



CALIFORNIA ADVOCATES, INC.
 925 L Street, Suite 1250
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CAJPA
All Positioned Measures
As of July 16, 2010

AB 155 **(Mendoza) Local government: bankruptcy proceedings.** (A-06/01/2010 [html](#) [pdf](#))
Status: 06/14/2010-To inactive file on motion of Senator DeSaulnier.
Current Location: 06/14/2010-S INACTIVE FILE

Summary: Under existing law, any taxing agency or instrumentality of the state may file a petition and prosecute to completion bankruptcy proceedings permitted under the laws of the United States. This bill would provide that a local public entity may only file under federal bankruptcy law with the approval of the California Debt and Investment Advisory Commission, except as specified.

[AB 155 Author/SenLocGov - CAJPA Oppose 4-15-10](#)

[AB 155 SenFloor CAJPA Oppose 5-28-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|----------|-----------|
| cajpa JULI | Oppose | AA | JPA |

Notes: CAJPA believes AB 155 places unnecessary conditions on how and when a municipality may seek relief under federal bankruptcy law by granting a state office the authority to allow or disallow a municipality the right to file a Chapter 9 bankruptcy petition.

AB 193 **(Committee on Budget) Taxation.** (A-06/26/2009 [html](#) [pdf](#))

Status: 03/23/2010-Read second time. To third reading.

Current Location: 03/23/2010-S THIRD READING

Calendar Events: 08/02/10 57 SEN ASSEMBLY BILLS-THIRD READING FILE

Summary: The Personal Income Tax Law and the Corporation Tax Law impose taxes on, or measured by, income. Existing law allows a tax return or return information filed under those laws to be disclosed in a judicial or administrative proceeding pertaining to tax administration under certain circumstances. Existing law requires every board, as defined under the Business and Professions Code, and the Department of Insurance to, upon request of the Franchise Tax Board, furnish to the Franchise Tax Board certain information with respect to every licensee. This bill would require a state governmental licensing entity, as defined, issuing professional or occupational licenses, certificates, registrations, or permits to provide to the Franchise Tax Board the name and social security number or federal taxpayer identification number of each individual licensee of that entity. The bill would require the Franchise Tax Board, if an individual licensee fails to pay taxes for which a notice of state tax lien has been recorded, as specified, to send a notice of suspension to the licensee. The bill would provide that the license of a licensee who fails to satisfy the unpaid taxes by a certain date shall be automatically suspended, except as specified, and would require the Franchise Tax Board to mail a notice of suspension to the applicable state governmental licensing entity and to the licensee, and would provide that the suspension be canceled upon compliance with the tax obligation. The bill would require the Franchise Tax Board to meet certain requirements and would make related changes. The bill would make implementation of its provisions contingent upon appropriation of funds for that purpose in

the annual Budget Act. This bill contains other related provisions and other existing laws.

| OrganizationAssigned | Position | Priority | GroupName |
|-----------------------------|-----------------|-----------------|------------------|
| cajpa JULI | Oppose | AA | JPA |

Notes: Budget bill containing onerous new mandate that requires all employers to remit 3% of all payments made to independent contractors to the FTB on an on-going basis.

AB 482

(Mendoza) Employment: credit reports. (A-04/08/2010 [html](#) [pdf](#))

Status: 07/15/2010-From committee: Amend, do pass as amended, and re-refer to Com. on APPR. (Ayes 3. Noes 1.) (June 29). Read second time and amended. Re-referred to Com. on APPR.

Current Location: 07/15/2010-S APPR.

Calendar Events: 08/02/10 10 a.m. - John L. Burton Hearing Room (4203) SEN APPROPRIATIONS

Summary: The federal Fair Credit Reporting Act (FCRA) and the state Consumer Credit Reporting Agencies Act define and regulate consumer credit reports and authorize the use of consumer credit reports for employment purposes, pursuant to specified requirements. The FCRA provides that it does not preempt state law, except as specifically provided or to the extent that state laws are inconsistent with its provisions. This bill would prohibit an employer, with the exception of certain financial institutions, from obtaining a consumer credit report for employment purposes unless the information is (1) substantially job-related, meaning that the position of the person for whom the report is sought has access to money, other assets, or confidential information, and (2) the position of the person for whom the report is sought is a position in the state Department of Justice, a managerial position, that of a sworn peace officer or other law enforcement position, or a position for which the information contained in the report is required to be disclosed by law or to be obtained by the employer. This bill contains other existing laws.

[AB 482 Author/SenLabor&IR CAJPA OpposeUnlAmd 6-1-10](#)

[AB 482 SenJud CAJPA OpUnlAmd 6-11-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|-----------------------------|-----------------------|-----------------|------------------|
| cajpa JULI | Oppose_unless_AmendAA | | TL |

Notes: AB 482 will subject all employers to unnecessary litigation by prohibiting an employer from using credit report information, for employment purposes, unless substantially job-related.

AB 591

(De La Torre) Individual health care coverage: premium rates. (A-07/15/2010 [html](#) [pdf](#))

Status: 07/15/2010-From committee: Amend, do pass as amended, and re-refer to Com. on APPR. (Ayes 5. Noes 2.) (June 30). Read second time and amended. Re-referred to Com. on APPR.

Current Location: 07/15/2010-S APPR.

Calendar Events: 08/02/10 10 a.m. - John L. Burton Hearing Room (4203) SEN APPROPRIATIONS

Summary: Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care and makes a willful violation of the act a crime. Existing law also provides for the regulation of health insurers by the Department of Insurance. Under existing law, no change in premium rates or coverage in a health care service plan contract or health

insurance policy may become effective without written prior notification of the change to the contractholder or policyholder. Existing law prohibits a plan or insurer during the term of a group contract or policy from changing the rate of the premium, copayment, coinsurance, or deductible during specified time periods. This bill would prohibit a health care service plan or health insurer from increasing the premium rate it charges a subscriber or policyholder of an individual contract or policy for a period of 90 days beginning with the date this provision becomes operative. Thereafter, this provision would become inoperative and the bill would prohibit a plan or insurer from increasing premium rates for individual contracts or policies by more than the average percentage increase in the medical care component of the consumer price index for the immediately preceding calendar year, as calculated by the United States Bureau of Labor Statistics . The bill would require any plan or insurer filing with the Department of Managed Health Care or the Department of Insurance containing a proposed premium rate increase for an individual contract or policy to comply with all other state and federal laws. The bill would also prohibit a plan or insurer from increasing the premium rate it charges a subscriber or policyholder of an individual contract or policy during the 12 months following the last premium rate increase. The bill would authorize the Department of Managed Health Care and the Department of Insurance to adopt regulations implementing these provisions , as specified . This bill contains other related provisions and other existing laws.

| OrganizationAssigned | Position | Priority | GroupName |
|-----------------------------|-----------------|-----------------|------------------|
| cajpa | JULI | Oppose | AA |
| | | | HC |

Notes: This bill would prohibit a health care service plan or health insurer from increasing the premium rate it charges a subscriber or policyholder by more than the average percentage increase in the medical care component of the consumer price index for the immediately preceding calendar year, among other provisions.

AB 846

(Torrico) State agencies: civil and administrative penalties. (A-06/30/2010 [html](#) [pdf](#))
Status: 06/30/2010-From committee chair, with author's amendments: Amend, and re-refer to committee. Read second time, amended, and re-referred to Com. on G.O.
Current Location: 06/30/2010-S G.O.

Summary: The Administrative Procedure Act contains provisions governing the conduct of administrative adjudication for state agencies. This bill would require the Director of Pesticide Regulation, the Department of Toxic Substances Control, the Department of Industrial Relations, the State Air Resources Board, and the State Water Resources Control Board to update the maximum and minimum amounts of specified civil and administrative penalties for inflation or deflation using the Consumer Price Index, as provided. The bill would require the updated penalties to be filed with the Secretary of State and published in the California Code of Regulations.

[AB 846 SenGovOrg Coalition/CAJPA Oppose 6-16-10](#)
[AB 846 SenGovOrg Coalition/CAJPA Oppose 6-28-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|-----------------------------|-----------------|-----------------|------------------|
| cajpa | JULI | Oppose | AA |
| | | | JPA |

Notes: Increases the financial liability of public agency by establishing a new automatic mechanism to increase fines levied by a variety of state agencies, including the Department of Industrial Relations. CAJPA is participating in the CalChamber"s employer coalition in opposition to AB 846.

AB 874

(Saldana) Recreational activities: skateboarding. (A-04/21/2009 [html](#) [pdf](#))

Status: 07/02/2010-Failed Deadline pursuant to Rule 61(b)(13). (Last location was JUD. on 5/14/2009)

Current Location: 07/02/2010-S DEAD

Summary: Existing law prohibits an operator of a skateboard park from permitting any person to ride a skateboard in the park unless that person is wearing a helmet, elbow pads, and knee pads. Existing law further describes how those requirements may be satisfied with respect to a recreational skateboard facility owned or operated by a local agency, as specified. Existing law also requires local public agencies to maintain a record of all known or reported injuries incurred by skateboarders in a public skateboard park or facility, and other information regarding these incidents, as specified, and requires that copies of those records be filed annually with the Judicial Council, which is required to submit a report to the Legislature by March 31, 2011, on these incidents, including claims arising therefrom. This bill would remove the requirement that any person riding a skateboard in the park must wear elbow pads and knee pads. This bill would also remove the requirement that local public agencies maintain and file records regarding skateboard injuries and delete the requirement that the Judicial Council submit a report to the Legislature on these incidents.

