Saturday, May 2, 2015

Dental Hygiene Committee of California

Legislative and Regulatory Subcommittee

Agenda
Notice is hereby given that a public meeting of the Legislative and Regulatory Subcommittee of the Dental Hygiene Committee of California will be held as follows:

**LEGISLATIVE AND REGULATORY SUBCOMMITTEE MEETING**

Saturday, May 2, 2015
Embassy Suites Anaheim-Orange
400 N. State College Blvd.
Orange, CA 92868
(714) 938-1111

Legislative and Regulatory Subcommittee Members:
Susan Good, Chair
Michelle Hurlbutt, RDH Educator
Noel Kelsch, RDHAP
Nicolette Moultrie, RDH

After Adjournment of the Full Committee Meeting

**Agenda**

LEG 1 – Roll Call

LEG 2 – Public Comment for Items Not on the Agenda

LEG 3 – Chairperson’s Report

LEG 4 – Approval of the December 5, 2014 Legislative and Regulatory Subcommittee Meeting Minutes

LEG 5 – Discussion and Possible Action Including Recommendations to the Full Committee on the following Legislation:

a. AB 12 (Cooley) – State Government: administrative regulations: review
b. AB 41 (Chau) – Health Care Coverage: discrimination
c. AB 85 (Wilk) – Open Meetings
d. AB 179 (Assembly Committee on Business and Professions) – Dentistry
e. AB 351 (Jones-Sawyer) Public Contracts: small business participation
f. AB 366 (Bonta) – Medi-Cal Reimbursement Rates
g. AB 483 (Patterson) – Healing Arts: initial license fees: proration
h. AB 502 (Chau) – Dental Hygiene
i. AB 611 (Dahle) Controlled Substances: prescriptions: reporting
j. AB 648 (Low) – Community-Based Services: Virtual Dental Home program
k. AB 728 (Hadley) – State Government: financial reporting
l. AB 750 (Low) – Business and Professions: licenses
m. AB 797 (Steinorth) - Regulations: effective dates and legislative review
n. AB 880 (Ridley-Thomas) – Dentistry
o. AB 1060 (Bonilla) – Professions and Vocations: licensure
p. SB 351 (Committee on Banking and Financial Institutions) – Corporations: management
q. SB 800 (Committee on Business, Professions and Economic Development) – Healing arts
r. Any Other Legislation of Interest to the Committee

LEG 6 – Future Agenda Items

LEG 7 – Adjournment

A quorum of the Committee may be present at the subcommittee meeting. However, Committee members who are not on the subcommittee may observe, but may not participate or vote. Public comments will be taken on agenda items at the time the specific item is raised. The subcommittee may take action on any item listed on the agenda, unless listed as informational only. All times are approximate and subject to change. Agenda items may be taken out of order to accommodate speakers, for convenience, and to maintain a quorum. The meeting may be cancelled without notice. For verification of the meeting, call (916) 263-1978 or access the Committee’s Web Site at www.dhcc.ca.gov.

The meeting facilities are accessible to individuals with physical disabilities. A person who needs a disability-related accommodation or modification in order to participate in the meeting may make a request by contacting Anthony Lum at (916) 576-5004 or e-mail anthony.lum@dca.ca.gov or send a written request to DHCC at 2005 Evergreen Street, Ste. 2050, Sacramento, CA 95815. Providing your request at least five (5) business days before the meeting will help to ensure availability of the requested accommodation.
Saturday, May 2, 2015

Dental Hygiene Committee of California

Legislative and Regulatory Subcommittee

Agenda Item 1

Roll Call

Establishment of a Quorum
Saturday, May 2, 2015

Dental Hygiene Committee of California

Legislative and Regulatory Subcommittee

Agenda Item 2

Public Comment for Items Not on the Agenda
Saturday, May 2, 2015

Dental Hygiene Committee of California

Legislative and Regulatory Subcommittee

Agenda Item 3

Chairperson’s Report:

A verbal report will be given
Saturday, May 2, 2015

Dental Hygiene Committee of California

Legislative and Regulatory Subcommittee

Agenda Item 4

Approval of the December 5, 2014 Legislative and Regulatory Subcommittee Meeting Minutes
LEG 1 – Roll Call
Susan Good, Chair of the Legislative and Regulatory Subcommittee, called the meeting to order at 1:12 p.m. with roll call and established a quorum with members Michelle Hurlbutt and Nikki Moultrie present. Noel Kelsch was absent.

LEG 2 – Public Comment for Items Not on the Agenda
There was no public comment for items not on the agenda.

LEG 3 – Chairperson’s Report
Chair Good reported that regarding Assembly Bill (AB) 1174 (Ch. 662, Statutes of 2014), the author, Assembly Member Bocanegra, took our amendments. The subcommittee had requested more information on AB 1758, but there was no response from the author’s office (Assembly Member Patterson) and the bill died.

LEG 4 – Approval of the May 2, 2014 Legislative and Regulatory Subcommittee Meeting Minutes
Member Hurlbutt noted some misspellings that should be corrected. M/S/P (Moultrie/Hurlbutt) to approve the minutes as corrected.

LEG 5 – Legislative Update for 2013-2014 Session
Staff analyst Donna Kantner reported that AB 1174 and SB 850, discussed in the Education Subcommittee, had passed and been signed into law. Also, AB 2396 prohibiting denial of a license solely on the basis of a dismissed conviction and Senate Bill (SB) 1159 that allows applicants to provide a federal tax ID or a Social Security number, were signed into law. Ms. Kantner reported that DHCC’s Sunset bill, SB 1245, extending the existence of the Committee until 2019, was also passed and signed by the Governor.

LEG 6 – Discussion and Possible Action on Proposed Dental Hygiene Regulations Relative to Definitions – California Code of Regulations (CCR) Title 16, Section 1100
Ms. Kantner provided background information and handouts of DHCC’s Educational Programs definitions, CDA’s prior comments on the previous
text, and staff’s rationale for acceptance or decline of each of the comments. She noted that a teleconference was unsuccessfully attempted, and this file had expired at the end of November 2014. She stated that the text had been slightly modified to accommodate two of CDA’s previous comments. She explained that since the file has expired, the rulemaking process must begin again with adoption of the proposed language and notice for public hearing. Gayle Mathe, CDA, said she respects the Committee’s regulatory work, but has concerns with the DHCC defining practice, and therefore, scope. She urged DHCC to follow the process and make the recommendations to the Dental Board for that process to move forward. M/S/P (Hurlbutt/Moultrie) to recommend the Committee approve the proposed regulatory language and direct staff to take all necessary steps to initiate the formal rulemaking process and set the proposed regulations for a public hearing, and authorize the Executive Officer to make any non-substantive changes to the rulemaking package to complete the rulemaking process.

LEG 7 – Discussion and Possible Action on Proposed Dental Hygiene Regulations Relative to Administration and Examinations – CCR Title 16, Sections 1101, 1121, 1122, 1124, 1126, 1127 and 1133

Ms. Kantner noted that these Sections had received no comments, so it seemed best to separate them from the definitions and pursue them as a separate rulemaking. She noted that the text is exactly the same as that approved at the Committee’s September 2013 meeting. There was no comment on this item, and M/S/P (Hurlbutt/Moultrie) to recommend that the Committee approve the proposed regulatory language relative to administration and examinations and direct staff to take all necessary steps to initiate the formal rulemaking process and set the proposed regulations for a public hearing, and authorize the Executive Officer to make any non-substantive changes to the rulemaking package to complete the rulemaking process.

LEG 8 – Discussion and Possible Action on California Dental Hygienists’ Association’s Proposed Legislation for 2015

Ms. Kantner noted that the attached language is proposed by the California Dental Hygienists’ Association (CDHA) and its provisions are in response to issues raised in the Committee’s Sunset Review. JoAnn Galliano, CDHA, agreed that the bill addresses issues that came out of Sunset Review, and the concern is with the Committee’s next meeting in May 2015. She stated that CDHA’s intent is to get the DHCC on board with the legislation, which must be introduced by the end of February 2015.

DCA Legal Counsel Sabina Knight noted that this language exists in the Moscone-Knox Professional Corporation Act, and there also needs to be a corresponding change to the list of agencies in section 13401.5 to add dental hygiene as a listed corporation, even though permitted by Business and Professions Code section 1962. She questioned striking the last portion of section 1901(a), as it could affect the Committee’s statutory authority. Ms. Galliano noted that the language is in flux and is not final language. Fran Burton, Dental Board President, asked how can a decision be made on legislation that is not in print? She was concerned about the lack of specifics. President Hurlbutt noted that the DHCC can support the
language in concept, and when in print, have a teleconference. DCA Legal Counsel Claire Yazigi noted that once the bill is in print, then the Committee can take an official position. Chair Good thanked Ms. Burton for her comments, noting that the concern is that the bill’s language is too vague, and the motion could be amended to add DHCC’s legal counsels’ comments into the bill. Lisa Okomoto, CDHA, asked if the issues raised by CDHA would also be addressed? M/S/P (Moultrie/ Hurlbutt) to recommend that the Committee agree in concept with the proposed language to address issues raised in the Committee’s Sunset Review, add DHCC’s legal counsels comments into the bill, and direct staff to monitor. M/S/P (Moultrie/Hurlbutt) to recommend that the Committee set a tentative date for a March 2013 teleconference to address the bill’s issues, if necessary.

LEG 9 – California Regulatory Notice Register Schedule and Legislative Calendar for 2015

Ms. Kantner noted that the Legislature reconvened on December 2, 2014 and the last day for bills to be introduced is February 27, 2015. She noted that a teleconference may be needed in March 2015 to address any legislation or regulatory issues.

LEG 10 – Future Agenda Items

Member Moultrie asked for an item to pursue legislation to support the use of a multi-criteria screening process to admit students into dental hygiene educational programs, since under Title 5 of the Education Code, a lottery system must be used. She stated that the Board of Registered Nursing recently successfully pursued legislation allowing such a point system for admission of nursing students rather than a lottery.

LEG 11 – Adjournment

The Legislative and Regulatory Subcommittee meeting adjourned at 2:05 p.m.
Saturday, May 2, 2015

Dental Hygiene Committee of California

Legislative and Regulatory Subcommittee

Agenda Item 5

Discussion and Possible Action Including Recommendations to the Full Committee on the Following Legislation:

