns. In the summer of 2018, CaliforniaHealth+ Advocates will provide a new resource webpage which will provide updates and resources for your continuous engagement in voter registration. Stay tuned for more information in the upcoming months.

- **National Health Center Week : August 12-18, 2018**

This year's theme is, Celebrating Health Centers: Home of America's Health Care Heroes. Stay tuned for tools and resources to support your NHCW 2018 activities. Save the date for the #NHCW18 kick-off webinar on Wednesday, May 16 at 3pm (EST). RSVP here http://www.hcadvocacy.org/nhcw_2018 .

Date: April 10, 2018

To: Legislative Committee

From: Andrea Chavez, Senior Program Coordinator of Public Affairs & Kearsten Shepherd, Deputy
Director of Communications & Marketing

Re: Member Communications

MEMORANDUM

In order to comply with C (4) lobbying regulations, CaliforniaHealth+ Advocates and CPCA must have their own, distinctive communications channels.

In the past year, both organizations have launched new websites and Advocates has launched its own weekly update, newsletter, and annual report.

Outlined below are the communications channels from both organizations and the content you can find on each channel:

California Primary Care Association

- Website: www.cPCA.org
 - The CPCA website contains health center resources, CPCA Board & Committee materials, information on trainings and events, as well as access to peer networks and taskforces.
- Weekly update: To subscribe, email Jodi Johnson at jjohnson@cPCA.org.
 - CPCA Weekly Update contains, CPCA-specific updates, information on grants, trainings and webinars, as well as updates on existing policies that impact health centers and patients.
- Newsletter: www.accesscPCA.org
 - CPCA's Access Newsletter has gone digital! Check out the Access Newsletter to find information on what CPCA and its members are doing throughout the year.
- Annual Report: www.cPCA.org/AnnualReport
 - The CPCA Annual Report provides a compilation of CPCA activities, events, and a financial overview from the past year.
- Social Media:
 - CPCA's social channels post member-specific information/highlights and related events.
 - Twitter: [@CPCA](https://twitter.com/CPCA)
 - Facebook: <https://www.facebook.com/CaliforniaPrimaryCareAssociation/>

CaliforniaHealth+ Advocates

- Website: www.healthplusadvocates.org
 - Advocates' website contains information on state and federal legislation and policies, advocacy campaigns, and advocacy related events (such as Day at the Capitol).
- Advocacy Alerts & Informational Updates: To subscribe, email jana@healthplusadvocates.org
 - Advocates will send Advocacy alerts as needed which will include timely advocacy activities for health centers and partners to participate in. Advocates will also send informational updates, such as analyses or summaries, on federal or state legislation that impacts health centers or patients.
- Weekly Update: To subscribe, email Kelley Aldrich at kelley@healthplusadvocates.org.
 - Advocates Weekly Update contains state and federal legislative and policy updates, information on advocacy campaigns, and updates on CaliforniaHealth+ Advocates work.
- Newsletter: www.theadvocatenews.org
 - Three times per year, Advocates will send a newsletter highlighting the work over the past few months.
- Annual Report: www.healthplusadvocates.org/AboutUs
 - Compilation of Advocates activities, events and financial report from the past year.
- Social Media
 - Advocates social channels post updates and information on policy/legislation, as well as information on related events.
 - Twitter: [@HealthPlusAdv](https://twitter.com/HealthPlusAdv)
 - Facebook: <https://www.facebook.com/healthplusadvocates/>