[AB 874 Ltr. Author - Oppose - 4-30-09](#)

[AB 874 SenJud CAJPA Oppose 6-25-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|-----------------------------|-----------------|-----------------|------------------|
| cajpa | JULI | Oppose | AA |
| | | | TL |
| | | | LC |

Notes: AB 874 will increase public entity liability by removing the requirement that skateboard park users wear elbow and kneepads. AB 874 also sunsets the qualified immunity granted public skateboard parks on January 1, 2012. Such changes will significantly increase the likelihood of injuries due to the reduced protection worn by the skateboarders. Increased injuries will lead to new litigation and new liability for public entities that operate skateboard parks.

[AB 933](#)

(Fong) Workers' compensation: medical treatment. (A-06/14/2010 [html](#) [pdf](#))

Status: 06/24/2010-From committee: Do pass, and re-refer to Com. on APPR. Re-referred. (Ayes 4. Noes 1.) (June 23).

Current Location: 06/24/2010-S APPR.

Calendar Events: 08/02/10 10 a.m. - John L. Burton Hearing Room (4203) SEN APPROPRIATIONS

Summary: Existing workers' compensation law generally requires employers to secure the payment of workers' compensation, including medical treatment, for injuries incurred by their employees that arise out of, or in the course of, employment. This bill would require the psychologist to be licensed by California state law. This bill contains other related provisions and other existing laws.

[AB 933 Ltr. AsmIns Coalition/CAJPA - Oppose - 4-9-09](#)

[AB 933 Ltr. SenLabor Coalition/CAJPA - Oppose - 6/12/09](#)

[AB 933 SenLabor Coalition/CAJPA Oppose 6-16-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|-----------------------------|-----------------|-----------------|------------------|
| cajpa | JULI | Oppose | AA |
| | | | WC |

Notes: Remain on coalition letter (as amended 6-14-10).

[AB 1600](#)

(Beall) Health care coverage: mental health services. (I-01/04/2010 [html](#) [pdf](#))

Status: 07/15/2010-From committee: Do pass. (Ayes 6. Noes 2.) (July 15).

Current Location: 06/24/2010-S APPR.

Summary: Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care and makes a willful violation of the act a crime. Existing law also provides for the regulation of health insurers by the Department of Insurance. Under existing law, a health care service plan contract and a health insurance policy are required to provide coverage for the diagnosis and treatment of severe mental illnesses of a person of any age. Existing law does not define "severe mental illnesses" for this purpose but describes it as including several conditions. This bill would expand this coverage requirement for certain health care service plan contracts and health insurance policies issued, amended, or renewed on or after January 1, 2011, to include the diagnosis and treatment of a mental illness of a person of any age and would define mental illness for this purpose as a mental disorder defined in the Diagnostic and Statistical Manual IV, subject to regulatory revision, as specified. The bill would specify that this requirement does not apply to a health care benefit plan, contract, or health insurance policy with the Board of Administration of the Public Employees' Retirement System unless the board elects to purchase a plan, contract, or policy that provides mental health coverage. This bill contains other related provisions and other existing laws.

[AB 1600 Author/AsmHealth - CAJPA Oppose 3-24-10](#)

[AB 1600 AsmApprops - CAJPA Oppose 4-19-10](#)

[AB 1600 SenHealth CAJPA Oppose 6-15-10](#)

[AB 1600 SenApprops CAJPA Oppose 7-8-10](#)

| OrganizationAssigned | Position | Priority | Subject | GroupName |
|----------------------|----------|----------|---------|----------------|
| cajpa | JULI | Oppose | AA | Health Care HC |

Notes: AB 1600 disadvantages public and private employers offering health care coverage in California through broad, new mental health coverage mandates.

[AB 1603](#) (Solorio) **Workers' compensation: temporary partial disability.** (I-01/05/2010 [html pdf](#))

Status: 05/07/2010-Failed Deadline pursuant to Rule 61(b)(6). (Last location was INS. on 1/14/2010)

Current Location: 05/12/2010-A DEAD

Summary: Existing law establishes a workers' compensation system, administered by the Administrative Director of the Division of Workers' Compensation, that generally requires employers to secure the payment of workers' compensation, including medical treatment, for injuries incurred by their employees that arise out of, and in the course of, employment. Existing law provides certain methods for determining workers' compensation benefits payable to a worker or his or her dependents for purposes of temporary total disability, temporary partial disability, permanent total disability, permanent partial disability, and in case of death. This bill would require that an employee be deemed to be temporarily partially disabled during the period when the employee's disability is permanent and stationary, no more than 60 days have elapsed after the date the employee was informed that his or her disability is permanent and stationary, the employer has not offered the employee regular, modified, or alternative work, and the employer has not informed the employee that it will not offer the employee regular, modified, or alternative work. This bill contains other existing laws.

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|----------|-----------|
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cajpa JULI Oppose AA WC

Notes: AB 1603 proposes to provide TD benefits after an injured worker is deemed "permanent and stationary. CAJPA members believe that the proper benefit at this point is permanent disability. As a result, AB 1603 would increase costs for all employers by calling for TD benefits after PS designation.

AB 1654 (Conway) School districts: emergency vehicles. (I-01/15/2010 [html](#) [pdf](#))

Status: 04/23/2010-Failed Deadline pursuant to Rule 61(b)(5). (Last location was ED. on 1/27/2010)

Current Location: 04/23/2010-A DEAD

Summary: Existing law authorizes school district governing boards to provide and maintain motor vehicles for use of that district's security or police department. Existing law further provides that these motor vehicles are authorized emergency vehicles and may be equipped and operated as specified in the Vehicle Code. This bill would authorize school district governing boards that do not operate security or police departments to provide and maintain motor vehicles for the use of the district in emergency situations. The bill would provide that these vehicles would be authorized emergency vehicles, as defined, when operated in an emergency situation by an authorized district employee.

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|-----------------------|-----------|
| cajpa | JULI | Oppose_unless_AmendAA | TL |

Notes: Seek amendments to get needed immunities. TL subcommittee to provide language.

AB 1658 (Lieu) County employees' retirement: service credit: safety members. (E-07/06/2010 [html](#) [pdf](#))

Status: 07/06/2010-Enrolled and to the Governor at 10:30 a.m.

Current Location: 07/06/2010-A ENROLLED

Summary: The County Employees Retirement Law of 1937 authorizes a member of that system who becomes a safety member by operation of a specified law to receive service credit, as a safety member, for duties performed, prior to the change in law, which, under current law constitutes service as a safety member. Existing law requires a member that elects to receive the service credit to pay an amount equal to the contributions the member would have made for that service, plus interest. This bill would authorize specified members in the County of Los Angeles that become safety members by operation of a specified consolidation of departments within that county to receive service credit, as a safety member, for duties performed as an officer prior to the consolidation. This bill would require a member that elects to receive the service credit to pay an amount equal to the contributions, together with the regular interest the member would have made for that service, either by a lump sum payment or by installment payments.

| OrganizationAssigned | Position | GroupName | |
|----------------------|----------|-----------|-----|
| cajpa | JULI | Oppose | JPA |

AB 1675 (Hagman) Trespassing: animal enclosures at zoos, circuses, and traveling animal exhibits. (A-06/14/2010 [html](#) [pdf](#))

Status: 06/22/2010-From committee: Do pass, and re-refer to Com. on APPR. Re-referred. (Ayes 7. Noes 0.) (June 22).

Current Location: 06/22/2010-S APPR.

Summary: Under existing law, every person who willfully enters and occupies real property without the consent of the owner, owner's agent, or person in lawful possession, is guilty of a misdemeanor. This bill would, with exemptions for employees and public officers, make it an infraction or a misdemeanor to enter an animal enclosure at a zoo, defined to include a public aquarium, or at a circus or traveling animal exhibit, without the consent of the governing authority of the zoo, circus, or traveling animal exhibit, or a representative of that governing authority . Because this bill would create a new crime, it would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

[AB 1675 Author/AsmPublicSafety - Support - CAJPA 3-9-10.](#)

[AB 1675 SenPublicSafety CAJPA Support 5-28-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|----------|-----------|
| cajpa | JULI | Support | AA |

Notes: CAJPA believes that AB 1675 provides an important new tool for public entities to use to discourage unlawful trespass into zoo and aquarium enclosures in order to protect the animal and aquatic life entrusted to their care. CAJPA also believes that this bill will provide some protection for public zoos and aquariums from lawsuits by plaintiffs who ignore posted warnings, enter enclosures and are subsequently injured by the wildlife within.

[AB 1680](#)

(Saldana) Civil rights: waiver of rights. (A-04/22/2010 [html](#) [pdf](#))

Status: 07/15/2010-From committee: Amend, and do pass as amended. (Ayes 3. Noes 1.) (June 29).

Current Location: 06/30/2010-S JUD.

Summary: Existing civil rights provisions provide that all persons within the jurisdiction of this state have the right to be free from any violence, or intimidation by threat of violence, committed against their persons or property because of political affiliation, or on account of position in a labor dispute, or sex, race, color, religion, ancestry, national origin, disability, or medical condition, or because another person perceives them to have one or more of those characteristics. Those civil rights provisions provide civil remedies for violations of their provisions. This bill would prohibit a person from requiring a waiver of the protections afforded under those provisions as a condition of entering into a contract for the provision of goods or services, including the right to file and pursue a civil action or complaint with, or otherwise notify, the Attorney General or any other public prosecutor, or law enforcement agency, the Department of Fair Employment and Housing, or any court or other governmental entity. This bill would require any waiver of the protections afforded under those provisions to be knowing and voluntary, and in writing, and expressly not made as a condition of entering into the contract or as a condition of providing or receiving goods or services. This bill would provide that any person seeking the enforcement of a waiver of the protections afforded under those civil rights provisions shall have the burden of proving that the waiver was knowing and voluntary and not made as a condition of the contract or of providing or receiving the goods or services. The bill's provisions would apply to contracts entered into, removed, altered, modified, or extended on and after January 1, 2011. This bill contains other related provisions.

