## AMENDED IN SENATE APRIL 26, 2016 AMENDED IN SENATE APRIL 13, 2016 AMENDED IN SENATE MARCH 28, 2016

SENATE BILL

No. 1418

## **Introduced by Senator Lara**

February 19, 2016

An act to amend Section 1288 of, and to repeal and add Section 1246.5 of, the Business and Professions Code, relating to clinical laboratories. An act to add Section 14102.1 to the Welfare and Institutions Code, relating to Medi-Cal, and declaring the urgency thereof, to take effect immediately.

## LEGISLATIVE COUNSEL'S DIGEST

SB 1418, as amended, Lara. Clinical laboratory testing. Medi-Cal: immigration status.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, 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. The federal Medicaid program provisions prohibit payment to a state for medical assistance furnished to an alien who is not lawfully admitted for permanent residence or otherwise permanently residing in the United States under color of law.

This bill would extend eligibility for full-scope Medi-Cal benefits to individuals 19 years of age and older who are otherwise eligible for those benefits but for their immigration status if the department determines that sufficient funding is available, or for limited scope Medi-Cal benefits if funding for full-scope benefits is not available. The

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bill would require these individuals to enroll into Medi-Cal managed care health plans, and to pay copayments and premium contributions, to the extent required of otherwise eligible Medi-Cal recipients who are similarly situated. The bill would require that benefits for those services to be provided with state-only funds only if federal financial participation is not available. Because counties are required to make Medi-Cal eligibility determinations and this bill would expand Medi-Cal eligibility, the bill would impose a state-mandated local program.

The bill would require the department to adopt regulations by July 1, 2018, and, commencing July 1, 2016, would require the department to provide a status report to the Legislature on a semiannual basis until regulations have been adopted.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to these statutory provisions.

This bill would declare that it is to take effect immediately as an urgency statute.

Existing law provides for the regulation and licensure of clinical laboratories and clinical laboratory personnel by the State Department of Public Health and makes a violation of a provision under this law a misdemeanor. Existing law authorizes a person to request, and a licensed clinical laboratory or public health laboratory to perform specified clinical laboratory tests, including pregnancy, glucose level, cholesterol, and occult blood tests. Existing law authorizes a registered clinical laboratory to perform these tests if the test is subject to a certificate of waiver under the Clinical Laboratory Improvement Amendments of 1988 and the laboratory has registered with the State Department of Public Health.

Existing law authorizes the results of the test to be provided directly to the person requesting the test if the test is on or for his or her own body. Existing law requires that those test results be provided in a manner that presents clear information and that identifies results indicating the need for referral to a physician.

This bill would repeal those provisions and instead allow a person to request, and a licensed clinical laboratory or public health laboratory

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to perform, any laboratory test that the laboratory offers to the public on a direct access basis without a healing arts licensee's order. If a laboratory test is conducted without an order from a healing arts licensee, the bill would require any report of the test results to be provided to the person who was the subject of the test. The bill would require the report to state in bold type that it is the responsibility of the person who was tested to arrange with his or her health care provider for consultation and interpretation of the test results. The bill would make additional conforming changes. By changing the definition of an existing crime, this bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority <sup>2</sup>/<sub>3</sub>. Appropriation: no. Fiscal committee: yes. State-mandated local program: yes.

The people of the State of California do enact as follows:

- 1 SECTION 1. (a) The Legislature finds and declares all of the 2 following:
- 3 (1) The Legislature and the Governor, through the enactment 4 of the Budget Act of 2015 (Chapter 11 of the Statutes of 2015),
- expanded Medi-Cal eligibility for children to ensure that no child
  in California who is income eligible will be denied access to health
  care coverage on the basis of immigration status.

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- (2) Expanding access and increasing enrollment in comprehensive health care coverage is of benefit to the health and welfare of all Californians.
- (3) Longstanding California law provides full-scope Medi-Cal benefits to United States citizens, lawful permanent residents, and individuals permanently residing in the United States under color of law, including those granted deferred action.
- 15 (b) It is the intent of the Legislature in enacting this act to 16 increase opportunities for enrollment in comprehensive health 17 care coverage for adults, regardless of immigration status.
- 18 SEC. 2. Section 14102.1 is added to the Welfare and Institutions 19 Code, to read:

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14102.1. (a) (1) Notwithstanding any other law, an individual 19 years of age or older who meets all of the eligibility requirements for full-scope Medi-Cal benefits under this chapter, but for his or her immigration status, may be enrolled for full-scope Medi-Cal benefits, pursuant to paragraph (2).