Assembly Bill (AB) 12, AB 41, AB 85, AB 179, AB 351, AB 366, AB 483, AB 502, AB 611, AB 648, AB 728, AB 750, AB 797, AB 880, AB 1060, and Senate Bill (SB) 351, SB 800, and any other Legislation of Interest to the Committee
<table>
<thead>
<tr>
<th>Bill No.</th>
<th>Author</th>
<th>Subject</th>
<th>Date of Introduction</th>
<th>Last Amended</th>
<th>Location</th>
<th>Status</th>
<th>Committee Position</th>
<th>Notes</th>
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<tbody>
<tr>
<td>AB 12</td>
<td>Cooley</td>
<td>State Government: administrative regulations: review</td>
<td>12/1/2014</td>
<td>N/A</td>
<td>Assembly Committee on Accountability and Administrative Review</td>
<td>3/23/15 - First hearing cancelled at request of author</td>
<td>Repeal duplicative regulations</td>
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<td>AB 41</td>
<td>Chau</td>
<td>Health Care Coverage: discrimination</td>
<td>12/1/2014</td>
<td>N/A</td>
<td>Assembly Committee on Health</td>
<td>1/22/15 - Referred to Committee on Health</td>
<td>Prohibits discrimination by a health care insurance policy</td>
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<td>AB 85</td>
<td>Wilk</td>
<td>Open Meetings</td>
<td>1/6/2015</td>
<td>4/15/2015</td>
<td>Assembly Committee on Appropriations</td>
<td>4/14/15 - Passed Committee on Governmental Organization</td>
<td>Committees of less than 3 subject to Open Mtgs Act</td>
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<td>AB 179</td>
<td>Assembly Committee on B&amp;P</td>
<td>Dentistry</td>
<td>1/26/2015</td>
<td>N/A</td>
<td>Assembly Committee on Business and Professions</td>
<td>02/02/15 - Referred to Committee on B&amp;P</td>
<td>DBC sunset bill</td>
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<td>AB 333</td>
<td>Melendez</td>
<td>Healing Arts: continuing education</td>
<td>2/13/2015</td>
<td>3/26/2015</td>
<td>Assembly Committee on Business and Professions</td>
<td>4/6/15 - Re-referred to Committee on B&amp;P</td>
<td>CPR CE Credit</td>
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<td>AB 351</td>
<td>Jones-Sawyer</td>
<td>Public Contracts: small business participation</td>
<td>2/27/2015</td>
<td>N/A</td>
<td>Assembly Committee on Accountability and Administrative Review</td>
<td>4/21/15 - Referred to Committee A&amp;AR</td>
<td>25% small business contracts</td>
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<td>AB 366</td>
<td>Bonta</td>
<td>Medi-Cal Reimbursement Rates</td>
<td>2/17/2015</td>
<td>4/7/2015</td>
<td>Assembly Committee on Appropriations</td>
<td>4/15/15 - Referred to Committee on Appropriations</td>
<td>increase in provider rates for Medi-Cal</td>
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<td>AB 410</td>
<td>Obernolte</td>
<td>Documents Submitted to Legislative Committees</td>
<td>2/19/2015</td>
<td>3/26/2015</td>
<td>Assembly Committee on Accountability and Administrative Review</td>
<td>4/06/15 - Referred to Committee A&amp;AR</td>
<td>Legislative reports posted on internet websites</td>
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<td>AB 483</td>
<td>Patterson</td>
<td>Healing Arts: initial license fees: proration</td>
<td>2/23/2015</td>
<td>4/9/2015</td>
<td>Assembly Committee on Appropriations</td>
<td>4/21/15 - Passed out of A-B&amp;P.</td>
<td>Prorate initial license fees</td>
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<td>AB 502</td>
<td>Chau</td>
<td>Dental Hygiene</td>
<td>2/23/2015</td>
<td>4/16/2015</td>
<td>Assembly Committee on Health</td>
<td>4/20/15 - Re-referred to Committee on Health</td>
<td>CDHA's RDHAP bill</td>
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<td>AB 611</td>
<td>Dahle</td>
<td>Controlled Substances: prescriptions: reporting</td>
<td>2/24/2015</td>
<td>4/15/2015</td>
<td>Assembly Committee on Business and Professions</td>
<td>4/21/15 - Hearing canceled at request of author</td>
<td>CURES access for enforcement staff</td>
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<td>AB 648</td>
<td>Low</td>
<td>Community-based Services: virtual dental home program</td>
<td>2/24/2015</td>
<td>N/A</td>
<td>Assembly Committee on Appropriations</td>
<td>4/15/15 - Sent to Suspense file.</td>
<td>Funding for Virtual Dental Home</td>
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<td>AB 750</td>
<td>Low</td>
<td>Business and Professions: retired category: licenses</td>
<td>2/25/2015</td>
<td>4/16/2015</td>
<td>Assembly Committee on Appropriations</td>
<td>4/20/15 - Re-referred to Committee on Appropriations</td>
<td>Authorizes a retired license type</td>
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<td>AB 797</td>
<td>Steinorth</td>
<td>Regulations: effective dates and legislative review</td>
<td>2/26/2015</td>
<td>4/6/2015</td>
<td>Assembly Committee on Appropriations</td>
<td>4/15/15 - Referred to Committee on Appropriations</td>
<td>Review of regulations by the Legislature</td>
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<td>AB 1060</td>
<td>Bonilla</td>
<td>Professions and Vocations: licensure</td>
<td>2/26/2015</td>
<td>3/26/2015</td>
<td>Assembly Committee on Appropriations</td>
<td>4/15/15 - Do pass and refer to Committee on Appropriations (Consent Calendar)</td>
<td>Sending documents to revoked licensees by mail/email</td>
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<td>SB 351</td>
<td>Committee on Banking and Financial Institutions</td>
<td>Corporations</td>
<td>2/24/2015</td>
<td>4/6/2015</td>
<td>Senate Judiciary Committee</td>
<td>4/17/15 - Set for hearing April 21</td>
<td>Incorporation of RDHAPs</td>
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<td>SB 800</td>
<td>Senate B&amp;P Committee</td>
<td>Healing Arts</td>
<td>3/18/2015</td>
<td>4/20/2015</td>
<td>Senate Committee on Business, Professions and Economic Development</td>
<td>4/20/15 - Amended and re-referred to Committee on BPED</td>
<td>B&amp;P Committee omnibus bill</td>
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</tbody>
</table>
This bill would require every state agency, department, board, bureau or other entity to review and revise regulations to eliminate inconsistent, overlapping, duplicative, and outdated provisions and adopt the revisions as emergency regulations by January 1, 2018. Additionally, this bill would require the Business, Consumer Services, and Housing Agency to submit a report to the Governor and Legislature affirming compliance with these provisions. Finally, this bill would require each agency to compile and submit to the Legislature an overview of statutory law the agency administers by January 1, 2017. These provisions would be repealed by January 1, 2019.

Existing law requires state agencies that would like to promulgate a regulation to submit the regulatory package for review to the Office of Administrative Law and to provide notice to the public in order for the agency to accept public comment on the proposal. However, agencies often have outdated, duplicative, or overlapping regulations that are not automatically purged or updated upon the passage of new regulations. This bill seeks to remedy the issue.

In its introduced version, this bill would not significantly impact the DHCC. Workload related to this bill would be performed by staff and is minor and absorbable. DHCC staff would have until January 1, 2018 to conduct the comprehensive review of its regulations and report to the Governor and Legislature upon compliance. In addition, the staff would have until January 1, 2017 to complete the overview of statutory law and submit to the Legislature. Staff does not anticipate the need to promulgate additional regulations due to this bill.

To date, there is no registered support or opposition on file.
ATTACHED:
  1)  AB 12 Language – Introduced Version

COMMITTEE POSITION
The Committee has not yet taken a position on AB 12 (Cooley). The Legislative and Regulatory Subcommittee may consider taking a position and making a recommendation to the full Committee.

COMMITTEE POSITION:  ____Support  _____ Oppose  ______ Neutral  ______ Watch
An act to amend Section 11349.1.5 of, and to add and repeal Chapter 3.6 (commencing with Section 11366) of Part 1 of Division 3 of Title 2 of, the Government Code, relating to state agency regulations.

LEGISLATIVE COUNSEL’S DIGEST

AB 12, as introduced, Cooley. State government: administrative regulations: review.

(1) Existing law authorizes various state entities to adopt, amend, or repeal regulations for various specified purposes. The Administrative Procedure Act requires the Office of Administrative Law and a state agency proposing to adopt, amend, or repeal a regulation to review the proposed changes for, among other things, consistency with existing state regulations.

This bill would, until January 1, 2019, require each state agency to, on or before January 1, 2018, and after a noticed public hearing, review and revise that agency’s regulations to eliminate any inconsistencies, overlaps, or outdated provisions in the regulations, adopt the revisions as emergency regulations, and report to the Legislature and Governor, as specified. The bill would further require each agency to, on or before January 1, 2017, compile an overview of the statutory law that agency administers.

(2) The act requires a state agency proposing to adopt, amend, or repeal a major regulation, as defined, to prepare a standardized regulatory impact analysis of the proposed change. The act requires the office and the Department of Finance to, from time to time, review the
analyses for compliance with specific department regulations. The act further requires the office to, on or before November 1, 2015, submit a report on the analyses to the Senate and Assembly Committees on Governmental Organization, as specified.

This bill would instead require the office and department to annually review the analyses. The bill would also require the office to annually submit a report on the analyses to the Senate Committee on Governmental Organization and the Assembly Committee on Accountability and Administrative Review.


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

SECTION 1. Section 11349.1.5 of the Government Code is amended to read:

11349.1.5. (a) The Department of Finance and the office shall, from time to time, shall annually review the standardized regulatory impact analyses required by subdivision (c) of Section 11346.3 and submitted to the office pursuant to Section 11347.3, for adherence to the regulations adopted by the department pursuant to Section 11346.36.

(b) (1) On or before November 1, 2015, and annually thereafter, the office shall submit to the Senate Committee on Governmental Organization and the Assembly Committee on Accountability and Administrative Review a report describing the extent to which submitted standardized regulatory impact analyses for proposed major regulations for the fiscal year ending in June 30, of that year adhere to the regulations adopted pursuant to Section 11346.36. The report shall include a discussion of agency adherence to the regulations as well as a comparison between various state agencies on the question of adherence. The report may also include any recommendations from the office for actions the Legislature might consider for improving state agency performance. performance and compliance in the creation of the standardized regulatory impact analyses as described in Section 11346.3.

(2) The report shall be submitted in compliance with Section 9795 of the Government Code.
In addition to the annual report required by subdivision (b), the office may notify the Legislature of noncompliance by a state agency with the regulations adopted pursuant to Section 11346.36, in any manner or form determined by the office and shall post the report and notice of noncompliance on the office’s Internet Web site.

SEC. 2. Chapter 3.6 (commencing with Section 11366) is added to Part 1 of Division 3 of Title 2 of the Government Code, to read:

Chapter 3.6. Regulatory Reform

Article 1. Findings and Declarations

11366. The Legislature finds and declares all of the following:

(a) The Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340), Chapter 4 (commencing with Section 11370), Chapter 4.5 (commencing with Section 11400), and Chapter 5 (commencing with Section 11500)) requires agencies and the Office of Administrative Law to review regulations to ensure their consistency with law and to consider impacts on the state’s economy and businesses, including small businesses.

(b) However, the act does not require agencies to individually review their regulations to identify overlapping, inconsistent, duplicative, or out-of-date regulations that may exist.

(c) At a time when the state’s economy is slowly recovering, unemployment and underemployment continue to affect all Californians, especially older workers and younger workers who received college degrees in the last seven years but are still awaiting their first great job, and with state government improving but in need of continued fiscal discipline, it is important that state agencies systematically undertake to identify, publicly review, and eliminate overlapping, inconsistent, duplicative, or out-of-date regulations, both to ensure they more efficiently implement and enforce laws and to reduce unnecessary and outdated rules and regulations.

(d) The purpose of this chapter is to require each agency to compile an overview of the statutory law that agency oversees or administers in its regulatory activity that includes a synopsis of key programs, when each key program was authorized or instituted,
and any emerging challenges the agency is encountering with respect to those programs.

Article 2. Definitions

11366.1. For the purpose of this chapter, the following definitions shall apply:

(a) “State agency” means a state agency, as defined in Section 11000, except those state agencies or activities described in Section 11340.9.

(b) “Regulation” has the same meaning as provided in Section 11342.600.

Article 3. State Agency Duties

11366.2. On or before January 1, 2018, each state agency shall do all of the following:

(a) Review all provisions of the California Code of Regulations applicable to, or adopted by, that state agency.

(b) Identify any regulations that are duplicative, overlapping, inconsistent, or out of date.

(c) Adopt, amend, or repeal regulations to reconcile or eliminate any duplication, overlap, inconsistencies, or out-of-date provisions.

(d) Hold at least one noticed public hearing, that shall be noticed on the Internet Web site of the state agency, for the purposes of accepting public comment on proposed revisions to its regulations.

(e) Notify the appropriate policy and fiscal committees of each house of the Legislature of the revisions to regulations that the state agency proposes to make at least 90 days prior to a noticed public hearing pursuant to subdivision (d) and at least 90 days prior to the proposed adoption, amendment, or repeal of the regulations pursuant to subdivision (f), for the purpose of allowing those committees to review, and hold hearings on, the proposed revisions to the regulations.

(f) Adopt as emergency regulations, consistent with Section 11346.1, those changes, as provided for in subdivision (c), to a regulation identified by the state agency as duplicative, overlapping, inconsistent, or out of date.

(g) (1) Report to the Governor and the Legislature on the state agency’s compliance with this chapter, including the number and
content of regulations the state agency identifies as duplicative, overlapping, inconsistent, or out of date, and the state agency’s actions to address those regulations.

(2) The report shall be submitted in compliance with Section 9795 of the Government Code.

11366.3. (a) On or before January 1, 2018, each agency listed in Section 12800 shall notify a department, board, or other unit within that agency of any existing regulations adopted by that department, board, or other unit that the agency has determined may be duplicative, overlapping, or inconsistent with a regulation adopted by another department, board, or other unit within that agency.