[AB 1680 - Coalition/CAJPA - Oppose 3-2-2010](#)

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|----------|-----------|
| cajpa | JULI | Oppose | AA |

Notes: CAJPA is working with a number of employer organizations to oppose AB 1680, which proposes to unnecessarily limit the use of arbitration agreements.

AB 1802

(Hall) Pupil health: diabetes: insulin injections. (A-03/17/2010 [html](#) [pdf](#))

Status: 04/23/2010-Failed Deadline pursuant to Rule 61(b)(5). (Last location was B. & P. on 4/20/2010)

Current Location: 04/23/2010-A DEAD

Summary: Existing law provides that each pupil who is required to take, during the regular schoolday, medication prescribed for him or her by a physician, may be assisted by the school nurse or other designated school personnel if the school district receives a written statement from the physician detailing the method, amount, and time schedules by which the medication is to be taken and a written statement from the parent or guardian of the pupil indicating the desire that the school district assist the pupil in the matters set forth in the physician's statement. Existing law, in the absence of a credentialed school nurse or other licensed nurse, authorizes a school district to provide voluntary emergency medical training to school personnel, as defined, to administer emergency medical assistance to pupils with diabetes suffering from severe hypoglycemia, subject to specified conditions. This bill would authorize a parent or guardian of a pupil with diabetes to designate one or more school employees as parent-designated school employees for the purpose of administering insulin to the pupil as necessary during the regular schoolday when a credentialed school nurse or other health care professional is not immediately available onsite at the school . The bill would authorize a parent-designated school employee to administer insulin . In order to designate an employee for these purposes, the bill would require that the parent or guardian submit a written statement, valid for a maximum of one year, as specified . The bill would require the school district to keep a copy of that statement , to obtain other specified statements from the physician of the pupil and the parent or guardian , and, upon receiving a written request from the parent or guardian of a pupil with diabetes , to notify school staff regarding the intent of the parent or guardian to designate school employees to administer insulin to the pupil . The bill would authorize a licensed health care professional, as described, to provide training to parent-designated school employees in the administration of insulin and to supervise those employees in performing that task. The bill would provide a parent-designated school employee who administers insulin pursuant to the bill's provisions with immunity from criminal and civil liability, as specified . By requiring school districts to perform additional duties, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

| OrganizationAssigned | Position | Priority | GroupName |
|-----------------------------|-----------------|-----------------------|------------------|
| cajpa | JULI | Support_If_Amended AA | TL |

Notes: As currently written, AB 1802 proposes to provide a limited immunity for school employees who aid diabetic students with insulin injections. CAJPA is concerned that AB 1802 does not provide immunity to the school, as well. CAJPA is concerned, that unless AB 1802 is amended, the liability will be transferred from the employee to the school district.

7/14/2010 - Inform sponsors that CAJPA would be interested in partnering on this bill next session.

AB 1826

(Huffman) Health care coverage: prescriptions. (A-05/28/2010 [html](#) [pdf](#))

Status: 07/01/2010-From committee: Do pass, and re-refer to Com. on APPR. Re-referred. (Ayes 5. Noes 2.) (June 30).

Current Location: 07/01/2010-S APPR.

Calendar Events: 08/02/10 10 a.m. - John L. Burton Hearing Room (4203) SEN APPROPRIATIONS

Summary: Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care and makes a willful violation of the act a crime. Existing law provides for the regulation of health insurers by the Department of Insurance. Existing law requires a health care service plan contract or a health insurance policy covering prescription drug benefits to provide specified coverage to subscribers, enrollees, and insureds. This bill would require health care service plan contracts and health insurance policies that cover outpatient prescription drug benefits to provide coverage for a drug that has been prescribed for the treatment of pain and would prohibit those contracts and policies from requiring the subscriber, enrollee, or insured to first use another drug or product as specified. This bill contains other related provisions and other existing laws.

[AB 1826 Author/AsmHealth - CAJPA Oppose 4-8-10](#)

[AB 1826 AsmApprops CAJPA Oppose 5-12-10](#)

[AB 1826 AsmFloor CAJPA Oppose 6-2-10](#)

[AB 1826 SenHealth CAJPA Oppose 6-17-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|-------------|----------|-----------|
| cajpa | JULI Oppose | AA | HC |

Notes: AB 1826 unreasonably eliminates an employers ability to help control the cost of health insurance through formularies, step therapy, mandatory generic substitution or prior authorization programs.

AB 1841

(Buchanan) Special education: parental consent. (A-06/03/2010 [html](#) [pdf](#))

Status: 06/28/2010-From Consent Calendar. Ordered to third reading.

Current Location: 06/28/2010-S THIRD READING

Calendar Events: 08/02/10 91 SEN ASSEMBLY BILLS-THIRD READING FILE

Summary: Existing law, in defining the term "consent" for purposes of the provision of special education and related services to individuals with exceptional needs, includes in that definition a statement that a parent or guardian understands that granting consent is voluntary and he or she may revoke that consent at any time. Existing law provides that revocation of consent is not retroactive to negate an action that occurred after consent was given and prior to the revocation. This bill, in addition, would provide that a public agency is not required to amend the education records of a child to remove any reference to the child's receipt of special education and services if the child's parent or guardian submits a written revocation of consent after the initial provision of special education and related services to the child. This bill contains other related provisions and other existing laws.

[AB 1841 Author/AsmEd - CAJPA Support 3-19-10](#)

[AB 1841 SenEd CAJPA Support 6-2-10](#)

[AB 1841 SenJud CAJPA Support 6-17-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|--------------|----------|-----------|
| cajpa | JULI Support | AA | TL |

Notes: AB 1841 aligns state law with new federal regulations governing Part B of the Individuals with Disabilities Education Act (IDEA). CAJPA believes AB 1841 will help relieve local school districts of being forced to provide services against the parents consent. Importantly, AB 1841 will protect local school districts from being forced to engage in a costly administrative hearing or other legal actions against those parents who refuse service.

AB 1994 (Skinner) **Hospital employees: presumption.** (A-03/23/2010 [html](#) [pdf](#))

Status: 06/04/2010-Failed Deadline pursuant to Rule 61(b)(11). (Last location was APPR. SUSPENSE FILE on 5/5/2010)

Current Location: 06/04/2010-A DEAD

Summary: Existing law provides that an injury of an employee arising out of and in the course of employment is generally compensable through the workers' compensation system. Existing law provides that, in the case of certain public employees, the term "injury" includes heart trouble, hernia, pneumonia, human immunodeficiency virus, lower back impairment, and other injuries and diseases. This bill would provide, with respect to hospital employees who provide direct patient care in an acute care hospital, that the term "injury" includes a blood-borne infectious disease, neck or back impairment, methicillin-resistant Staphylococcus aureus (MRSA), or H1N1 influenza virus that develops or manifests itself during the period of the person's employment with the hospital. This bill contains other related provisions.

[AB 1994 Asm Ins - Coalition/CAJPA OPPOSE 3-26-10](#)

[AB 1994 AsmApprops Coalition-CAJPA Oppose 4-30-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|-----------------------------|-----------------|-----------------|------------------|
| cajpa | JULI | Oppose | AA |

Notes: AB 1994 creates an expensive, unreasonable, and unnecessary mandate on public hospitals by establishing a new presumption of work causation of blood-borne infectious disease, neck or back impairment, methicillin-resistant Staphylococcus aureus (MRSA), or H1N1 influenza virus for all workers who provide patient care.

AB 2041 (Villines) **Income tax: health savings accounts.** (A-05/11/2010 [html](#) [pdf](#))

Status: 05/12/2010-Re-referred to Com. on REV. & TAX.

Current Location: 05/12/2010-A REV. & TAX

Summary: The Personal Income Tax Law authorizes various deductions in computing income that is subject to tax under that law. This bill would, for taxable years beginning on and after January 1, 2010, allow a deduction in connection with health savings accounts in conformity with federal law. In general, the deduction would be an amount equal to the aggregate amount paid in cash during the taxable year by, or on behalf of, an eligible individual, as defined, to a health savings account of that individual, as provided. This bill would, for taxable years beginning on and after January 1, 2010, also provide related conformity to that federal law with respect to treatment of the account as a tax-exempt trust and the allowance of rollovers from Archer Medical Savings Accounts, health flexible spending arrangements, or health reimbursement accounts to a health savings account. This bill contains other related provisions.

| OrganizationAssigned | Position | GroupName |
|-----------------------------|-----------------|------------------|
| cajpa | JULI | Support |

Notes: Same as last year's bill.

AB 2091 (Conway) **Public records: information security.** (A-06/29/2010 [html](#) [pdf](#))

Status: 06/29/2010-Read second time and amended. Ordered to third reading.

