AMENDED IN SENATE JULY 15, 2010

AMENDED IN SENATE JUNE 10, 2010

CALIFORNIA LEGISLATURE—2009–10 REGULAR SESSION

ASSEMBLY BILL No. 2248

Introduced by Assembly Member Hernandez

February 18, 2010

An act to amend Section 1797.98b of the Health and Safety Code, relating to emergency medical care.

LEGISLATIVE COUNSEL'S DIGEST

AB 2248, as amended, Hernandez. Emergency medical care.

Existing law authorizes a county to establish an emergency medical services fund for reimbursement of emergency medical services (EMS) related costs, and requires an annual report to the Legislature on the implementation and status of the fund, including the fund balance and the amount of moneys disbursed to physicians and surgeons, for hospitals, and for other emergency medical services purposes.

This bill would require the report to provide additional information regarding the moneys collected and disbursed, including a description of the other medical services purposes, *and the total amount of allowable claims, if the moneys are disbursed to hospitals on a claims basis*. By increasing the duties of local officials, 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, 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.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: yes.

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

SECTION 1. Section 1797.98b of the Health and Safety Code is amended to read:

1797.98b. (a) Each county establishing a fund, on January 1, 1989, and on each April 15 thereafter, shall report to the Legislature on the implementation and status of the Emergency Medical Services Fund. The report shall cover the preceding fiscal year, and shall include, but not be limited to, all of the following:

(1) The total amount of fines and forfeitures collected, the total amount of penalty assessments collected, and the total amount of penalty assessments deposited into the Emergency Medical Services Fund, or, if no moneys were deposited into the fund, the reason or reasons for the lack of deposits. The total amounts of penalty assessments shall be listed on the basis of each statute that provides the authority for the penalty assessment, including Section 1797.98a, Sections 76000, 76000.5, and 76104 of the Government Code, and Section 42007 of the Vehicle Code.

(2) The fund balance and the amount of moneys disbursed under the program to physicians and surgeons, for hospitals, and for other emergency medical services purposes. If funds were disbursed for other emergency medical services, the report shall provide a description of each of these ~~purposes~~ *services*.

(3) The number of claims paid to physicians and surgeons, and the percentage of claims paid, based on the uniform fee schedule, as adopted by the county.

(4) The amount of moneys available to be disbursed to physicians and surgeons, descriptions of the physician and surgeon claims payment methodologies, the dollar amount of the total allowable claims submitted, and the percentage at which those claims were reimbursed.

(5) A statement of the policies, procedures, and regulatory action taken to implement and run the program under this chapter.

(6) The name of the physician and surgeon and hospital administrator organization, or names of specific physicians and

surgeons and hospital administrators, contacted to review claims payment methodologies.

~~(7) A description of the process used for obtaining input from physicians and surgeons and hospitals to create the payment methadology. (8) An Identification~~

(7) A description of the process used for obtaining input from physicians and surgeons and hospitals to create the payment methodology.

(8) An identification of the fee schedule used by the county pursuant to subdivision (e) of Section 1797.98c.

~~(8)~~

(9) (A) A description of the methodology used to disburse moneys to hospitals per subparagraph (B) of paragraph (5) of subdivision (b) of Section 1797.98a.

(B) The amount of moneys available to be disbursed to hospitals.

(C) If moneys are disbursed to hospitals on a claim basis, the dollar amount of the total allowable claims submitted and the percentage at which those claims were reimbursed to hospitals.

(b) (1) Each county, upon request, shall make available to any member of the public the report required under subdivision (a).

(2) Each county, upon request, shall make available to any member of the public a listing of physicians and surgeons and hospitals that have received reimbursement from the Emergency Medical Services Fund and the amount of the reimbursement they have received. This listing shall be compiled on a semiannual basis.

SEC. 2. 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.

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