(b) A department, board, or other unit within an agency shall notify that agency of revisions to regulations that it proposes to make at least 90 days prior to a noticed public hearing pursuant to subdivision (d) of Section 11366.2 and at least 90 days prior to adoption, amendment, or repeal of the regulations pursuant to subdivision (f) of Section 11366.2. The agency shall review the proposed regulations and make recommendations to the department, board, or other unit within 30 days of receiving the notification regarding any duplicative, overlapping, or inconsistent regulation of another department, board, or other unit within the agency.

11366.4. An agency listed in Section 12800 shall notify a state agency of any existing regulations adopted by that agency that may duplicate, overlap, or be inconsistent with the state agency’s regulations.

11366.43. On or before January 1, 2017, each state agency shall compile an overview of the statutory law that state agency oversees or administers. The overview shall include a synopsis of the state agency’s key programs, when each program was authorized or instituted, when any statute authorizing a program was significantly revised to alter, redirect, or extend the original program and the reason for the revision, if known, and an identification of any emerging challenges the state agency is encountering with respect to the programs.

11366.45. This chapter shall not be construed to weaken or undermine in any manner any human health, public or worker rights, public welfare, environmental, or other protection established under statute. This chapter shall not be construed to
affect the authority or requirement for an agency to adopt
regulations as provided by statute. Rather, it is the intent of the
Legislature to ensure that state agencies focus more efficiently and
directly on their duties as prescribed by law so as to use scarce
public dollars more efficiently to implement the law, while
achieving equal or improved economic and public benefits.

Article 4. Chapter Repeal

11366.5. This chapter shall remain in effect only until January
1, 2019, and as of that date is repealed, unless a later enacted
statute, that is enacted before January 1, 2019, deletes or extends
that date.
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<th>Bill Number: AB 41</th>
<th>AUTHOR: Assembly Member CHAU</th>
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<td>SPONSOR: California Chiropractic Association</td>
<td>VERSION: Introduced – 12/1/14</td>
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<tr>
<td>INTRODUCED: December 1, 2014</td>
<td>BILL STATUS: Hearing on April 28</td>
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<tr>
<td>BILL LOCATION: Assembly Health Committee</td>
<td>HISTORY:</td>
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<td>01/22/15 – Referred to Committee on Health</td>
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<td>12/02/14 – From printer. May be heard in committee January 1.</td>
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<td>AGENDA ITEM: LEG 5b - AB 41 (Chau)</td>
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<td>SUBJECT: Health care coverage: discrimination</td>
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**SUMMARY**

This bill would codify the federal law protection that prohibits health plans from discriminating against any professional category of healthcare provider who is acting within their scope of practice. Specifically, the bill would prohibit a health care service plan contract or health insurance policy (issued on or after January 1, 2014) from discriminating against any health care provider who is acting within the scope of that provider’s license.

**ANALYSIS**

Current federal law bans discrimination by a group health plan and a health insurance issuer against health care providers that are acting within their scope of the provider’s license or certification under California law. Current state law provides for the regulation of health care service plans and health insurers by the Department of Managed Health Care (DMHC) and the Department of Insurance.

This bill would clarify that the DMHC and the Department of Insurance have the authority to enforce the ban on provider discrimination just as they have the authority to enforce against other discriminatory acts by health care service plans and insurers. According to the author’s office, health plans and insurance companies commonly limit types of health care providers allowed to provide services.

This bill does not directly impact the DHCC’s Act under Business and Professions Code; however, it does add new sections of law to the Health and Safety Code and the Insurance Code relating to federal health insurance reimbursement requirements. In addition, this bill does not require health plans to contract with any individual provider who is willing to abide by the terms and conditions for participation established by the plan or issuer, but rather prohibits exclusion of an entire class of provider for discriminatory reasons. Also, the bill does not prevent a health care service plan or health insurer from establishing varying reimbursement rates based on quality or performance measures.
SUPPORT/OPPOSITION

Support:
- California Chiropractic Association (Sponsor)
- California Association of Nurse Anesthetists
- California Naturopathic Doctors Association

Opposition:
- California Medical Association
- CSAC Insurance Excess Authority

TYPE OF BILL
Active Bill – In Committee Process
Majority Vote Required
Non-Appropriation
Non-Urgency
Fiscal Committee
State-Mandated Local Program
Non-Tax Levy

ATTACHED:
1) AB 41 Language – Introduced version

COMMITTEE POSITION
The Committee has not yet taken a position on AB 41 (Chau). The Legislative and Regulatory Subcommittee may consider taking a position and making a recommendation to the Full Committee.

COMMITTEE POSITION: _____Support _____ Oppose ______ Neutral ______ Watch
ASSEMBLY BILL No. 41

Introduced by Assembly Member Chau

December 1, 2014

An act to add Section 1373.15 to the Health and Safety Code, and to add Section 10177.15 to the Insurance Code, relating to health care coverage.

LEGISLATIVE COUNSEL’S DIGEST

AB 41, as introduced, Chau. Health care coverage: discrimination. Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the 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 prohibits certain discriminatory acts by health care service plans and health insurers. Existing federal law, beginning January 1, 2014, prohibits a group health plan and a health insurance issuer offering group or individual health insurance coverage from discriminating with respect to participation under the plan or coverage against any health care provider who is acting within the scope of that provider’s license or certification under applicable state law.

Beginning January 1, 2016, this bill would prohibit a health care service plan or health insurer from discriminating against any health care provider who is acting within the scope of that provider’s license or certification, as specified.

Because a willful violation of the bill’s provisions relative to health care service plans would be a crime, this bill would impose a state-mandated local program.
The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement. This bill would provide that no reimbursement is required by this act for a specified reason.


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

SECTION 1. Section 1373.15 is added to the Health and Safety Code, to read:

1373.15. (a) Beginning January 1, 2016, no health care service plan shall discriminate with respect to provider participation or coverage under the plan against any health care provider who is acting within the scope of that provider’s license or certification under applicable state law, including an initiative act.

(b) Notwithstanding subdivision (a), this section shall not be construed to require that a health care service plan contract with any health care provider willing to abide by the terms and conditions for participation established by the plan or issuer.

(c) Nothing in this section shall be construed as preventing a health care service plan from establishing varying reimbursement rates based on quality or performance measures.

(d) This section shall be implemented only to the extent required by the provider nondiscrimination provisions established in Section 2706 of the federal Public Health Service Act (42 U.S.C. Sec. 300gg-5), and any federal rules or regulations issued under that section.

SEC. 2. Section 10177.15 is added to the Insurance Code, to read:

10177.15. (a) Beginning January 1, 2016, no health insurer shall discriminate with respect to provider participation or coverage under the policy against any health care provider who is acting within the scope of that provider’s license or certification under applicable state law, including an initiative act.

(b) Notwithstanding subdivision (a), this section shall not be construed to require that a health insurer contract with any health care provider willing to abide by the terms and conditions for participation established by the insurer or issuer.
(c) Nothing in this section shall be construed as preventing a health insurer from establishing varying reimbursement rates based on quality or performance measures.

(d) This section shall be implemented only to the extent required by the provider nondiscrimination provisions established in Section 2706 of the federal Public Health Service Act (42 U.S.C. Sec. 300gg-5), and any federal rules or regulations issued under that section.

SEC. 3. No reimbursement is required by this act pursuant to Section 6 of Article XIII B of the California Constitution because the only costs that may be incurred by a local agency or school district will be incurred because this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty for a crime or infraction, within the meaning of Section 17556 of the Government Code, or changes the definition of a crime within the meaning of Section 6 of Article XIII B of the California Constitution.
SUMMARY
This bill would require two-member advisory committees or panels of a “state body” (as defined in the Bagley-Keene Open Meeting Act) to hold open, public meetings if at least one member of the advisory committee is a member of the larger state body and the advisory committee is supported, in whole or in part, by state funds. This is an urgency bill and would take effect immediately, pending passage in both houses and the Governor’s signature.

ANALYSIS
This bill would impact the Committee’s ability to create a two-member standing subcommittee which has a continuing subject matter jurisdiction, or a meeting schedule that is fixed by resolution, policy, bylaws or formal action of the Committee. Meetings of such a two-member subcommittee would have to be publicly noticed and meeting location expenses and staff travel would be incurred to support the usual public meeting arrangements.

The author’s office states this bill is simply intended to clarify that all standing committees, including advisory committees, are subject to the transparency of open meeting regulations regardless of committee size or membership. This bill is almost identical to last year’s AB 2058 (Wilk, 2014).

SUPPORT/OPPosition
To date, there is no registered support or opposition on file.

TYPE OF BILL
Active Bill – In Committee Process
Two-Thirds Vote Required
Non-Appropriation
Fiscal Committee

Urgency
Non-State-Mandated Local Program
Non-Tax Levy

ATTACHED:
1) AB 85 (Wilk) Language – As Amended April 15, 2015
COMMITTEE POSITION
The Committee has not yet taken a position on AB 85 (Wilk). The Legislative and Regulatory Subcommittee may consider taking a position and making a recommendation to the full Committee.

COMMITTEE POSITION: ____Support _____ Oppose _____ Neutral _____ Watch
An act to amend Section 11121 of the Government Code, relating to state government, and declaring the urgency thereof, to take effect immediately.

LEGISLATIVE COUNSEL’S DIGEST

AB 85, as amended, Wilk. Open meetings.

The Bagley-Keene Open Meeting Act requires that all meetings of a state body, as defined, be open and public and that all persons be permitted to attend and participate in a meeting of a state body, subject to certain conditions and exceptions.

This bill would specify that the definition of “state body” includes an advisory board, advisory commission, advisory committee, advisory subcommittee, or similar multimember advisory body of a state body that consists of 3 or more individuals, as prescribed, except a board, commission, committee, or similar multimember body on which a member of a body serves in his or her official capacity as a representative of that state body and that is supported, in whole or in part, by funds provided by the state body, whether the multimember body is organized and operated by the state body or by a private corporation.

This bill would make legislative findings and declarations, including, but not limited to, a statement of the Legislature’s intent that this bill is declaratory of existing law.
This bill would declare that it is to take effect immediately as an urgency statute.

Vote: $\frac{2}{3}$. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

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

SECTION 1. The Legislature finds and declares all of the following:

(a) The unpublished decision of the Third District Court of Appeals in Funeral Security Plans v. State Board of Funeral Directors (1994) 28 Cal. App. 4th 1470 is an accurate reflection of legislative intent with respect to the applicability of the Bagley-Keene Open Meeting Act (Article 9 (commencing with Section 11120) of Chapter 1 of Part 1 of Division 3 of Title 2 of the Government Code) to a two-member standing advisory committee of a state body.

(b) A two member committee of a state body, even if operating solely in an advisory capacity, already is a “state body,” as defined in subdivision (d) of Section 11121 of the Government Code, if a member of the state body sits on the committee and the committee receives funds from the state body.

(c) It is the intent of the Legislature that this bill is declaratory of existing law.

SECTION 1. Section 11121 of the Government Code is amended to read:

11121. As used in this article, “state body” means each of the following:

(a) Every state board, or commission, or similar multimember body of the state that is created by statute or required by law to conduct official meetings and every commission created by executive order.

(b) A board, commission, committee, or similar multimember body that exercises any authority of a state body delegated to it by that state body.

(c) An advisory board, advisory commission, advisory committee, advisory subcommittee, or similar multimember advisory body of a state body, if created by formal action of the state body or of any member of the state body, and if the advisory
(d) A board, commission, committee, or similar multimember body on which a member of a body that is a state body pursuant to this section serves in his or her official capacity as a representative of that state body and that is supported, in whole or in part, by funds provided by the state body, whether the multimember body is organized and operated by the state body or by a private corporation.

SEC. 2. This act is an urgency statute necessary for the immediate preservation of the public peace, health, or safety within the meaning of Article IV of the Constitution and shall go into immediate effect. The facts constituting the necessity are:

In order to avoid unnecessary litigation and ensure the people’s right to access the meetings of public bodies pursuant to Section 3 of Article 1 of the California Constitution, it is necessary that this act take effect immediately.
SUMMARY
This bill would extend the provisions authorizing the Dental Board (Board) from January 1, 2016 to January 1, 2020.