Current Location: 06/29/2010-S THIRD READING

Calendar Events: 08/02/10 100 SEN ASSEMBLY BILLS-THIRD READING FILE

Summary: The California Public Records Act requires state and local agencies to make their records available for public inspection and to make copies available upon request and payment of a fee unless those records are exempt from disclosure. This bill would exempt from disclosure under the act the information security records of a public agency if , on the facts of the particular case, disclosure of those records would reveal vulnerabilities to, or otherwise increase the potential for an attack on, an information technology system of a public agency. This bill contains other related provisions and other existing laws.

| OrganizationAssigned | Position | GroupName |
|----------------------|----------|-----------|
| cajpa JULI | Support | TL |

AB 2096 (Miller) **Public contracts: claims: arbitration of contract disputes.** (I-02/18/2010 [html pdf](#))

Status: 05/07/2010-Failed Deadline pursuant to Rule 61(b)(6). (Last location was JUD. on 4/5/2010)

Current Location: 05/12/2010-A DEAD

Summary: Existing law provides for the resolution of public works construction claims, as defined, arising between a contractor and a local agency. It establishes specified procedures for the resolution of these claims, including civil action, mediation, and arbitration. This bill would allow a public agency and a contractor to mutually agree to resolve a claim through independent arbitration.

| OrganizationAssigned | Position | GroupName |
|----------------------|----------|-----------|
| cajpa JULI | Support | TL |

AB 2170 (Lowenthal, Bonnie) **Health care coverage: prescriptions: formularies.** (A-04/27/2010 [html pdf](#))

Status: 06/04/2010-Failed Deadline pursuant to Rule 61(b)(11). (Last location was APPR. SUSPENSE FILE on 5/19/2010)

Current Location: 06/04/2010-A DEAD

Summary: Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care and makes a willful violation of the act's requirements a crime. Existing law provides for the regulation of health insurers by the Department of Insurance. Existing law prohibits a group health care service plan or health insurer, with regard to a group contract, except as specified, from changing the premium rates or applicable copayments or coinsurances or deductibles during certain time periods. This bill would prohibit a health care service plan or a health insurer covering prescription drug benefits and using a formulary from increasing the applicable copayments or deductibles or coinsurances for prescription drugs for the length of the contract or policy . This bill contains other related provisions and other existing laws.

[AB 2170 Author/AsmHealth - CAJPA Oppose 3-25-10](#)

[AB 2170 AsmApprops CAJPA Oppose 5-12-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|----------|-----------|
| cajpa JULI | Oppose | AA | HC |

Notes: AB 2170 places a costly and unnecessary new prohibition on public entities from making mid-year changes to prescription co-pays.

AB 2247

(Niello) Workers' compensation: local inmates. (A-04/05/2010 [html](#) [pdf](#))

Status: 05/07/2010-Failed Deadline pursuant to Rule 61(b)(6). (Last location was INS. on 4/6/2010)

Current Location: 05/12/2010-A DEAD

Summary: Existing workers' compensation law generally requires employers to secure the payment of workers' compensation, including medical treatment, for injuries incurred by their employees that arise out of, and in the course of, employment. This bill would provide that each inmate of a county, city, or city and county jail, industrial farm, or road camp shall be entitled to workers' compensation benefits for injury arising out of, and in the course of, assigned employment and for the death of the inmate if the injury proximately causes the death, subject to specified conditions. This bill contains other existing laws.

[AB 2247 Author/AsmIns CAJPA Support 4-23-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|----------|-----------|
| cajpa | JULI | Support | AA |
| | | | WC |

Notes: CSAC-EIA-sponsored legislation to place reasonable limits on temporary disability payments for inmates in city or county jails.

AB 2253

(Coto) Workers' compensation: cancer presumption. (A-05/28/2010 [html](#) [pdf](#))

Status: 06/24/2010-From committee: Do pass, and re-refer to Com. on APPR. Re-referred. (Ayes 4. Noes 1.) (June 23).

Current Location: 06/24/2010-S APPR.

Calendar Events: 08/02/10 10 a.m. - John L. Burton Hearing Room (4203) SEN APPROPRIATIONS

Summary: Existing law establishes a workers' compensation system, administered by the Administrative Director of the Division of Workers' Compensation, to compensate an employee for injuries sustained in the course of his or her employment. Existing law requires an employer to provide, or pay for all reasonable costs of, medical services necessary to care for or relieve work-related injuries. Existing law further provides that in the case of active firefighting members of certain state and local fire departments and in the case of certain peace officers, a compensable injury includes cancer that develops or manifests itself during the period when the firefighter or peace officer demonstrates that he or she was exposed, while in the service of the public agency, to a known carcinogen, as defined, and the carcinogen is reasonably linked to the disabling cancer. Existing law establishes a presumption that the cancer in these cases is presumed to arise out of, and in the course of, employment, unless the presumption is controverted by evidence that the primary site of the cancer has been established and that the carcinogen to which the member has demonstrated exposure is not reasonably linked to the disabling cancer. This bill would provide that the above-described presumption shall be extended to a member following termination of service for a period of 3 calendar months, but not to exceed 120 months in any circumstance, commencing with the last date actually worked in the specified capacity. This bill contains other existing laws.

[AB 2253 AsmIns - Coalition/CAJPA 3-26-10](#)

[AB 2253 AsmApprops - Coalition-CAJPA 4-16-10](#)

[AB 2253 SenLabor Coalition-CAJPA OPPOSE 6-18-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|----------|-----------|
|----------------------|----------|----------|-----------|

cajpa JULI Oppose AA WC
Notes: Increase workers compensation costs and claims frequency for public agencies through an unreasonable expansion of liability for all cancer claims made by police and firefighters for up to 10 years post employment.

[AB 2269](#) (Adams) **Workers' compensation: injury presumption: heart trouble.** (A-04/13/2010 [html](#) [pdf](#))

Status: 06/04/2010-Failed Deadline pursuant to Rule 61(b)(11). (Last location was APPR. SUSPENSE FILE on 4/28/2010)

Current Location: 06/04/2010-A DEAD

Summary: Existing workers' compensation law generally requires employers to secure the payment of workers' compensation, including medical treatment, for injuries incurred by their employees that arise out of, and in the course of, employment. This bill would delete the reference in the above-described provisions to officers at the Atascadero State Hospital as security officers, and instead, refer to those officers as peace officers. The bill would also add peace officers employed at other hospitals, developmental centers, and community centers, as specified, to the list of persons to whom the above-described injury presumption applies. This bill contains other existing laws.

[AB 2269 Author/AsmIns - CAJPA Oppose 3-31-10](#)

| OrganizationAssigned | Position | Priority | GroupName | |
|----------------------|----------|----------|-----------|----|
| cajpa | JULI | Oppose | AA | WC |

Notes: AB 2269 proposes to establish an unreasonable and costly new presumption under workers compensation law for all security officers employed at certain hospitals, developmental centers, and community centers throughout California. The presumption provides that any and all heart trouble that develops or manifests shall be presumed to be caused by employment.

[AB 2315](#) (Conway) **Government tort claims.** (I-02/19/2010 [html](#) [pdf](#))

Status: 05/07/2010-Failed Deadline pursuant to Rule 61(b)(6). (Last location was JUD. on 3/11/2010)

Current Location: 05/12/2010-A DEAD

Summary: Existing law bars a suit for money or damages against a public entity on a cause of action for which a claim is required to be presented, until a written claim therefor has been presented to the public entity and acted upon by the Victim Compensation and Government Claims Board, the governing body of a local public entity, or the Judicial Council, as applicable, or has been deemed to have been rejected, except as specified. Existing law specifies the contents of the claim, including the name and address of the claimant, and the date, place, and circumstances giving rise to the claim. This bill would require a claimant whose claim includes past or future medical treatment, upon request of the public entity or its representative, to provide his or her social security number, Medicare health insurance claim number (HICN), any alternate name, date of birth, and gender within 30 days of the request in order to assist with Medicare Secondary Payer Mandatory Reporting, as specified. The bill also would require the claimant, upon request of the public entity or its representative, to complete a Medicare Beneficiary Inquiry Form, as described.

[AB 2315 Author/AsmJud - CAJPA Sponsor-Support 3-18-10](#)

| OrganizationAssigned | Position | Priority | Subject | GroupName | |
|----------------------|----------|-------------------|---------|-----------|----|
| cajpa | JULI | Support - Sponsor | AA | Sponsored | WC |

Notes: CAJPA sponsored AB 2315 seeks to align public entity reporting requirements to recent federal changes to Section 111 of the Medicare, Medicaid and SCHIP Extension Act of 2007 (MMSEA).

AB 2327 (Harkey) **Affordable housing: risk retention pool.** (A-06/21/2010 [html](#) [pdf](#))
Status: 07/01/2010-From committee: Do pass, and re-refer to Com. on APPR with recommendation: To Consent Calendar. Re-referred. (Ayes 10. Noes 0.) (June 30).
Current Location: 07/01/2010-S APPR.
Calendar Events: 08/02/10 10 a.m. - John L. Burton Hearing Room (4203) SEN APPROPRIATIONS

Summary: Existing law authorizes local agencies to enter into a joint pooling agreement to form a single statewide insurance pooling arrangement for the payment of tort liability or public liability losses incurred by those agencies. This bill would authorize an affordable housing entity, defined to include affordable housing entities that are created under the laws of another jurisdiction or organized under the laws of another state, to join with one or more affordable housing entities in an arrangement providing for the pooling of self-insured claims or losses, as specified. The pool would be authorized to be organized as a nonprofit corporation, limited liability company, partnership, or trust, whether organized under the laws of this state or another state or operating in another state. The pool would be required to furnish a copy of the pool's audited financial statement and most recent actuarial review to specified legislative committees within 180 days of the close of the pool's fiscal year , and if specified events have occurred since the last statement and review was submitted, the pool would be required to so indicate and provide a brief description of each occurrence . The bill would prohibit the pooling arrangement from being considered insurance or being subject to regulation under the Insurance Code, and would require written notice to be given as specified.

| OrganizationAssigned | Position | Group | Name |
|----------------------|----------|---------|------|
| cajpa | JULI | Support | JPA |

AB 2340 (Monning) **Employee's right to bereavement leave.** (A-07/15/2010 [html](#) [pdf](#))
Status: 07/15/2010-From committee chair, with author's amendments: Amend, and re-refer to committee. Read second time, amended, and re-referred to Com. on APPR.
Current Location: 07/15/2010-S APPR.
Calendar Events: 08/02/10 10 a.m. - John L. Burton Hearing Room (4203) SEN APPROPRIATIONS

Summary: Existing law provides employees with the right to take time off work without discharge or discrimination for a number of reasons. This bill would add the right to inquire about, request, and take time off for bereavement leave. The provisions of the bill would not apply to an employee who is covered by a valid collective bargaining agreement that provides for bereavement leave and other specified working conditions.