- (2) When a county completes the Medi-Cal eligibility determination process for an individual 19 years of age or older who meets all of the eligibility requirements for full-scope Medi-Cal benefits under this chapter, but for his or her immigration status, the county shall transmit this information to the department to determine if sufficient funding is available for this individual to receive full-scope Medi-Cal benefits. If sufficient funding is available, the individual shall be eligible for full-scope benefits. If sufficient funding is not available, the individual shall be eligible for limited scope Medi-Cal benefits.
- (b) This section shall not apply to individuals eligible for coverage pursuant to Section 14102.
- (c) An individual who is eligible for coverage under subdivision (a) shall be required to enroll into Medi-Cal managed care health plans to the extent required of otherwise eligible Medi-Cal recipients who are similarly situated.
- (d) An individual who is eligible for coverage under subdivision (a) shall pay copayments and premium contributions to the extent required of otherwise eligible Medi-Cal recipients who are similarly situated.
- (e) Benefits for services under this section shall be provided with state-only funds only if federal financial participation is not available for those services. The department shall maximize federal financial participation in implementing this section to the extent allowable.
- (f) Eligibility for full-scope Medi-Cal benefits for an individual 19 years of age or older pursuant to subdivision (a) shall not be an entitlement. The department shall have the authority to determine eligibility, determine the number of individuals who may be enrolled, establish limits on the number enrolled, and establish processes for waiting lists needed to maintain program expenditures within available funds.
- (g) Notwithstanding Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, the department, without taking any further regulatory action, shall

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implement, interpret, or make specific this section by means of all-county letters, plan letters, plan or provider bulletins, or similar instructions until the time regulations are adopted. The department shall adopt regulations by July 1, 2018, in accordance with the requirements of Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code. Commencing July 1, 2016, the department shall provide a status report to the Legislature on a semiannual basis, in compliance with Section 9795 of the Government Code, until regulations have been adopted.

SEC. 3. If the Commission on State Mandates determines that this act contains costs mandated by the state, reimbursement to local agencies and school districts for those costs shall be made pursuant to Part 7 (commencing with Section 17500) of Division 4 of Title 2 of the Government Code.

SEC. 4. This act is an urgency statute necessary for the immediate preservation of the public peace, health, or safety within the meaning of Article IV of the Constitution and shall go into immediate effect. The facts constituting the necessity are:

In order to expand access to health care coverage to every Californian as quickly as possible, it is necessary that this act go into immediate effect.

SECTION 1. Section 1246.5 of the Business and Professions Code is repealed.

- SEC. 2. Section 1246.5 is added to the Business and Professions Code, to read:
- 1246.5. (a) Notwithstanding any other law, a person may request, and a licensed clinical laboratory or public health laboratory may perform, any laboratory test that the laboratory offers to the public without an order from a healing arts licensee or his or her representative.
- (b) If a laboratory test of a person is conducted without an order from a healing arts licensee or his or her representative, the test results shall be provided to the person who was the subject of the test. The test results report shall state in bold type that it is the responsibility of the person who was tested to arrange with his or her health care provider for consultation and interpretation of the test results.
- (c) A healing arts licensee is not required to review or act on a
  laboratory test result if the healing arts licensee or his or her

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representative did not order the laboratory test. A healing arts licensee is not subject to liability or disciplinary actions for failure to review or act on the results of a laboratory test of any person if the healing arts licensee or his or her representative did not order the laboratory test.

- (d) This section does not require that any laboratory test be covered by a health care service plan contract or health insurance policy.
- SEC. 3. Section 1288 of the Business and Professions Code is amended to read:
- 1288. A report of results issuing from a clinical laboratory shall show clearly the name and address of the laboratory and the name of the director.
- SEC. 4. No reimbursement is required by this act pursuant to Section 6 of Article XIIIB of the California Constitution because the only costs that may be incurred by a local agency or school district will be incurred because this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty for a crime or infraction, within the meaning of Section 17556 of the Government Code, or changes the definition of a crime within the meaning of Section 6 of Article XIIIB of the California