ANALYSIS
Existing law establishes the Board under the Department of Consumer Affairs. Currently, the composition of the Board is eight (8) practicing dentists, one (1) registered dental hygienist, one (1) registered dental assistant, and five (5) public members. Current provisions are in effect until January 1, 2016 unless extended by the appropriate policy committees of the California Legislature. This bill would extend the sunset date of the Board to January 1, 2020. This bill would amend the Dental Practice Act and extend the Board’s sunset date to January 1, 2020.

SUPPORT/OPPOSITION
To date, there is no registered support or opposition on file. The Dental Board took a WATCH position during their February 2015 meeting.

TYPE OF BILL
Active Bill – In Committee Process
Majority Vote Required
Non-Appeal
Fiscal Committee
Non-Urgency
Non-State-Mandated Local Program
Non-Tax Levy

ATTACHED:
1) AB 179 Language – Introduced Version

COMMITTEE POSITION
The Committee has not yet taken a position on AB 179. The Legislative and Regulatory Subcommittee may consider taking a position and making a recommendation to the full Committee.

COMMITTEE POSITION: ___Support _____ Oppose ______ Neutral ______ Watch
An act to amend Sections 1601.1 and 1616.5 of the Business and Professions Code, relating to dentistry.

LEGISLATIVE COUNSEL’S DIGEST

AB 179, as introduced, Committee on Business and Professions. Dentistry.

Existing law provides for the Dental Board of California within the Department of Consumer Affairs, which consists of 8 practicing dentists, a registered dental hygienist, a registered dental assistant, and 5 public members, and authorizes the board to appoint an executive officer to exercise powers and perform duties delegated by the board to him or her. These provisions are in effect only until January 1, 2016, and upon repeal of those provisions the board will be subject to review by the appropriate policy committees of the Legislature.

This bill would extend those provisions until January 1, 2020.


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

1 SECTION 1. Section 1601.1 of the Business and Professions Code is amended to read:
1601.1. (a) There shall be in the Department of Consumer Affairs the Dental Board of California in which the administration of this chapter is vested. The board shall consist of eight practicing dentists, one registered dental hygienist, one registered dental assistant, and five public members. Of the eight practicing dentists, one shall be a member of a faculty of any California dental college, and one shall be a dentist practicing in a nonprofit community clinic. The appointing powers, described in Section 1603, may appoint to the board a person who was a member of the prior board. The board shall be organized into standing committees dealing with examinations, enforcement, and other subjects as the board deems appropriate.

(b) For purposes of this chapter, any reference in this chapter to the Board of Dental Examiners shall be deemed to refer to the Dental Board of California.

(c) The board shall have all authority previously vested in the existing board under this chapter. The board may enforce all disciplinary actions undertaken by the previous board.

(d) This section shall remain in effect only until January 1, 2016, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2016, deletes or extends that date. Notwithstanding any other provision of law, the repeal of this section renders the board subject to review by the appropriate policy committees of the Legislature.

SEC. 2. Section 1616.5 of the Business and Professions Code is amended to read:

1616.5. (a) The board, by and with the approval of the director, may appoint a person exempt from civil service who shall be designated as an executive officer and who shall exercise the powers and perform the duties delegated by the board and vested in him or her by this chapter.

(b) This section shall remain in effect only until January 1, 2016, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2016, deletes or extends that date.
SUMMARY
This bill would require all state agencies to establish an annual goal of 25 percent small business participation in contracting. Any agency not meeting that goal would be required to submit a corrective action plan to the Department of General Services within 45 days of the end of each fiscal year.

ANALYSIS
Existing law requires the Department of General Service’s (DGS) Director and the heads of other state agencies that enter into contracts for the provision of goods, services, and information technology, and for the construction of state facilities to establish goals for the participation of small businesses in these contracts, to provide for small business preference in the award of these contracts, to give special consideration and special assistance to small businesses, and, whenever possible, to make awards to small businesses.

This bill would require each state agency to establish and achieve a 25% small business participation goal. Specifically, this bill would:

- Establish a 25% small business participation goal for contracting activities by state agencies, boards, departments, and commissions.
- Assign the responsibility for achieving this goal to the heads of the contracting departments and requires them to annually report his or her agency's progress in meeting the goal.
- Require agencies that fail to meet their annual small business procurement participation goal to submit a corrective plan to the Department of General Services (DGS) within 45 days of the close of any fiscal year.
- Require DGS to regularly monitor the progress agencies are making in meeting the 25% goal and to regularly share related information with the Office of the Small Business Advocate (OSBA) including providing a copy of the corrective action plans. DGS and the OSBA are directed to assist agencies, to the extent feasible, in implementing their corrective action plans.
- Require all state agencies to use the streamlined small business procurement process for contracts under $100,000 and construction contracts under $120,000.
SUPPORT/OPPOSITION

Support:
- California Asian Pacific Chamber of Commerce

Opposition:
- No registered support on file.

TYPE OF BILL

Active Bill – In Committee Process
Majority Vote Required
Non-Appropriation
Fiscal Committee

Non-Urgency
Non-State-Mandated Local Program
Non-Tax Levy

ATTACHED:
1) Language for AB 351 (Jones-Sawyer) – Introduced version

COMMITTEE POSITION

The Committee has not yet taken a position on AB 351 (Cooley). The Legislative and Regulatory Subcommittee may consider taking a position and making a recommendation to the full Committee.

COMMITTEE POSITION: _____Support _____ Oppose _____ Neutral _____ Watch
An act to add Section 14838.8 to the Government Code, relating to public contracts.

LEGISLATIVE COUNSEL’S DIGEST

AB 351, as introduced, Jones-Sawyer. Public contracts: small business participation.

The Small Business Procurement and Contract Act requires the Director of General Services and the heads of other state agencies that enter into contracts for the provision of goods, services, and information technology and for the construction of state facilities to establish goals for the participation of small businesses in these contracts, to provide for small business preference in the award of these contracts, to give special consideration and special assistance to small businesses, and, whenever possible, to make awards to small businesses, as specified.

This bill would require all state agencies, departments, boards, and commissions to establish and achieve an annual goal of 25% small business participation in state procurements and contracts, to ensure that the state’s procurement and contract processes are administered in order to meet or exceed the goal, and to report to the director statistics regarding small business participation in the agency’s procurements and contracts.

The bill would require the Department of General Services to monitor the progress of the agencies toward meeting the goal and to provide this information to the Office of Small Business Advocate.
The bill would also require a state agency, department, board, or commission that has not achieved the goal by the close of the fiscal year to submit a corrective action plan to the department within 45 days. The bill would require the department, in collaboration with the Office of Small Business Advocate, to undertake reasonable means to assist agencies in improving small business participation in their contracting.

The bill would require all state agencies, departments, boards, and commissions to use a contracting procedure established in the act for specified contracts with small businesses whenever possible.

The bill would also require the Office of Small Business Advocate to collaborate with the department to cooperatively enhance the state’s small business program by helping small businesses access capital and other financial resources necessary to successfully fulfill state contracts.

The bill would apply to all state public entities that receive state public funding, including the California State University, the University of California, and the California Community Colleges. In calculating the total amount of contracting covered by this bill, the California State University, the University of California, and the California Community Colleges would only be required to meet the 25% goal for state funding used in contracting.


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

SECTION 1. Section 14838.8 is added to the Government Code, to read:

(a) In order to encourage small business participation in state contracts, all state agencies, departments, boards, and commissions shall establish and achieve an annual goal of 25 percent small business participation in state procurements and contracts.

(b) Notwithstanding any other provision of this chapter, the heads of all state agencies, departments, boards, and commissions shall ensure that the state’s procurement and contract processes are administered in order to meet or exceed the 25 percent small business participation goal, and shall report to the director statistics regarding small business annual participation in his or her agency’s procurements and contracts.
(c) The Department of General Services shall monitor the progress of all state agencies, departments, boards, and commissions toward meeting the 25 percent small business participation goal. The department shall regularly share information with the Office of Small Business Advocate on the progress of each individual agency, department, board, and commission in meeting the annual goal, including, but not limited to, providing copies of corrective action plans.

(d) (1) A state agency, department, board, or commission that has not achieved the 25 percent small business participation goal by the close of the fiscal year shall submit a corrective action plan to the Department of General Services within 45 days.

(2) The Department of General Services, in collaboration with the Office of Small Business Advocate, shall undertake reasonable means to assist agencies in improving small business participation in their contracting, including entering into memoranda of understanding with the agencies that have not met the goal to improve performance.

(e) All state agencies, departments, boards, and commissions shall use the contracting procedure authorized in Section 14838.5 to contract with small businesses for goods and services contracts under one hundred thousand dollars ($100,000) and construction contracts under one hundred twenty thousand dollars ($120,000) whenever possible.

(f) The Department of General Services shall actively promote small business certification, help small businesses market their products, goods, and services to the state, and promote the use of technologies and other innovative solutions for notifying small businesses of state contracting opportunities, including, but not limited to, the Subscription Outreach Service of the California State Contracts Register.

(g) The Department of General Services shall collaborate with the Office of the Small Business Advocate in the office’s work to assist small businesses access capital and other financial resources necessary to successfully fulfill state contracts.

(h) This section applies to all state agencies, departments, boards, commissions, and other state public entities that receive state funding including the University of California, the California State University, and the California Community Colleges. In calculating the total amount of contracting covered by this section,
the University of California, the California State University, and
the California Community Colleges shall only be required to meet
the 25 percent goal for state funding used in contracting.
SUMMARY
This bill would increase rates paid to providers in the Medi-Cal program to the comparable rate paid in the Medicare program. More notably, the bill would increase reimbursement rates for Denti-Cal providers by equivalent rate of increase for other Medi-Cal providers, for the purpose of ensuring access to medically necessary dental services and to comply with federal Medicaid requirements regarding access to care and services.

ANALYSIS
Existing law established the Medi-Cal program, administered by the Department of Health Care Services, under which qualified low-income patients receive health care benefits. Medi-Cal is California's version of the federal Medicaid program in which funding is provided by both the state and federal government. Current law requires Medi-Cal provider payments and payments to Medi-Cal managed care plans to be reduced by 10% for dates of service on and after June 1, 2011.

According to the author, this bill would provide critical stability to health care provider networks and ensure access to health care services for people receiving services in the Medi-Cal program. In relation to dental professionals, this bill would increase reimbursement rates for Denti-Cal providers to the equivalent rate of the percentage increase for other Medi-Cal providers, to the amounts reimbursed by the federal Medicare program in order to ensure access to medically necessary dental services, and to comply with federal Medicaid requirements that care and services are available to Medi-Cal enrollees at least to the extent that care and services are available to the general population in the geographic area.

SUPPORT/OPPosition
Support:
- We Care for California (sponsor)
- Adventist Health
- Alliance of Catholic Health Care
- American Federation of State, County and Municipal Employees (AFSCME), AFL-CIO
• AMR
• Anthem Blue Cross
• The Arc and United Cerebral Palsy California Collaboration
• Association of California Healthcare Districts
• Association of Northern California Oncologists
• Blue Shield of California
• California Academy of Audiology
• California Academy of Family Physicians
• California Ambulance Association
• California Association of Medical Products Suppliers
• California Association of Physician Groups
• California Chapter of the American College of Emergency Physicians
• California Children's Hospital Association
• California Clinical Laboratory Association
• California Commission on Aging
• California Dental Association

Opposition:
• No registered support on file.

TYPE OF BILL
Active Bill – In Committee Process Urgency
Two Thirds Vote Required Non-State-Mandated Local Program
Non-Appropriation Non-Tax Levy
Fiscal Committee

ATTACHED:
1) Language for AB 366 (Bonta) – 4/7/15 Version

COMMITTEE POSITION
The Committee has not yet taken a position on AB 366 (Bonta). The Legislative and Regulatory Subcommittee may consider taking a position and making a recommendation to the full Committee.

COMMITTEE POSITION: _____Support _____ Oppose _____ Neutral _____ Watch
ASSEMBLY BILL No. 366

Introduced by Assembly Member Bonta
(Principal coauthor: Senator Hernandez)
(Coauthors: Assembly Members Achadjian, Campos, Cooper, Dababneh, Levine, Lopez, Low, Maienschein, Nazarian, Rendon, Santiago, Steinorth, Thurmond, Ting, and Waldron)
(Coauthors: Senators Galgiani, Hertzberg, Pan, Pavley, Roth, Stone, Wieckowski, and Wolk)

February 17, 2015

An act to amend Section 14105.28 of, and to add Sections 14105.194, 14105.196, and 14301.6 to, the Welfare and Institutions Code, relating to Medi-Cal and declaring the urgency thereof, to take effect immediately.