[AB 2340 AsmLabor - Coalition-Cajpa Oppose 4-13-10](#)
[AB 2340 AsmApprops Coalition/CAJPA Oppose 4-30-10](#)
[AB 2340 AsmApprops Coalition#2-CAJPA OppUnlAmend 4-30-10](#)
[AB 2340 AsmFloor Coalition Oppose 5-18-10](#)

| OrganizationAssigned | Position | Priority | Group | Name |
|----------------------|----------|----------|-------|------|
|----------------------|----------|----------|-------|------|

cajpa JULI Oppose AA TL
LC

Notes: AB 2340 mandates that every employer grant every employee up to three days of unpaid bereavement leave per year upon the death of a spouse, child, parent, sibling, grandparent, grandchild, or domestic partner. The bill further prohibits any adverse action against employees for requesting and taking such leave and creates a private right of action for violations of the bill's provisions. Oppose as part of larger employer organization coalition effort.

AB 2397 (Solorio) Workers' compensation: public employees: leaves of absence. (I-02/19/2010 [html](#) [pdf](#))

Status: 06/28/2010-Read second time. To third reading.

Current Location: 06/28/2010-S THIRD READING

Calendar Events: 08/02/10 95 SEN ASSEMBLY BILLS-THIRD READING FILE

Summary: Existing workers' compensation law requires employers to secure the payment of workers' compensation, including medical treatment, for injuries incurred by their employees that arise out of, and in the course of, employment. This bill would provide that the injured employee and his or her employer may mutually agree to extend the leave of absence under the above-described provisions beyond the one year period of disability, but that the extension may only be for a maximum of one additional year. This bill contains other existing laws.

[AB 2397 Author/AsmIns - CAJPA Oppose 4-23-10](#)

[AB 2397 AsmFloor CAJPA Oppose 5-7-10](#)

[AB 2397 SenLabor CAJPA Oppose 6-11-10](#)

[AB 2397 SenFloor CAJPA Oppose 6-25-10](#)

| OrganizationAssigned | Position | Priority | GroupName | |
|----------------------|----------|----------|-----------|----|
| cajpa | JULI | Oppose | AA | WC |

Notes: Would provide that the injured employee and his or her employer may mutually agree to extend the leave of absence under Labor Code 4850 beyond the one year period of disability, but that the extension may only be for a maximum of one additional year.

AB 2423 (Niello) Department of Industrial Relations: funds: employer surcharges and assessments. (A-03/22/2010 [html](#) [pdf](#))

Status: 05/07/2010-Failed Deadline pursuant to Rule 61(b)(6). (Last location was INS. on 3/23/2010)

Current Location: 05/12/2010-A DEAD

Summary: Existing law establishes the Workers' Compensation Administration Revolving Fund, the Uninsured Employers Benefits Trust Fund, the Subsequent Injuries Benefits Trust Fund, and the Occupational Safety and Health Fund in the State Treasury and requires the Director of Industrial Relations to levy a separate surcharge upon all employers for purposes of deposit in those funds. Existing law also requires the director to levy and collect assessments from employers to be deposited in the Workers' Compensation Fraud Account in the Insurance Fund for the purposes of investigation and prosecution of workers' compensation fraud and the willful failure to secure payment of workers' compensation. Existing law requires the director to adopt reasonable regulations governing the manner of collection of these surcharges and assessments. This bill would state the intent of the Legislature to enact legislation that would require the Department of Industrial Relations to convene an advisory committee consisting of employers, injured workers, doctors, and other stakeholders when setting the assessments and surcharges in compliance with Sections 62.5

and 62.6 of the Labor Code .

| OrganizationAssigned | Position | Priority | GroupName |
|-----------------------------|-----------------|-----------------|------------------|
| cajpa JULI | Support | AA | WC |

Notes: Sponsored by CCWC, AB 2423 is placeholder legislation aimed at providing better information to employers on special assessments by the Department of Industrial Relations.

AB 2424 (Niello) **Employment: payment of wages.** (I-02/19/2010 [html](#) [pdf](#))

Status: 04/23/2010-Failed Deadline pursuant to Rule 61(b)(5). (Last location was L. & E. on 4/21/2010)

Current Location: 04/23/2010-A DEAD

Summary: Existing law provides that all unpaid wages earned by a discharged employee are due immediately upon discharge. This bill would instead require that, subject to specified exceptions, an employer pay all unpaid wages due to a discharged employee within a reasonable time not exceeding 24 hours after discharge, excluding weekends and holidays. The bill would provide that payment may be made by mail to the most current address of the employee in the employer's payroll records or to an alternate address provided by the employee at the time of discharge, or by making payment available to the discharged employee at a location specified by the employer. The bill would also make conforming changes to existing provisions.

AB 2424 AsmLabor - Coalition-Cajpa Support 4-7-10

| OrganizationAssigned | Position | Priority | GroupName |
|-----------------------------|-----------------|-----------------|------------------|
| cajpa JULI | Support | AA | TL |

Notes: AB 2424 would provide a short extension of time to provide workers with final paychecks.

AB 2491 (Adams) **Medical liens.** (I-02/19/2010 [html](#) [pdf](#))

Status: 05/07/2010-Failed Deadline pursuant to Rule 61(b)(6). (Last location was JUD. on 3/18/2010)

Current Location: 05/12/2010-A DEAD

Summary: Existing law provides, other things being equal, different liens upon the same property have priority according to the time of their creation, except as specified. This bill would provide that the provider of any medical care or services to an injured party shall have an implied lien upon any damages recovered by that person by judgment, settlement, or compromise in the amount of the reasonable charges of the provider for that care or services, if the attorney for the injured party submits a claim for settlement purposes to an insurance company for that medical care or services on behalf of the injured party. The implied lien would be limited in application to only the attorney, and would not apply as to the insurance company. This bill contains other existing laws.

| OrganizationAssigned | Position | GroupName |
|-----------------------------|-----------------|------------------|
| cajpa JULI | Support | WC TL |

Notes: Coalition letter if available.

AB 2578 (Jones) **Health care coverage: rate approval.** (A-05/28/2010 [html](#) [pdf](#))

Status: 07/15/2010-In committee: Placed on APPR suspense file.

Current Location: 06/24/2010-S APPR.

Summary: Existing law, the Knox-Keene Health Care Service Plan Act of 1975 (Knox-Keene Act), provides for the licensure and regulation of health care service plans by the Department of Managed Health Care and makes a willful violation of the act a crime. Existing law also provides for the regulation of insurers by the Department of Insurance, including health insurers. Existing law makes the violation of a final order by the Insurance Commissioner relating to rates imposed by certain insurers, other than health insurers, subject to assessment of a civil penalty and makes the willful violation by those insurers of specified rate provisions a misdemeanor. Under existing law, no change in premium rates or coverage in a health care service plan or a health insurance policy may become effective without prior written notification of the change to the contractholder or policyholder. Existing law prohibits a plan and insurer during the term of a group plan contract or policy from changing the rate of the premium, copayment, coinsurance, or deductible during specified time periods. This bill would require approval by the Department of Managed Health Care or the Department of Insurance of an increase in the amount of the premium, copayment, coinsurance obligation, deductible, and other charges under health care service plan contracts or health insurance policies, other than Medicare supplement or dental-only contracts or policies. The bill would require a plan or insurer to submit to the Department of Managed Health Care or the Department of Insurance, respectively, an application for a rate increase that would be effective on or after January 1, 2012, and would require review of the application in accordance with regulations that each department would be required to adopt no later than January 1, 2012. The bill would subject a rate increase that became effective January 1, 2010, to December 31, 2011, inclusive, to review by the appropriate department. This bill contains other related provisions and other existing laws.

[AB 2578 Author/AsmHealth - CAJPA Oppose 3-19-10](#)

[AB 2578 AsmApprops - CAJPA Oppose 4-19-10](#)

[AB 2578 AsmFloor CAJPA Oppose 6-2-10](#)

[AB 2578 SenHealth CAJPA Oppose 6-15-10](#)

[AB 2578 SenApprops CAJPA Oppose 7-8-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|----------|-----------|
| cajpa | JULI | AA | HC |

Notes: CAJPA opposes AB 2578, which establishes unnecessary regulatory barriers for changes to premiums, co-payments, coinsurance, or deductibles in a health insurance policy.