LEGISLATIVE COUNSEL’S DIGEST


(1) Existing law establishes the Medi-Cal program, administered by the State Department of Health Care Services, under which health care services are provided to qualified, low-income persons. The Medi-Cal program is, in part, governed and funded by federal Medicaid provisions. Existing law requires the department to develop and implement a Medi-Cal inpatient hospital reimbursement payment methodology based on diagnosis-related groups, subject to federal approval, that reflects the costs and staffing levels associated with quality of care for patients in all general acute care hospitals, as specified. Existing law generally
requires the diagnosis-related group-based payments to apply to all claims.

This bill would require claims for payments pursuant to the inpatient hospital reimbursement methodology described above to be increased by 16 percent for the 2015–16 fiscal year, and would require, commencing July 1, 2016, and annually thereafter, the department to increase each diagnosis-related group payment claim amount based, at a minimum, on increases in the medical component of the California Consumer Price Index. Commencing with the 2015–16 fiscal year, and annually thereafter, the bill would require managed care rates for Medi-Cal managed care health plans to be increased by a proportionately equal amount for increased payments for hospital services.

(2) Existing law requires, except as otherwise provided, Medi-Cal provider payments to be reduced by 1% or 5%, and provider payments for specified non-Medi-Cal programs to be reduced by 1%, for dates of service on and after March 1, 2009, and until June 1, 2011. Existing law requires, except as otherwise provided, Medi-Cal provider payments and payments for specified non-Medi-Cal programs to be reduced by 10% for dates of service on and after June 1, 2011.

This bill would, instead, prohibit the application of those reductions for payments to providers for dates of service on or after June 1, 2011. The bill would also require payments for managed care health plans for dates of service following the effective date of the bill to be determined without application of some of those reductions. The bill would require the Director of Health Care Services to implement this provision to the maximum extent permitted by federal law and for the maximum time period for which the director obtains federal approval for federal financial participation for those payments.

(3) Prior law required, beginning January 1, 2013, through and including December 31, 2014, that payments for primary care services provided by specified physicians be no less than 100% of the payment rate that applies to those services and physicians as established by the Medicare Program, for both fee-for-service and managed care plans.

This bill, commencing January 1, 2016, would require, only to the extent permitted by federal law and that federal financial participation is available, payments for specified medical care services to not be less than 100% of the payment rate that applies to those services as established by the Medicare Program, for both fee-for-service and
managed care plans, program for services rendered by fee-for-service providers, and would require rates paid to Medi-Cal managed care plans to be actuarially equivalent to payment rates established by the Medicare program. The bill would authorize the department to implement those provisions through provider bulletins without taking regulatory action until regulations are adopted, and would require the department to adopt those regulations by July 1, 2018. The bill would require, commencing July 1, 2016, the department to provide a status report to the Legislature on a semiannual basis until regulations have been adopted.

(4) Under existing law, one of the methods by which Medi-Cal services are provided is pursuant to contracts with various types of managed care plans.

This bill would require, to the extent federal financial participation is not jeopardized, the department to pay Medi-Cal managed care plans rate range increases at a minimum level of 100% of the rate range available with respect to all enrollees who are not subject to the rate range payment requirements that are applicable to all enrollees who are newly eligible beneficiaries assigned to county public hospital health systems:

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


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

1 SECTION 1. Section 14105.28 of the Welfare and Institutions Code is amended to read:
2 14105.28. (a) It is the intent of the Legislature to design a new
3 Medi-Cal inpatient hospital reimbursement methodology based
4 on diagnosis-related groups that more effectively ensures all of
5 the following:
6 (1) Encouragement of access by setting higher payments for
7 patients with more serious conditions.
8 (2) Rewards for efficiency by allowing hospitals to retain
9 savings from decreased length of stays and decreased costs per
10 day.

98
(3) Improvement of transparency and understanding by defining
the “product” of a hospital in a way that is understandable to both
clinical and financial managers.

(4) Improvement of fairness so that different hospitals receive
similar payment for similar care and payments to hospitals are
adjusted for significant cost factors that are outside the hospital’s
control.

(5) Encouragement of administrative efficiency and minimizing
administrative burdens on hospitals and the Medi-Cal program.

(6) That payments depend on data that has high consistency and
credibility.

(7) Simplification of the process for determining and making
payments to the hospitals.

(8) Facilitation of improvement of quality and outcomes.

(9) Facilitation of implementation of state and federal provisions
related to hospital acquired conditions.

(10) Support of provider compliance with all applicable state
and federal requirements.

(b) (1) (A) (i) The department shall develop and implement
a payment methodology based on diagnosis-related groups, subject
to federal approval, that reflects the costs and staffing levels
associated with quality of care for patients in all general acute care
hospitals in state and out of state, including Medicare critical access
hospitals, but excluding public hospitals, psychiatric hospitals,
and rehabilitation hospitals, which include alcohol and drug
rehabilitation hospitals.

(ii) The payment methodology developed pursuant to this section
shall be implemented on July 1, 2012, or on the date upon which
the director executes a declaration certifying that all necessary
federal approvals have been obtained and the methodology is
sufficient for formal implementation, whichever is later.

(iii) Claims for payments pursuant to the payment methodology
based on diagnosis-related groups established under this section
shall be increased by 16 percent for the 2015–16 fiscal year.

Managed care rates to Medi-Cal managed care health plans shall
be increased by a proportionately equal amount for increased
payments for hospital services for the 2015–16 fiscal year.

(iv) Commencing July 1, 2016, and annually thereafter, the
department shall increase each diagnosis-related group payment
claim amount based, at a minimum, on increases in the medical
component of the California Consumer Price Index. **Commencing July 1, 2016, and annually thereafter, managed care rates to Medi-Cal managed care health plans shall be increased by a proportionately equal amount for increased payments for hospital services.**

(B) The diagnosis-related group-based payments shall apply to all claims, except claims for psychiatric inpatient days, rehabilitation inpatient days, managed care inpatient days, and swing bed stays for long-term care services, provided, however, that psychiatric and rehabilitation inpatient days shall be excluded regardless of whether the stay was in a distinct-part unit. The department may exclude or include other claims and services as may be determined during the development of the payment methodology.

(C) Implementation of the new payment methodology shall be coordinated with the development and implementation of the replacement Medicaid Management Information System pursuant to the contract entered into pursuant to Section 14104.3, effective on May 3, 2010.

(2) The department shall evaluate alternative diagnosis-related group algorithms for the new Medi-Cal reimbursement system for the hospitals to which paragraph (1) applies. The evaluation shall include, but not be limited to, consideration of all of the following factors:

(A) The basis for determining diagnosis-related group base price, and whether different base prices should be used taking into account factors such as geographic location, hospital size, teaching status, the local hospital wage area index, and any other variables that may be relevant.

(B) Classification of patients based on appropriate acuity classification systems.

(C) Hospital case mix factors.

(D) Geographic or regional differences in the cost of operating facilities and providing care.

(E) Payment models based on diagnosis-related groups used in other states.

(F) Frequency of grouper updates for the diagnosis-related groups.

(G) The extent to which the particular grouping algorithm for the diagnosis-related groups accommodates ICD-10 diagnosis and
procedure codes, and applicable requirements of the federal Health
Insurance Portability and Accountability Act of 1996.

(H) The basis for calculating relative weights for the various
diagnosis-related groups.

(I) Whether policy adjusters should be used, for which care
categories they should be used, and the frequency of updates to
the policy adjusters.

(J) The extent to which the payment system is budget neutral
and can be expected to result in state budget savings in future
years.

(K) Other factors that may be relevant to determining payments,
including, but not limited to, add-on payments, outlier payments,
capital payments, payments for medical education, payments in
the case of early transfers of patients, and payments based on
performance and quality of care.

(c) The department shall submit to the Legislature a status report
on the implementation of this section on April 1, 2011, April 1,
2012, April 1, 2013, and April 1, 2014.

(d) The alternatives for a new system described in paragraph
(2) of subdivision (b) shall be developed in consultation with
recognized experts with experience in hospital reimbursement,
economists, the federal Centers for Medicare and Medicaid
Services, and other interested parties.

(e) In implementing this section, the department may contract,
as necessary, on a bid or nonbid basis, for professional consulting
services from nationally recognized higher education and research
institutions, or other qualified individuals and entities not
associated with a particular hospital or hospital group, with
demonstrated expertise in hospital reimbursement systems. The
rate setting system described in subdivision (b) shall be developed
with all possible expediency. This subdivision establishes an
accelerated process for issuing contracts pursuant to this section
and contracts entered into pursuant to this subdivision shall be
exempt from the requirements of Chapter 1 (commencing with
Section 10100) and Chapter 2 (commencing with Section 10290)
of Part 2 of Division 2 of the Public Contract Code.

(f) (1) The department may adopt emergency regulations to
implement the provisions of this section in accordance with
rulemaking provisions of the Administrative Procedure Act
(Chapter 3.5 (commencing with Section 11340) of Part 1 of
Division 3 of Title 2 of the Government Code). The initial adoption
of emergency regulations and one readoption of the initial
regulations shall be deemed to be an emergency and necessary for
the immediate preservation of the public peace, health and safety,
or general welfare. Initial emergency regulations and the one
readoption of those regulations shall be exempt from review by
the Office of Administrative Law. The initial emergency
regulations and the one readoption of those regulations authorized
by this section shall be submitted to the Office of Administrative
Law for filing with the Secretary of State and publication in the
California Code of Regulations.

(2) As an alternative to paragraph (1), and notwithstanding the
rulemaking provisions of Chapter 3.5 (commencing with Section
11340) of Part 1 of Division 3 of Title 2 of the Government Code,
or any other law, the department may implement and administer
this section by means of provider bulletins, all-county letters,
manuals, or other similar instructions, without taking regulatory
action. The department shall notify the fiscal and appropriate policy
committees of the Legislature of its intent to issue a provider
bulletin, all-county letter, manual, or other similar instruction, at
least five days prior to issuance. In addition, the department shall
provide a copy of any provider bulletin, all-county letter, manual,
or other similar instruction issued under this paragraph to the fiscal
and appropriate policy committees of the Legislature.

SEC. 2. Section 14105.194 is added to the Welfare and
Institutions Code, to read:

14105.194. (a) Notwithstanding Sections 14105.07, 14105.191,
14105.192, and 14105.193, payments to providers for dates of
service on or after June 1, 2011, shall be determined without
application of the reductions in Sections 14105.07, 14105.191,
14105.192, and 14105.193, except as otherwise provided in this
section.

(b) Notwithstanding Sections 14105.07 and 14105.192, and
except as otherwise provided in this section, for managed care
health plans that contract with the department pursuant to this
chapter or Chapter 8 (commencing with Section 14200), payments
for dates of service following the effective date of the act adding
this section shall be determined without application of the
reductions, limitations, and adjustments in Sections 14105.07 and
14105.192.
(c) The director shall implement this section to the maximum extent permitted by federal law and for the maximum time period for which the director obtains federal approval for federal financial participation for the payments provided for in this section.

(d) The director shall promptly seek all necessary federal approvals to implement this section.

SEC. 3. Section 14105.196 is added to the Welfare and Institutions Code, to read:

14105.196. (a) It is the intent of the Legislature to:

(1) Maintain the increased reimbursement rates for primary care providers in the Medi-Cal program upon expiration of the temporary increase provided for under Chapter 23 of the Statutes of 2012, as amended by Chapter 438 of the Statutes of 2012, in order to ensure adequate access to these providers.

(2) To increase reimbursement rates for other Medi-Cal providers to the amounts reimbursed by the federal Medicare program in order to ensure access to medically necessary health care services, and to comply with federal Medicaid requirements that care and services are available to Medi-Cal enrollees at least to the extent that care and services are available to the general population in the geographic area.

(3) Increase reimbursement rates for Denti-Cal providers to the equivalent rate of the percentage increase for other Medi-Cal providers to the amounts reimbursed by the federal Medicare program in order to ensure access to medically necessary dental services, and to comply with federal Medicaid requirements that care and services are available to Medi-Cal enrollees at least to the extent that care and services are available to the general population in the geographic area.

(b) Beginning January 1, 2016, to the extent permitted by federal law and regulations, payments—

(A) Commencing January 1, 2016, payments for medical care services rendered by fee-for-service Medi-Cal providers, including dental providers, shall not be less than 100 percent of the payment rate that applies to those services as established by the Medicare program, for both fee-for-service and managed care plans.

(B) Commencing January 1, 2016, rates paid to Medi-Cal managed care plans shall be actuarially equivalent to the payment rate established under the Medicare program.
(2) This subdivision shall be implemented only to the extent permitted by federal law and regulations.

(c) Notwithstanding any other law, to the extent permitted by federal law and regulations, the payments for medical care services made pursuant to this section shall be exempt from the payment reductions under Sections 14105.191 and 14105.192.

(d) Payment increases made pursuant to this section shall not apply to provider rates of payment described in Section 14105.18 for services provided to individuals not eligible for Medi-Cal or the Family Planning, Access, Care and Treatment (Family PACT) Program.

(e) For purposes of this section, “medical care services” means the services identified in subdivisions (a), (h), (i), (j), (n), and (q), and (w) of Section 14132, and adult dental benefits provided pursuant to Section 14131.10.

(f) Notwithstanding any other law, the department shall implement the payment increase implemented pursuant to required by this section—shall apply to managed care health plans that contract with the department pursuant to Chapter 8.75 (commencing with Section 14591) and to contracts with the Senior Care Action Network and the AIDS Healthcare Foundation, and in the following manner; to the extent that the services are provided through any of these contracts, payments by the department to managed care health plans shall be increased by the actuarially equivalent amount of the payment increases pursuant to contract amendments or change orders effective on or after January 1, 2016.

(g) Notwithstanding Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, the department shall implement, clarify, make specific, and define the provisions of this section by means of provider bulletins or similar instructions, without taking regulatory action until the time regulations are adopted. The department shall adopt regulations by July 1, 2018, in accordance with the requirements of Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code. Beginning July 1, 2016, and notwithstanding Section 10231.5 of the Government Code, the department shall provide a status report to the Legislature on a semiannual basis, in compliance with Section 9795 of the Government Code, until regulations have been adopted.
(h) This section shall be implemented only if and to the extent that federal financial participation is available and any necessary federal approvals have been obtained.

SEC. 4. Section 14301.6 is added to the Welfare and Institutions Code, to read:

14301.6. To the extent federal financial participation is not jeopardized and consistent with federal law, the department shall pay Medi-Cal managed care plans rate range increases, as defined by paragraph (4) of subdivision (b) of Section 14301.4, at a minimum level of 100 percent of the rate range available with respect to all enrollees who are not subject to the rate range payment requirements described in Section 14301.5.

SEC. 5. SEC. 4. This act is an urgency statute necessary for the immediate preservation of the public peace, health, or safety within the meaning of Article IV of the Constitution and shall go into immediate effect. The facts constituting the necessity are:

In order to ensure, at the earliest possible time, access to medically necessary care for Medi-Cal beneficiaries, it is necessary that this act take effect immediately.
Bill Number: AB 483

AUTHOR: Assembly Member PATTERSON

SPONSOR: Author

VERSION: Introduced – 02/23/15

INTRODUCED: February 23, 2015

BILL STATUS: 4/20/15 – Assembly Committee on Business and Professions

BILL LOCATION: Assembly Committee on Business and Professions

HISTORY:
04/13/15 - Re-referred to Com. on B. & P.
04/09/15 - From committee chair, with author's amendments: Amend, and re-refer to Com. on B. & P. Read second time and amended.
03/05/15 - Referred to Com. on B. & P.
02/24/15 - From printer. May be heard in committee March 26.
02/23/15 - Read first time. To print.

AGENDA ITEM:
LEG 5f - AB 483 (Patterson)

SUBJECT: Healing arts: initial license fees: proration

SUMMARY
This bill would require specified healing arts programs within the Department of Consumer Affairs to prorate initial license fees on a monthly basis. This bill would impact the Acupuncture Board, Architects Board, Dental Board, Dental Hygiene Committee (DHCC), Medical Board, Occupational Therapy Board, Physical Therapy Board, Speech-Language Pathology and Audiology and Hearing Aid Dispenser Board, and Veterinary Medical Board. Specifically, the bill would require the DHCC to prorate the fee for the issuance of an original license on a monthly basis.

ANALYSIS
Existing law provides for the regulation and licensure of various professions and vocations and requires that licenses issued to certain licensees, including, among others, architects, acupuncturists, dental hygienists, dentists, occupational therapists, physical therapists, hearing aid dispensers, physicians and surgeons, and veterinarians, expire at 12 midnight on either the last day of the birth month of the licensee or at 12 midnight of the legal birth date of the licensee during the second year of a two-year term if not renewed.

This bill would have a major fiscal impact on the Committee’s licensing process. The existing licensing process has already been programmed into the upcoming BreEZe online system. Adding the ability to prorate the original licensing fee on a monthly basis would require additional programming expenses and costly change orders to the system. In addition, the Committee would stand to lose revenue if this bill were to pass, due to the proration of the $100 Original License Fee. The DHCC may need to pursue a fee increase to the Original Licensing Fee equivalent to the current renewal fee of $160 (a $60 increase) to replace the lost revenue from having to prorate the fee (the Original License Fee has a statutory maximum of $250).

This bill is identical to AB 1758 (Patterson, 2014) from last year. The Committee took a position of oppose unless amended on AB 1758 at their May 2014 meeting.
SUPPORT/OPPOSITION
Support:
• California Physical Therapy Association
• Fresno Chamber of Commerce
• 2 individuals

Opposition:
• No registered opposition on file.

TYPE OF BILL
Active Bill – In Committee Process          Non-Urgency
Majority Vote Required                     Non-State-Mandated Local Program
Non-Appropriation                           Non-Tax Levy
Fiscal Committee

ATTACHED:
1) Language for AB 483 (Patterson) – Introduced Version

COMMITTEE POSITION
The Committee has not yet taken a position on AB 483 (Patterson). The Legislative and Regulatory Subcommittee may consider taking a position and make a recommendation to the full Committee.

COMMITTEE POSITION: _____Support _____Oppose ______Neutral ______Watch
An act to amend Sections 1724, 1944, 2435, 2538.57, 2570.16, 2688, 2987, 4842.5, 4905, 4970, and 5604 of the Business and Professions Code, relating to healing arts.

LEGISLATIVE COUNSEL’S DIGEST

AB 483, as introduced, Patterson. Healing arts: initial license fees: proration.

Existing law provides for the regulation and licensure of various professions and vocations. Existing law establishes fees for initial licenses, initial temporary and permanent licenses, and original licenses for those various professions and vocations. Existing law requires that licenses issued to certain licensees, including, among others, architects, acupuncturists, dental hygienists, dentists, occupational therapists, physical therapists, physicians and surgeons, psychologists, and veterinarians, expire at 12 a.m. on either the last day of the birth month of the licensee or at 12 a.m. of the legal birth date of the licensee during the 2nd year of a 2-year term, if not renewed.

This bill would require that the fees imposed by these provisions for an initial license, an initial temporary or permanent license, or an original license be prorated on a monthly basis.
The people of the State of California do enact as follows:

SECTION 1. Section 1724 of the Business and Professions Code is amended to read:

1724. The amount of charges and fees for dentists licensed pursuant to this chapter shall be established by the board as is necessary for the purpose of carrying out the responsibilities required by this chapter as it relates to dentists, subject to the following limitations:

(a) The fee for application for examination shall not exceed five hundred dollars ($500).

(b) The fee for application for reexamination shall not exceed one hundred dollars ($100).

(c) The fee for examination and for reexamination shall not exceed eight hundred dollars ($800). Applicants who are found to be ineligible to take the examination shall be entitled to a refund in an amount fixed by the board.

(d) The fee for an initial license and for the renewal of a license is five hundred twenty-five dollars ($525). The fee for an initial license fee shall be prorated on a monthly basis.

(e) The fee for a special permit shall not exceed three hundred dollars ($300), and the renewal fee for a special permit shall not exceed one hundred dollars ($100).

(f) The delinquency fee shall be the amount prescribed by Section 163.5.

(g) The penalty for late registration of change of place of practice shall not exceed seventy-five dollars ($75).

(h) The application fee for permission to conduct an additional place of practice shall not exceed two hundred dollars ($200).

(i) The renewal fee for an additional place of practice shall not exceed one hundred dollars ($100).

(j) The fee for issuance of a substitute certificate shall not exceed one hundred twenty-five dollars ($125).

(k) The fee for a provider of continuing education shall not exceed two hundred fifty dollars ($250) per year.

(l) The fee for application for a referral service permit and for renewal of that permit shall not exceed twenty-five dollars ($25).
(m) The fee for application for an extramural facility permit and for the renewal of a permit shall not exceed twenty-five dollars ($25).

The board shall report to the appropriate fiscal committees of each house of the Legislature whenever the board increases any fee pursuant to this section and shall specify the rationale and justification for that increase.

SEC. 2. Section 1944 of the Business and Professions Code is amended to read:

1944. (a) The committee shall establish by resolution the amount of the fees that relate to the licensing of a registered dental hygienist, a registered dental hygienist in alternative practice, and a registered dental hygienist in extended functions. The fees established by board resolution in effect on June 30, 2009, as they relate to the licensure of registered dental hygienists, registered dental hygienists in alternative practice, and registered dental hygienists in extended functions, shall remain in effect until modified by the committee. The fees are subject to the following limitations:

1. The application fee for an original license and the fee for the issuance of an original license shall not exceed two hundred fifty dollars ($250). *The fee for the issuance of an original license shall be prorated on a monthly basis.*

2. The fee for examination for licensure as a registered dental hygienist shall not exceed the actual cost of the examination.

3. For third- and fourth-year dental students, the fee for examination for licensure as a registered dental hygienist shall not exceed the actual cost of the examination.

4. The fee for examination for licensure as a registered dental hygienist in extended functions shall not exceed the actual cost of the examination.

5. The fee for examination for licensure as a registered dental hygienist in alternative practice shall not exceed the actual cost of administering the examination.

6. The biennial renewal fee shall not exceed one hundred sixty dollars ($160).

7. The delinquency fee shall not exceed one-half of the renewal fee. Any delinquent license may be restored only upon payment of all fees, including the delinquency fee, and compliance with all other applicable requirements of this article.
(8) The fee for issuance of a duplicate license to replace one that is lost or destroyed, or in the event of a name change, shall not exceed twenty-five dollars ($25) or one-half of the renewal fee, whichever is greater.

(9) The fee for certification of licensure shall not exceed one-half of the renewal fee.

(10) The fee for each curriculum review and site evaluation for educational programs for dental hygienists who are not accredited by a committee-approved agency shall not exceed two thousand one hundred dollars ($2,100).

(11) The fee for each review or approval of course requirements for licensure or procedures that require additional training shall not exceed seven hundred fifty dollars ($750).

(12) The initial application and biennial fee for a provider of continuing education shall not exceed five hundred dollars ($500).

(13) The amount of fees payable in connection with permits issued under Section 1962 is as follows:

(A) The initial permit fee is an amount equal to the renewal fee for the applicant’s license to practice dental hygiene in effect on the last regular renewal date before the date on which the permit is issued.

(B) If the permit will expire less than one year after its issuance, then the initial permit fee is an amount equal to 50 percent of the renewal fee in effect on the last regular renewal date before the date on which the permit is issued.

(b) The renewal and delinquency fees shall be fixed by the committee by resolution at not more than the current amount of the renewal fee for a license to practice under this article nor less than five dollars ($5).

(c) Fees fixed by the committee by resolution pursuant to this section shall not be subject to the approval of the Office of Administrative Law.

(d) Fees collected pursuant to this section shall be collected by the committee and deposited into the State Dental Hygiene Fund, which is hereby created. All money in this fund shall, upon appropriation by the Legislature in the annual Budget Act, be used to implement the provisions of this article.