[AB 2593](#) **(Bradford) Workers' compensation: official medical fee schedule.** (I-02/19/2010 [html pdf](#))

Status: 05/07/2010-Failed Deadline pursuant to Rule 61(b)(6). (Last location was INS. on 3/18/2010)

Current Location: 05/12/2010-A DEAD

Summary: Existing law establishes a workers' compensation system, administered by the Administrative Director of the Division of Workers' Compensation, to compensate an employee for injuries sustained in the course of his or her employment. This bill would, instead, provide that for pharmacy services and drugs that are not otherwise covered by a Medicare fee schedule payment for facility services, the maximum reasonable fees shall be the lowest of the average wholesale price minus 17%, the federal upper limit, as defined, or the maximum allowable ingredient costs, as defined, plus a professional fee for dispensing that is no less than \$7.25 per prescription. This bill contains other existing laws.

| OrganizationAssigned | Position | Group | Name |
|----------------------|----------|--------|------|
| cajpa | JULI | Oppose | WC |

[AB 2723](#) **(Blumenfield) Medical information: integrity.** (I-02/19/2010 [html](#) [pdf](#))
Status: 05/07/2010-Failed Deadline pursuant to Rule 61(b)(6). (Last location was HEALTH on 3/25/2010)
Current Location: 05/12/2010-A DEAD

Summary: Existing law establishes the Office of Health Information Integrity within the California Health and Human Services Agency to ensure the enforcement of state law mandating confidentiality of medical information, as defined, and to impose administrative fines for the unauthorized use of medical information. This bill would specify that the term "medical information" for these purposes includes personal health records and individually identifiable information.

| OrganizationAssigned | Position | Group | Name |
|----------------------|----------|---------|------|
| cajpa | JULI | Support | HC |

[AB 2727](#) **(Bradford) Applicant information: criminal history.** (I-02/19/2010 [html](#) [pdf](#))
Status: 06/04/2010-Failed Deadline pursuant to Rule 61(b)(11). (Last location was APPR. SUSPENSE FILE on 5/28/2010)
Current Location: 06/04/2010-A DEAD

Summary: Existing law provides that an employer may not ask an applicant for employment to disclose, and an employer may not utilize in an employment-related decision, information concerning an arrest or detention that did not result in a conviction. This bill, in addition, would prohibit an employer from denying an application for employment for the reason that the applicant has previously been convicted of a criminal offense unless the employer determines that there is a direct relationship between the prior conviction and the employment sought or the granting of employment would involve an unreasonable risk to property or persons. This bill would require the employer to consider specified factors when determining whether either of those 2 circumstances exist. This bill contains other related provisions and other existing laws.

[AB 2727Ltr.OpposeAsm.Labor](#)
[AB 2727 AsmApprops Coalition/CAJPA Oppose 5-3-10](#)
[AB 2727 Author/AsmApprops CAJPA Oppose 4-26-10](#)
[AB 2727 AsmApprops Coalition/CAJPA Oppose 5-14-10](#)

| OrganizationAssigned | Position | Priority | Group | Name |
|----------------------|----------|----------|-------|------|
| cajpa | JULI | Oppose | AA | TL |

Notes: AB 2727 proposes create a new private right of action against all employers, including public sector employers, who deny an application for employment to an individual based on a prior conviction. The bill strictly limits the denial of employment except in cases where an employer can clearly demonstrate that there is a direct relationship between the criminal offense(s) and the employment sought.

[AB 2749](#) **(Logue) Workers' compensation: lien claims.** (A-04/20/2010 [html](#) [pdf](#))
Status: 05/07/2010-Failed Deadline pursuant to Rule 61(b)(6). (Last location was INS. on

4/21/2010)

Current Location: 05/12/2010-A DEAD

Summary: Existing workers' compensation law generally requires employers to secure the payment of workers' compensation, including medical treatment, for injuries incurred by their employees that arise out of, and in the course of, employment. Existing law authorizes a medical provider to file a lien claim with the Workers' Compensation Appeals Board for certain expenses incurred by the provider. This bill would require employers or employers' insurance carriers to include a benefit notice with any objection to a bill for medical services or an explanation of benefits that advises the provider of those services or benefits of the above-described deadline for filing lien claims and the consequences of failing to meet that deadline. This bill contains other existing laws.

| OrganizationAssigned | Position | Priority | Subject | GroupName | |
|-----------------------------|-----------------|-------------------|----------------|------------------|----|
| cajpa | JULI | Support - Sponsor | AA | Sponsored | WC |

Notes: CAJPA-sponsored AB 2749 will contain comprehensive statutory language to repair the stale liens problem.

[AB 2760](#) **(Tran) False Claims Act: prevailing defendant: attorney's fees.** (A-04/14/2010 [html](#) [pdf](#))

Status: 04/23/2010-Failed Deadline pursuant to Rule 61(b)(5). (Last location was JUD. on 4/15/2010)

Current Location: 04/23/2010-A DEAD

Summary: Existing law, the False Claims Act, provides that a person who commits any one of several enumerated acts relating to the submission to the state or a political subdivision of the state a false claim for money, property, or services, as specified, shall be liable to the state or political subdivision for certain damages and may be liable for a civil penalty. Existing law authorizes the Attorney General, a prosecuting authority of a political subdivision of the state, or a qui tam plaintiff to bring a civil action to enforce these provisions. Existing law authorizes a court to award a prevailing defendant its reasonable attorney's fees and expenses, as prescribed. This bill would require, in a civil action relative to certain claims arising from a public works contract, a court to award a prevailing defendant its reasonable attorney's fees and expenses against the state or a political subdivision that prosecuted the action. This bill would prohibit, except as specified, a court from awarding a prevailing defendant its reasonable attorney's fees and expenses against a qui tam plaintiff who proceeded with an action without the assistance of the Attorney General or local prosecuting authority .

| OrganizationAssigned | Position | GroupName | |
|-----------------------------|-----------------|------------------|----|
| cajpa | JULI | Support | TL |

[AB 2773](#) **(Swanson) Civil actions: costs.** (A-04/08/2010 [html](#) [pdf](#))

Status: 07/01/2010-Read second time. To third reading.

Current Location: 07/01/2010-S THIRD READING

Calendar Events: 08/02/10 176 SEN ASSEMBLY BILLS-THIRD READING FILE

Summary: Existing law provides that a prevailing party is entitled as a matter of right to recover costs in any action or proceeding, and specifies those items allowable as costs.

Existing law provides that costs, or any portion of claimed costs, shall be as determined by the court, in its discretion, in a case other than a limited civil case, if the prevailing party recovers a judgment that could have been rendered in a limited civil case. This bill would exempt from that latter provision an action brought under a specified provision of the Fair Employment and Housing Act alleging an unlawful practice.

[AB 2773 AsmFloor Coalition/CAJPA OPPOSE 5-24-10](#)

[AB 2773 Ltr. Sen.Jud - Oppose](#)

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|----------|-----------|
| cajpa JULI | Oppose | AA | TL |

Notes: CAJPA on Coalition letter. AB 2773 would unreasonably increase business and government litigation expenses by removing judicial discretion to eliminate or reduce excessive attorney"s fees.

[AB 2774](#) (Committee on Labor and Employment) Occupational safety and health. (A-05/28/2010 [html](#) [pdf](#))

Status: 06/28/2010-Read second time. To third reading.

Current Location: 06/28/2010-S THIRD READING

Calendar Events: 08/02/10 96 SEN ASSEMBLY BILLS-THIRD READING FILE

Summary: Existing law authorizes the Department of Occupational Safety and Health to enforce health and safety standards in places of employment and to investigate and to issue a citation when an employer causes an employee to suffer or potentially suffer, among other things, "serious injury or illness" or "serious physical harm." Existing law defines a "serious injury or illness," generally, as a workplace injury or illness requiring hospitalization of more than 24 hours or resulting in the loss of a body member or in permanent disfigurement. This bill would define "serious physical harm" to include most categories of a "serious injury or illness," but would also include those resulting in physical impairment of a part of the body or from a single cause or from the cumulative effect of multiple injuries or illnesses.

[AB 2774 AsmLabor Coalition-CAJPA OppUnlAmend 4-30-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|----------|-----------|
| cajpa JULI | Oppose | AA | TL |
| | | | LC |

Notes: CAJPA participating with the Chamber and Public Employer Coalitions in opposition.

[AB 2779](#) (Solorio) Workers' compensation: compound medication. (A-06/22/2010 [html](#) [pdf](#))

Status: 07/02/2010-Failed Deadline pursuant to Rule 61(b)(13). (Last location was B., F. & I. on 6/24/2010)

Current Location: 07/02/2010-S DEAD

Summary: Existing law establishes a workers' compensation system, administered by the Administrative Director of the Division of Workers' Compensation, to compensate an employee for injuries sustained in the course of his or her employment. Existing law requires the administrative director, on or before December 1, 2004, to adopt, after public hearings, a medical treatment utilization schedule, as specified. This bill would provide that, until the administrative director adopts medical treatment utilization guidelines governing compound medication, a compound medication shall be covered only if there is prior authorization for it as medically necessary, as specified.

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|----------|-----------|
| cajpa | JULI | Support | AA |
| | | | WC |

Notes: CAJPA supports as proposed to be amended 6-23-2010.

ABX8 40 (Niello) **Civil actions: damages.** (I-02/16/2010 [html](#) [pdf](#))
Status: 03/15/2010-Final adjournment: Eighth Extraordinary Session on 3/15/2010. (Last location was DEAD on 3/11/2010)
Current Location: 03/15/2010-A DEAD

Summary: Existing law authorizes the plaintiff, in an action for the breach of an obligation not arising from contract, where it is proven by clear and convincing evidence that the defendant has been guilty of oppression, fraud, or malice, to recover damages for the sake of example and by way of punishing the defendant in addition to the actual damages. This bill would limit punitive damages in those actions to 3 times the award for compensatory damages. This bill contains other related provisions and other existing laws.

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|----------|-----------|
| cajpa | JULI | Support | AA |
| | | | TL |

AJR 42 (Solorio) **Medicare Secondary Payer Enhancement Act of 2010.** (A-06/24/2010 [html](#) [pdf](#))
Status: 06/30/2010-Withdrawn from committee. Ordered placed on third reading file.
Current Location: 06/30/2010-S THIRD READING
Calendar Events: 08/02/10 144 SEN ASSEMBLY BILLS-THIRD READING FILE

Summary: This measure would request that the Congress and the President of the United States enact the Medicare Secondary Payer Enhancement Act of 2010.

[AJR 42 Author CAJPA Support 6-2-10](#)
[AJR 42 AsmHealth CAJPA Support 6-11-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|----------|-----------|
| cajpa | JULI | Support | AA |
| | | | WC |
| | | | TL |

Notes: Resolution requesting that Congress and the President of the United States enact the federal Medicare Secondary Payer Enhancement Act of 2010 (H.R. 4796).

SB 108 (Walters) **Charter schools.** (A-06/01/2009 [html](#) [pdf](#))
Status: 07/02/2010-Failed Deadline pursuant to Rule 61(b)(13). (Last location was JUD. on 6/22/2009)
Current Location: 07/02/2010-A DEAD

Summary: Existing law provides that a charter school, including a charter school operated as or by a nonprofit public benefit corporation, may be considered a public agency, as defined, for the purpose of being eligible for membership in a joint powers agreement for risk-pooling. This bill, in addition, would prohibit a joint powers authority for risk-pooling from refusing to admit to membership or provide coverage to a charter school, including a charter school operated as or by a nonprofit public benefit corporation, or a school district that operates a charter school, solely on the basis that the school under consideration is a charter school or the district under consideration operates a charter school. The bill would

authorize a joint powers authority for risk-pooling to set the price for coverage for a charter school or a school district that operates a charter school at a level that is commensurate with the increased risk involved. By limiting the discretion of joint powers authorities, this bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

| OrganizationAssigned | Position | Priority | GroupName |
|-----------------------------|-----------------|-----------------|------------------|
| cajpa JULI | Oppose | AA | TL |

Notes: CAJPA opposes SB 108 which would mandate that Joint Powers Authorities (JPAs) operating as risk pool accept all charter schools as members. While CAJPA believes that charter schools need to be covered, it should not be done at legal gunpoint, where every refusal to admit a charter school will lead to costly litigation against a JPA alleging the school was refused because it was a charter school, rather than the schools uncontrolled risk or liabilities.

SB 145

(DeSaulnier) Workers' compensation. (A-04/27/2009 [html](#) [pdf](#))

Status: 07/13/2009-Placed on inactive file on request of Assembly Member Torrico.

Current Location: 07/13/2009-A INACTIVE FILE

Summary: Existing workers' compensation law generally requires employers to secure the payment of workers' compensation, including medical treatment, for injuries incurred by their employees that arise out of, and in the course of, employment. This bill would provide that no workers' compensation claim shall be denied because the employee's injury or death was related to the employee's race, religious creed, color, national origin, age, gender, marital status, sex, sexual orientation, or genetic characteristics . This bill contains other related provisions and other existing laws.

[SB 145 Ltr. Author/SenLabor - Oppose 3/24/09](#)

[SB 145 Ltr. SenFloor - Oppose 4/29/09](#)

[SB 145 Ltr. AsmIns - Oppose - 6-17-09](#)

[SB 145 Ltr. AsmFloor - Oppose - 7-10-09](#)

| OrganizationAssigned | Position | Priority | GroupName |
|-----------------------------|-----------------|-----------------|------------------|
| cajpa JULI | Oppose | AA | WC |

Notes: CAJPA opposes SB 145 (DeSaulnier), that would, among other provisions, would weaken the apportionment statute and allow judges to overrule apportionment even when based on findings of actual previous disability.

SB 810

(Leno) Single-payer health care coverage. (A-01/13/2010 [html](#) [pdf](#))

Status: 06/30/2010-From committee: Do pass, but first be re-referred to Com. on APPR. (Ayes 13. Noes 6.) Re-referred to Com. on APPR. (Heard in committee on June 29.)

Current Location: 06/30/2010-A APPR.

Summary: Existing law does not provide a system of universal health care coverage for California residents. Existing law provides for the creation of various programs to provide health care services to persons who have limited incomes and meet various eligibility requirements. These programs include the Healthy Families Program administered by the Managed Risk Medical Insurance Board, and the Medi-Cal program administered by the State Department of Health Care Services. Existing law provides for the regulation of health care service plans by the Department of Managed Health Care and health insurers by the Department of Insurance. This bill would establish the California Healthcare System to be administered by the newly created California Healthcare Agency under the control of a

Healthcare Commissioner appointed by the Governor and subject to confirmation by the Senate. The bill would make all California residents eligible for specified health care benefits under the California Healthcare System, which would, on a single-payer basis, negotiate for or set fees for health care services provided through the system and pay claims for those services. The bill would provide that a resident of the state with a household income, as specified, at or below 200% of the federal poverty level would be eligible for the type of benefits provided under the Medi-Cal program. The bill would require the commissioner to seek all necessary waivers, exemptions, agreements, or legislation to allow various existing federal, state, and local health care payments to be paid to the California Healthcare System, which would then assume responsibility for all benefits and services previously paid for with those funds. This bill contains other related provisions and other existing laws.

[SB 810 Author/SenApprops - CAJPA Oppose - 1-20-10](#)

[SB 810 SenFloor - CAJPA Oppose - 1-25-10](#)

[SB 810 AsmHealth CAJPA Oppose 6-16-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|----------|-----------|
| cajpa JULI | Oppose | AA | HC |

Notes: SB 810 (Leno), which creates a new government run, multi-billion dollar socialized health care system built from a yet to be specified premium structure. The bill establishes a premium commission to impose a premium for all employers, which is essentially a tax. CAJPA fundamentally disagrees with the two major premises of the bill: (1) government systems are more efficient than private business, and (2) a single payer system would be less costly than the current private system.

[SB 838](#)

(Strickland) Cal-COBRA: premium assistance. (C-06/04/2010 [html](#) [pdf](#))

Status: 06/03/2010-Chaptered by the Secretary of State, Chapter Number 24, Statutes of 2010

Current Location: 06/04/2010-S CHAPTERED

Summary: Existing federal law, the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA), requires group health plans providing coverage to employers of 20 or more employees to provide former employees with continuation of benefits, as specified. The federal American Recovery and Reinvestment Act of 2009 (ARRA) provides up to 9 months of premium assistance under COBRA and comparable state continuation coverage programs for certain eligible individuals whose employment was involuntarily terminated between September 1, 2008, and December 31, 2009, as specified. Subsequent federal legislation extends that premium assistance for a specified period of time, makes the assistance available to certain eligible individuals whose employment is involuntarily terminated on or after January 1, 2010, and provides a special election opportunity for certain eligible individuals who experience a reduction in hours followed by an involuntary termination of employment, as specified. Existing federal law requires a plan administrator or other entity involved to provide notices regarding that assistance to certain qualified beneficiaries within specified periods of time. This bill would require those plans and insurers to also provide notice of the availability of premium assistance to qualified beneficiaries who experience a qualifying event between January 1, 2010, and specified dates under federal law and would additionally require plans and insurers to notify qualified beneficiaries eligible for premium assistance of the extension of premium assistance made available by federal law consistent with the notice requirements imposed under that law. The bill would require plans and insurers to give certain qualified beneficiaries whose employment is terminated on or after March 1, 2010, written notice regarding the

availability of premium assistance and the special election opportunity provided under ARRA and would allow beneficiaries eligible for that or any other special election opportunity under ARRA to elect continuation coverage within 60 days of the notice required under federal law. The bill would also require plans and insurers to provide information regarding the federal premium assistance and any special election periods under ARRA on their Internet Web sites, as specified, and would apply certain notice requirements to employers of employees whose employment has been terminated on or after March 2, 2010. The bill would authorize the Department of Managed Health Care to designate model notices for purposes of implementing federal premium assistance, as specified, and would make other conforming changes. This bill contains other related provisions and other existing laws.

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| OrganizationAssigned | Position | GroupName |
| cajpa JULI | Support | HC |

SB 922

(Ashburn) Public Employees' Medical and Hospital Care Act: employer contributions: Placer County. (I-02/01/2010 [html](#) [pdf](#))

Status: 06/04/2010-Failed Deadline pursuant to Rule 61(b)(11). (Last location was RLS. on 2/11/2010)

Current Location: 06/04/2010-S DEAD

Summary: Existing law requires the Board of Administration of the Public Employees' Retirement System to administer the Public Employees' Medical and Hospital Care Act. Existing law permits a contracting agency to elect to be subject to the act for its employees and annuitants, provided that the contracting agency and each employee or annuitant contribute a portion of the cost of providing the benefit coverage afforded under the health benefit plan approved or maintained by the board in which the employee or annuitant may be enrolled. Existing law specifies that the employer contribution of a contracting agency begins on the effective date of enrollment and is the amount fixed from time to time by resolution of the governing body of the agency. This bill would declare the intent of the Legislature to enact legislation that would enable Placer County and a collective bargaining unit, by agreement in a memorandum of understanding, to permit the county, a contracting agency under the Public Employees' Medical and Hospital Care Act, to make an employer contribution for employees first hired on or after the effective date of the memorandum of understanding at a rate that may differ from the employer contribution rate for current employees and annuitants.

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|-----------------------------|-----------------|----------------|------------------|
| OrganizationAssigned | Position | Subject | GroupName |
| cajpa JULI | Support | Health Care | HC |

SB 972

(Wolk) Indemnity: design professionals. (A-06/23/2010 [html](#) [pdf](#))

Status: 07/06/2010-From committee: Do pass as amended. (Ayes 9. Noes 1.) (Heard in committee on June 29.)