(e) No fees or charges other than those listed in this section shall be levied by the committee in connection with the licensure of registered dental hygienists, registered dental hygienists in
alternative practice, or registered dental hygienists in extended
functions.
(f) The fee for registration of an extramural dental facility shall
not exceed two hundred fifty dollars ($250).
(g) The fee for registration of a mobile dental hygiene unit shall
not exceed one hundred fifty dollars ($150).
(h) The biennial renewal fee for a mobile dental hygiene unit
shall not exceed two hundred fifty dollars ($250).
(i) The fee for an additional office permit shall not exceed two
hundred fifty dollars ($250).
(j) The biennial renewal fee for an additional office as described
in Section 1926.4 shall not exceed two hundred fifty dollars ($250).
(k) The initial application and biennial special permit fee is an
amount equal to the biennial renewal fee specified in paragraph
(6) of subdivision (a).
(l) The fees in this section shall not exceed an amount sufficient
to cover the reasonable regulatory cost of carrying out the
provisions of this article.
SEC. 3. Section 2435 of the Business and Professions Code is
amended to read:
2435. The following fees apply to the licensure of physicians
and surgeons:
(a) Each applicant for a certificate based upon a national board
diplomate certificate, each applicant for a certificate based on
reciprocity, and each applicant for a certificate based upon written
examination, shall pay a nonrefundable application and processing
fee, as set forth in subdivision (b), at the time the application is
filed.
(b) The application and processing fee shall be fixed by the
board by May 1 of each year, to become effective on July 1 of that
year. The fee shall be fixed at an amount necessary to recover the
actual costs of the licensing program as projected for the fiscal
year commencing on the date the fees become effective.
(c) Each applicant who qualifies for a certificate, as a condition
precedent to its issuance, in addition to other fees required herein,
shall pay an initial license fee, if any, in an amount fixed by the
board consistent with this section. The initial license fee shall not
exceed seven hundred ninety dollars ($790). The initial license fee
shall be prorated on a monthly basis. An applicant enrolled in an
approved postgraduate training program shall be required to pay only 50 percent of the initial license fee.

(d) The biennial renewal fee shall be fixed by the board consistent with this section and shall not exceed seven hundred ninety dollars ($790).

(e) Notwithstanding subdivisions (c) and (d), and to ensure that subdivision (k) of Section 125.3 is revenue neutral with regard to the board, the board may, by regulation, increase the amount of the initial license fee and the biennial renewal fee by an amount required to recover both of the following:

(1) The average amount received by the board during the three fiscal years immediately preceding July 1, 2006, as reimbursement for the reasonable costs of investigation and enforcement proceedings pursuant to Section 125.3.

(2) Any increase in the amount of investigation and enforcement costs incurred by the board after January 1, 2006, that exceeds the average costs expended for investigation and enforcement costs during the three fiscal years immediately preceding July 1, 2006. When calculating the amount of costs for services for which the board paid an hourly rate, the board shall use the average number of hours for which the board paid for those costs over these prior three fiscal years, multiplied by the hourly rate paid by the board for those costs as of July 1, 2005. Beginning January 1, 2009, the board shall instead use the average number of hours for which it paid for those costs over the three-year period of fiscal years 2005–06, 2006–07, and 2007–08, multiplied by the hourly rate paid by the board for those costs as of July 1, 2005. In calculating the increase in the amount of investigation and enforcement costs, the board shall include only those costs for which it was eligible to obtain reimbursement under Section 125.3 and shall not include probation monitoring costs and disciplinary costs, including those associated with the citation and fine process and those required to implement subdivision (b) (d) of Section 12529 of the Government Code.

(f) Notwithstanding Section 163.5, the delinquency fee shall be 10 percent of the biennial renewal fee.

(g) The duplicate certificate and endorsement fees shall each be fifty dollars ($50), and the certification and letter of good standing fees shall each be ten dollars ($10).
(h) It is the intent of the Legislature that, in setting fees pursuant to this section, the board shall seek to maintain a reserve in the Contingent Fund of the Medical Board of California in an amount not less than two nor more than four months’ operating expenditures.

(i) Not later than January 1, 2012, the Office of State Audits and Evaluations within the Department of Finance shall commence a preliminary review of the board’s financial status, including, but not limited to, its projections related to expenses, revenues, and reserves, and the impact of the loan from the Contingent Fund of the Medical Board of California to the General Fund made pursuant to the Budget Act of 2008. The office shall make the results of this review available upon request by June 1, 2012. This review shall be funded from the existing resources of the office during the 2011–12 fiscal year.

SEC. 4. Section 2538.57 of the Business and Professions Code is amended to read:

2538.57. The amount of fees and penalties prescribed by this article shall be those set forth in this section unless a lower fee is fixed by the board:

(a) The fee for applicants applying for the first time for a license is seventy-five dollars ($75), which shall not be refunded, except to applicants who are found to be ineligible to take an examination for a license. Those applicants are entitled to a refund of fifty dollars ($50).

(b) The fees for taking or retaking the written and practical examinations shall be amounts fixed by the board, which shall be equal to the actual cost of preparing, grading, analyzing, and administering the examinations.

(c) The initial temporary license fee is one hundred dollars ($100). The fee for an initial temporary license shall be prorated on a monthly basis. The fee for renewal of a temporary license is one hundred dollars ($100) for each renewal.

(d) The initial permanent license fee is two hundred eighty dollars ($280). The fee for an initial permanent license shall be prorated on a monthly basis. The fee for renewal of a permanent license is not more than two hundred eighty dollars ($280) for each renewal.
(e) The initial branch office license fee is twenty-five dollars ($25). The fee for renewal of a branch office license is twenty-five dollars ($25) for each renewal.

(f) The delinquency fee is twenty-five dollars ($25).

(g) The fee for issuance of a replacement license is twenty-five dollars ($25).

(h) The continuing education course approval application fee is fifty dollars ($50).

(i) The fee for official certification of licensure is fifteen dollars ($15).

SEC. 5. Section 2570.16 of the Business and Professions Code is amended to read:

2570.16. Initial license and renewal fees shall be established by the board in an amount that does not exceed a ceiling of one hundred fifty dollars ($150) per year. The initial license fee shall be prorated on a monthly basis. The board shall establish the following additional fees:

(a) An application fee not to exceed fifty dollars ($50).

(b) A late renewal fee as provided for in Section 2570.10.

(c) A limited permit fee.

(d) A fee to collect fingerprints for criminal history record checks.

SEC. 6. Section 2688 of the Business and Professions Code is amended to read:

2688. The amount of fees assessed in connection with licenses issued under this chapter is as follows:

(a) (1) The fee for an application for licensure as a physical therapist submitted to the board prior to March 1, 2009, shall be seventy-five dollars ($75). The fee for an application submitted under Section 2653 to the board prior to March 1, 2009, shall be one hundred twenty-five dollars ($125).

(2) The fee for an application for licensure as a physical therapist submitted to the board on or after March 1, 2009, shall be one hundred twenty-five dollars ($125). The fee for an application submitted under Section 2653 to the board on or after March 1, 2009, shall be two hundred dollars ($200).

(3) Notwithstanding paragraphs (1) and (2), the board may decrease or increase the amount of an application fee under this subdivision to an amount that does not exceed the cost of
administering the application process, but in no event shall the
application fee amount exceed three hundred dollars ($300).

(b) The examination and reexamination fees for the physical
therapist examination, physical therapist assistant examination,
and the examination to demonstrate knowledge of the California
rules and regulations related to the practice of physical therapy
shall be the actual cost to the board of the development and writing
of, or purchase of the examination, and grading of each written
examination, plus the actual cost of administering each
examination. The board, at its discretion, may require the licensure
applicant to pay the fee for the examinations required by Section
2636 directly to the organization conducting the examination.

(c) (1) The fee for a physical therapist license issued prior to
March 1, 2009, shall be seventy-five dollars ($75).

(2) The fee for a physical therapist license issued on or after
March 1, 2009, shall be one hundred dollars ($100).

(3) Notwithstanding paragraphs (1) and (2), the board may
decrease or increase the amount of the fee under this subdivision
to an amount that does not exceed the cost of administering the
process to issue the license, but in no event shall the fee to issue
the license exceed one hundred fifty dollars ($150).

(4) The fee assessed pursuant to this subdivision for an initial
physical therapist license issued on or after January 1, 2016, shall
be prorated on a monthly basis.

(d) (1) The fee to renew a physical therapist license that expires
prior to April 1, 2009, shall be one hundred fifty dollars ($150).

(2) The fee to renew a physical therapist license that expires on
or after April 1, 2009, shall be two hundred dollars ($200).

(3) Notwithstanding paragraphs (1) and (2), the board may
decrease or increase the amount of the renewal fee under this
subdivision to an amount that does not exceed the cost of the
renewal process, but in no event shall the renewal fee amount
exceed three hundred dollars ($300).

(e) (1) The fee for application and for issuance of a physical
therapist assistant license shall be seventy-five dollars ($75) for
an application submitted to the board prior to March 1, 2009.

(2) The fee for application and for issuance of a physical
therapist assistant license shall be one hundred twenty-five dollars
($125) for an application submitted to the board on or after March
1, 2009. The fee for an application submitted under Section 2653
to the board on or after March 1, 2009, shall be two hundred dollars ($200).

(3) Notwithstanding paragraphs (1) and (2), the board may decrease or increase the amount of the fee under this subdivision to an amount that does not exceed the cost of administering the application process, but in no event shall the application fee amount exceed three hundred dollars ($300).

(f) (1) The fee to renew a physical therapist assistant license that expires prior to April 1, 2009, shall be one hundred fifty dollars ($150).

(2) The fee to renew a physical therapist assistant license that expires on or after April 1, 2009, shall be two hundred dollars ($200).

(3) Notwithstanding paragraphs (1) and (2), the board may decrease or increase the amount of the renewal fee under this subdivision to an amount that does not exceed the cost of the renewal process, but in no event shall the renewal fee amount exceed three hundred dollars ($300).

(g) Notwithstanding Section 163.5, the delinquency fee shall be 50 percent of the renewal fee in effect.

(h) (1) The duplicate wall certificate fee shall be fifty dollars ($50). The duplicate renewal receipt fee amount shall be fifty dollars ($50).

(2) Notwithstanding paragraph (1), the board may decrease or increase the amount of the fee under this subdivision to an amount that does not exceed the cost of issuing duplicates, but in no event shall that fee exceed one hundred dollars ($100).

(i) (1) The endorsement or letter of good standing fee shall be sixty dollars ($60).

(2) Notwithstanding paragraph (1), the board may decrease or increase the amount of the fee under this subdivision to an amount that does not exceed the cost of issuing an endorsement or letter, but in no event shall the fee amount exceed one hundred dollars ($100).

SEC. 7. Section 2987 of the Business and Professions Code is amended to read:

2987. The amount of the fees prescribed by this chapter shall be determined by the board, and shall be as follows:

(a) The application fee for a psychologist shall not be more than fifty dollars ($50).
(b) The examination and reexamination fees for the
examinations shall be the actual cost to the board of developing,
purchasing, and grading of each examination, plus the actual cost
to the board of administering each examination.
(c) The initial license fee is an amount equal to the renewal fee
in effect on the last regular renewal date before the date on which
the license is issued. The initial license fee shall be prorated on a
monthly basis.
(d) The biennial renewal fee for a psychologist shall be four
hundred dollars ($400). The board may increase the renewal fee
to an amount not to exceed five hundred dollars ($500).
(e) The application fee for registration and supervision of a
psychological assistant by a supervisor under Section 2913, which
is payable by that supervisor, shall not be more than seventy-five
dollars ($75).
(f) The annual renewal fee for registration of a psychological
assistant shall not be more than seventy-five dollars ($75).
(g) The duplicate license or registration fee is five dollars ($5).
(h) The delinquency fee is twenty-five dollars ($25).
(i) The endorsement fee is five dollars ($5).
Notwithstanding any other provision of law, the board may
reduce any fee prescribed by this section, when, in its discretion,
the board deems it administratively appropriate.