Current Location: 06/23/2010-A SENATE SECOND

Calendar Events: 08/02/10 55 ASM SENATE SECOND READING FILE

Summary: Existing law contains specified rules that are to be applied in the interpretation of a contract for indemnity. Pursuant to these rules, the person that is required to provide

indemnification is bound, upon the request of the person that is required to be indemnified, to defend actions or proceedings brought against the person that is required to be indemnified prior to a finding of liability. Existing law further provides, for all contracts, and amendments to contracts, entered into on or after January 1, 2007, with a public agency for design professional services, all provisions, clauses, covenants, and agreements contained in, collateral to, or affecting these contracts, that purport to indemnify, including the cost to defend, the public agency by a design professional against liability for claims against the public agency, are unenforceable, except for claims that arise out of, pertain to, or relate to the negligence, recklessness, or willful misconduct of the design professional. This bill would provide, for all contracts, and amendments to contracts, entered into on or after January 1, 2011, with a public agency, as defined, for design professional services, all provisions, clauses, covenants, and agreements contained in, collateral to, or affecting these contracts or amendments to contracts that purport to require an immediate defense under an indemnity agreement are unenforceable. This bill would provide that the obligations of a design professional to indemnify a public agency for damages determined to be caused by negligence, recklessness, or willful misconduct to be proportionate to the actual liability of the design professional. This bill would provide that if a public agency includes indemnity language in a contract for the services of a design professional, those provisions shall only be enforceable if the language of the contract is in conformance with these provisions.

[SB 972 SenFloor CAJPA Oppose 5-11-10](#)

[SB 972 Author CAJPA Oppose 5-11-10](#)

[SB 972 SenFloorAlert Coalition-CAJPA Oppose Final](#)

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|----------|-----------|
| cajpa | JULI | Neutral | TL |
| | | AA | JPA |

Notes: Originally, SB 972 proposed to negate current law that provides a process by which the parties are aware of their obligations for defense up front so the party with the obligation is able to control the defense. Bill substantially amended to now only restate current law as to the "duty" to defend. CAJPA position is NEUTRAL with the addition of the amendments.

[SB 1051](#) (Huff) Emergency medical assistance: administration of diastat. (A-05/12/2010 [html pdf](#))

Status: 06/04/2010-Failed Deadline pursuant to Rule 61(b)(11). (Last location was APPR. SUSPENSE FILE on 5/27/2010)

Current Location: 06/04/2010-S DEAD

Summary: Existing law provides that in the absence of a credentialed school nurse or other licensed nurse onsite at the school, a school district is authorized to provide school personnel with voluntary medical training to provide emergency medical assistance to pupils with diabetes suffering from severe hypoglycemia. This bill would authorize a school district to provide school employees with voluntary emergency medical training to provide, in the absence of a credentialed school nurse or other licensed nurse onsite at the school, emergency medical assistance to pupils with epilepsy suffering from seizures, in accordance with performance standards developed by specified entities. The bill would require the State Department of Public Health to approve the performance standards for distribution and make the standards available upon request. The bill would allow a parent or guardian of a pupil with epilepsy who has been prescribed diastat by the pupil's health care provider to request the pupil's school to have one or more of its employees receive voluntary training, as specified, in order to administer diastat, as defined, in the event that the pupil suffers a

seizure when a nurse is not available. The bill would require a school that decides to train school employees to distribute an electronic notice, as specified, to all staff regarding the request. The bill would repeal these provisions on January 1, 2016.

[SB 1051 Author/SenEd - CAJPA Support 3-19-10](#)

[SB 1051 SenHealth - CAJPA Support 4-30-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|----------------------|----------|----------|-----------|
| cajpa | JULI | Support | AA |
| | | | TL |

Notes: SB 1051 authorizes a school district to allow specifically trained volunteers to assist epileptic students in distress without taking on new liability.

[SB 1166](#)

(Simitian) Personal information: privacy. (A-06/22/2010 [html](#) [pdf](#))

Status: 06/22/2010-Read second time. Amended. Re-referred to Com. on APPR.

Current Location: 06/22/2010-A APPR.

Summary: Existing law requires any agency, and any person or business conducting business in California, that owns or licenses computerized data that includes personal information, as defined, to disclose in specified ways, any breach of the security of the system or data, as defined, following discovery or notification of the security breach, to any California resident whose unencrypted personal information was, or is reasonably believed to have been, acquired by an unauthorized person. This bill would require any agency, person, or business that is required to issue a security breach notification pursuant to existing law to fulfill certain additional requirements pertaining to the security breach notification, as specified. This bill contains other related provisions.

| OrganizationAssigned | Position | GroupName |
|----------------------|----------|-----------|
| cajpa | JULI | Oppose |
| | | TL |

[SB 1169](#)

(Lowenthal) Health care coverage: claims: prior authorization: mental health. (A-05/28/2010 [html](#) [pdf](#))

Status: 07/01/2010-Read second time. To third reading.

Current Location: 07/01/2010-A THIRD READING

Calendar Events: 08/02/10 190 ASM SENATE THIRD READING FILE

Summary: Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care and makes a willful violation of the act a crime. Existing law provides for the regulation of health insurers by the Department of Insurance. Existing law requires health care service plans and health insurers to have written policies and procedures establishing the process by which the plans or insurers prospectively, retrospectively, or concurrently review and approve, modify, delay, or deny, based in whole or in part on medical necessity, requests by providers of health care services for enrollees or insureds. Existing law requires health care service plans and health insurers to reimburse uncontested claims within 30 or 45 working days and specifies that a claim is contested if the plan or insurer has not received a completed claim and all information necessary to determine payer liability. This bill would require plans and insurers to assign a tracking number to a claim or provider request for authorization, upon receipt thereof, and to provide acknowledgment of receipt thereof, including identification of the tracking number, to the provider, as specified. With respect to claims that are contested on the basis that the plan or insurer has not received all information necessary to determine payer liability for the claim, the bill would require the

plan or insurer to provide acknowledgment of receipt of any of that information within 3 working days, as specified. This bill contains other related provisions and other existing laws.

| OrganizationAssigned | Position | GroupName |
|-----------------------------|-----------------|------------------|
| cajpa | JULI | Support |
| | | HC |

SB 1213

(Cedillo) Electronic access to claims information. (A-03/25/2010 [html](#) [pdf](#))

Status: 06/04/2010-Failed Deadline pursuant to Rule 61(b)(11). (Last location was APPR. SUSPENSE FILE on 5/27/2010)

Current Location: 06/04/2010-S DEAD

Summary: Existing law establishes a workers' compensation system, administered by the Administrative Director of the Division of Workers' Compensation, to compensate an employee for injuries sustained in the course of his or her employment. This bill would require the division to provide a party to a claim with single sign-on portal real-time electronic programmatic access, at no charge, to the party's data contained within the EAMS . This bill contains other existing laws.

[SB 1213 Author/SenLabor - CAJPA Oppose 3-19-10](#)

[SB 1213 SenApprops - CAJPA Oppose 4-22-10](#)

| OrganizationAssigned | Position | Priority | GroupName |
|-----------------------------|-----------------|-----------------|------------------|
| cajpa | JULI | Oppose | AA |
| | | | WC |

Notes: CAJPA is concerned that SB 1213 will increase the special assessments on all employers to support DWC by mandating that all parties to a claim must have online, real time, no-cost access to that partys own data through expansion of the Electronic Adjudication Management System (EAMS) program.

SB 1262

(Aanestad) High deductible health plans: health savings accounts. (I-02/19/2010 [html](#) [pdf](#))

Status: 04/23/2010-Failed Deadline pursuant to Rule 61(b)(5). (Last location was P.E. & R. on 4/12/2010)

Current Location: 04/23/2010-S DEAD

Summary: Under the Public Employees' Medical and Hospital Care Act, the Board of Administration of the Public Employees' Retirement System contracts for and administers health care benefit plans for public employees and annuitants. Existing state and federal income tax laws allow a deduction for contributions to a qualifying medical savings account by a taxpayer who is covered under a high deductible health plan, as defined. Money within this type of account may be used to pay for qualified medical expenses, as defined. This bill would require the board to offer a high deductible health plan, as defined in the federal tax law, and a Health Savings Account option to public employees and annuitants, as specified. The bill would establish the Public Employees' Health Savings Fund, a continuously appropriated trust fund within the State Treasury, for payment of qualified medical expenses of eligible employees and annuitants who elect to enroll in the high deductible health plan and participate in the Health Savings Account option, and would require those employees and annuitants, and their employers, to make specified contributions to that fund, thereby making an appropriation. This bill contains other related provisions and other existing laws.

| OrganizationAssigned | Position | GroupName |
|-----------------------------|-----------------|------------------|
| cajpa JULI | Support | HC |

SB 1281

(Padilla) Emergency medical services: defibrillators. (I-02/19/2010 [html](#) [pdf](#))

Status: 05/07/2010-Failed Deadline pursuant to Rule 61(b)(6). (Last location was JUD. on 5/4/2010)

Current Location: 05/12/2010-S DEAD

Summary: Existing law authorizes the Emergency Medical Services Authority to establish minimum training and other standards for the use of automatic external defibrillators (AED) and requires persons or entities that acquire the AEDs to comply with maintenance, testing, and training requirements, which are scheduled to change on January 1, 2013. Existing law sets forth tenant notice and other requirements for building owners in which an AED is placed. This bill would repeal those provisions. This bill contains other related provisions and other existing laws.

SB 1281 Author/SenJud CAJPA Support 4-30-10

| OrganizationAssigned | Position | Priority | GroupName |
|-----------------------------|-----------------|-----------------|------------------|
| cajpa JULI | Support | AA | TL LC |

Notes: SB 1281 will reduce liabilities if one, who has not been trained, reacts to an emergency with the use of an AED that is plainly displayed by a sign to all the public and employees.

Total Position Forms: 54