SEC. 8. Section 4842.5 of the Business and Professions Code
is amended to read:
4842.5. The amount of fees prescribed by this article is that
fixed by the following schedule:
(a) The fee for filing an application for examination shall be set
by the board in an amount it determines is reasonably necessary
to provide sufficient funds to carry out the purposes of this chapter,
not to exceed three hundred fifty dollars ($350).
(b) The fee for the California registered veterinary technician
examination shall be set by the board in an amount it determines
is reasonably necessary to provide sufficient funds to carry out the
purposes of this chapter, not to exceed three hundred dollars ($300).
(c) The initial registration fee shall be set by the board at not
more than three hundred fifty dollars ($350), except that, if the
license is issued less than one year before the date on which it will
expire, then the fee ($350) and shall be set by the board at not
more than one hundred seventy-five dollars ($175) prorated on
a monthly basis. The board may adopt regulations to provide for
the waiver or refund of the initial registration fee when the
registration is issued less than 45 days before the date on which it
will expire.
(d) The biennial renewal fee shall be set by the board at not
more than three hundred fifty dollars ($350).
(e) The delinquency fee shall be set by the board at not more
than fifty dollars ($50).
(f) Any charge made for duplication or other services shall be
set at the cost of rendering the services.
(g) The fee for filing an application for approval of a school or
institution offering a curriculum for training registered veterinary
technicians pursuant to Section 4843 shall be set by the board at
an amount not to exceed three hundred dollars ($300). The school
or institution shall also pay for the actual costs of an onsite
inspection conducted by the board pursuant to Section 2065.6 of
Title 16 of the California Code of Regulations, including, but not
limited to, the travel, food, and lodging expenses incurred by an
inspection team sent by the board.
(h) The fee for failure to report a change in the mailing address
is twenty-five dollars ($25).
SEC. 9. Section 4905 of the Business and Professions Code is
amended to read:
4905. The following fees shall be collected by the board and
shall be credited to the Veterinary Medical Board Contingent Fund:
(a) The fee for filing an application for examination shall be set
by the board in an amount it determines is reasonably necessary
to provide sufficient funds to carry out the purpose of this chapter,
not to exceed three hundred fifty dollars ($350).
(b) The fee for the California state board examination shall be
set by the board in an amount it determines is reasonably necessary
to provide sufficient funds to carry out the purpose of this chapter,
not to exceed three hundred fifty dollars ($350).
(c) The fee for the Veterinary Medicine Practice Act
examination shall be set by the board in an amount it determines
reasonably necessary to provide sufficient funds to carry out the
purpose of this chapter, not to exceed one hundred dollars ($100).
(d) The initial license fee shall be set by the board not to exceed
five hundred dollars ($500) except that, if the license is issued less
than one year before the date on which it will expire, then the fee
and shall be set by the board at not to exceed two hundred fifty dollars ($250), prorated on a monthly basis. The board may, by appropriate regulation, provide for the waiver or refund of the initial license fee when the license is issued less than 45 days before the date on which it will expire.

(e) The renewal fee shall be set by the board for each biennial renewal period in an amount it determines is reasonably necessary to provide sufficient funds to carry out the purpose of this chapter, not to exceed five hundred dollars ($500).

(f) The temporary license fee shall be set by the board in an amount it determines is reasonably necessary to provide sufficient funds to carry out the purpose of this chapter, not to exceed two hundred fifty dollars ($250).

(g) The delinquency fee shall be set by the board, not to exceed fifty dollars ($50).

(h) The fee for issuance of a duplicate license is twenty-five dollars ($25).

(i) Any charge made for duplication or other services shall be set at the cost of rendering the service, except as specified in subdivision (h).

(j) The fee for failure to report a change in the mailing address is twenty-five dollars ($25).

(k) The initial and annual renewal fees for registration of veterinary premises shall be set by the board in an amount not to exceed four hundred dollars ($400) annually.

(l) If the money transferred from the Veterinary Medical Board Contingent Fund to the General Fund pursuant to the Budget Act of 1991 is redeposited into the Veterinary Medical Board Contingent Fund, the fees assessed by the board shall be reduced correspondingly. However, the reduction shall not be so great as to cause the Veterinary Medical Board Contingent Fund to have a reserve of less than three months of annual authorized board expenditures. The fees set by the board shall not result in a Veterinary Medical Board Contingent Fund reserve of more than 10 months of annual authorized board expenditures.

SEC. 10. Section 4970 of the Business and Professions Code is amended to read:

4970. The amount of fees prescribed for licensed acupuncturists shall be those set forth in this section unless a lower fee is fixed by the board in accordance with Section 4972:
(a) The application fee shall be seventy-five dollars ($75).
(b) The examination and reexamination fees shall be the actual cost to the Acupuncture Board for the development and writing of, grading, and administering of each examination.
(c) The initial license fee shall be three hundred twenty-five dollars ($325), except that if the license will expire less than one year after its issuance, then the initial license fee shall be an amount equal to 50 percent of the initial license fee. ($325) and shall be prorated on a monthly basis.
(d) The renewal fee shall be three hundred twenty-five dollars ($325) and in the event a lower fee is fixed by the board, shall be an amount sufficient to support the functions of the board in the administration of this chapter. The renewal fee shall be assessed on an annual basis until January 1, 1996, and on and after that date the board shall assess the renewal fee biennially.
(e) The delinquency fee shall be set in accordance with Section 163.5.
(f) The application fee for the approval of a school or college under Section 4939 shall be three thousand dollars ($3,000). This subdivision shall become inoperative on January 1, 2017.
(g) The duplicate wall license fee is an amount equal to the cost to the board for the issuance of the duplicate license.
(h) The duplicate renewal receipt fee is ten dollars ($10).
(i) The endorsement fee is ten dollars ($10).
(j) The fee for a duplicate license for an additional office location as required under Section 4961 shall be fifteen dollars ($15).

SEC. 11. Section 5604 of the Business and Professions Code is amended to read:
5604. The fees prescribed by this chapter for architect applicants or architect licenseholders shall be fixed by the board as follows:
(a) The application fee for reviewing a candidate’s eligibility to take any section of the examination—may shall not exceed one hundred dollars ($100).
(b) The fee for any section of the examination administered by the board—may shall not exceed one hundred dollars ($100).
(c) The fee for an original license at an amount equal to the renewal fee in effect at the time the license is issued, except that, if the license is issued less than one year after its issuance, the fee shall be an amount equal to 50 percent of the renewal fee. ($100) and shall be prorated on a monthly basis.

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year before the date on which it will expire, then the fee shall be
fixed at an amount equal to 50 percent of the renewal fee in effect
at the time the license is issued: prorated on a monthly basis. The
board may, by appropriate regulation, provide for the waiver or
refund of the fee for an original license if the license is issued less
than 45 days before the date on which it will expire.
(d) The fee for an application for reciprocity—may shall not
exceed one hundred dollars ($100).
(e) The fee for a duplicate license—may shall not exceed
twenty-five dollars ($25).
(f) The renewal fee—may shall not exceed four hundred dollars
($400).
(g) The delinquency fee—may shall not exceed 50 percent of the
renewal fee.
(h) The fee for a retired license—may shall not exceed the fee
prescribed in subdivision (c).
SUMMARY
This bill amends Business and Professions Code Section 1926 to require an alternative dental hygiene practice established within a certified health care shortage area to continue to operate regardless of the area’s certification. The bill also amends the Corporations Code to: 1) exempt licensees of the Dental Hygiene Committee on California (DHCC) from the requirement to obtain a certificate of registration in order to provide services as a professional corporation and, 2) authorizes registered dental hygienists in alternative practice (RDHAP) to incorporate as a professional corporation and allow dental assistants and licensed dentists to be shareholders in RDHAP corporations. Lastly, the bill amends the Health and Safety Code and the Insurance Code to require health care reimbursement for services rendered by a registered dental hygienist in alternative practice (RDHAP).

ANALYSIS
Certified Dental Health Professional Shortage Areas
Current law allows an RDHAP to practice in a dental health professional shortage area as certified by the Office of Statewide Health Planning and Development (OSHPD); however, RDHAPs who practice in a dental health shortage area can no longer practice in those areas once they are no longer designated as a dental shortage area by OSHPD.

It is counterproductive for the law to allow RDHAP practitioners to establish practices in shortage areas to meet the needs of the consumers, becoming a part of the solution and providing additional access to dental care, only to have to close down their practices when the area is no longer considered a shortage area. This issue was mentioned in the DHCC’s sunset review report in 2014, but not resolved in the DHCC’s sunset bill. This bill would require RDHAPs who establish practices within certified dental shortage areas to continue their practice regardless of certification.

Incorporation of RDHAPs
Existing law allows RDHAPs to incorporate under the Business and Professions Code, but does not provide the authority to incorporate in the Moscone-Knox Professional Corporation Act under the Corporations Code. This issue was included in the DHCC’s sunset review report in
2014, but not resolved in the DHCC’s sunset legislation. This bill would provide RDHAPs with the authority to establish professional corporations and allows dental assistants and licensed dentists to be shareholders in the corporation.

Health Insurance Reimbursement for Services Provided by RDHAPs
According to the author’s office, many dental insurance companies recognize dentists in a dental practice as the billable provider of dental hygiene services and even though RDHAPs provide the same billable services that an RDH provides (billed by the dentist), the insurance companies are denying RDHAP’s reimbursement for these same services. This creates a barrier for patients to obtain much needed care and forces those who cannot easily access care in a traditional dental office to pay out-of-pocket for the services provided by an RDHAP or not receive the care at all due to lack of funds. This issue was raised in the DHCC’s sunset review report in 2014, but not resolved in the DHCC’s sunset bill. This bill would require insurance companies to reimburse RDHAPs for dental hygiene care legally provided and covered by the insurance.

SUPPORT/Opposition
Support:
- California Dental Hygienists’ Association (sponsor)
- 14 RDHAPs

Opposition:
- California Dental Association

Type of Bill
Active Bill – In Committee Process
Majority Vote Required
Non-Unclassified
Non-Appropriation
Non-Tax Levy
Fiscal Committee

Attached:

Committee Position
The Committee took a position of Support if Amended on concept language for AB 502 during the March 2, 2015 DHCC teleconference meeting. The position was based on concept language provided by CDHA and the DHCC directed staff to work with DCA Legal Counsel to provide necessary amendments to provide to the author’s office to allow an RDHAP to become incorporated, including language for discipline of a professional corporation.

The Legislative and Regulatory Subcommittee may consider taking a new position and make a recommendation to the full Committee.

Committee Position: ___ Support _____ Oppose ______ Neutral ______ Watch
An act to amend Sections 1924, 1926, and 1931 of the Business and Professions Code, to amend Sections 13401 and 13401.5 of the Corporations Code, to add Section 1374.196 to the Health and Safety Code, and to add Section 10120.4 to the Insurance Code, relating to dental hygiene.

LEGISLATIVE COUNSEL’S DIGEST

AB 502, as amended, Chau. Dental hygiene.

(1) Existing law, the Dental Practice Act, provides for the licensure and regulation of registered dental hygienists, registered dental hygienists in extended functions, and registered dental hygienists in alternative practice by the Dental Hygiene Committee of California.

Existing law authorizes a registered dental hygienist in alternative practice to perform various duties in specified settings, including dental health professional shortage areas, as certified by the Office of Statewide Health Planning and Development.

This bill would require an alternative dental hygiene practice established within a certified shortage area to continue regardless of certification.

Existing law authorizes a registered dental hygienist in alternative practice to provide services to a patient without obtaining written verification that the patient has been examined by a dentist or physician and surgeon licensed to practice in this state. However, under existing law, if the registered dental hygienist in alternative practice provides
services to a patient 18 months or more after the first date that he or she provides services to a patient, he or she is required to obtain written verification, including a prescription for dental hygiene services, that the patient has been examined by a dentist or physician and surgeon licensed to practice in this state.

This bill would delete that written verification and prescription requirement.

(2) Existing law, the Moscone-Knox Professional Corporation Act, prohibits a professional corporation from rendering professional services in this state without a currently effective certificate of registration issued by the governmental agency regulating the profession in which the corporation is or proposes to be engaged and excepts any professional corporation rendering professional services by persons duly licensed by specified state entities from that requirement. Existing law authorizes specified healing arts practitioners to be shareholders, officers, directors, or professional employees of a designated professional corporation, subject to certain limitations relating to ownership of shares.

This bill would additionally except any professional corporation rendering professional services by persons duly licensed by the Dental Hygiene Committee of California from the certificate of registration requirement. The bill would authorize dental assistants and licensed dentists to be shareholders, officers, directors, or professional employees of a registered dental hygienist in alternative practice corporation.

(3) 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. Existing law provides certain standards that govern health care service plan contracts covering dental services, health insurance policies covering dental services, specialized health care service plan contracts covering dental services, and specialized health insurance policies covering dental services.

This bill would require health care service plan contracts covering dental services, health insurance policies covering dental services, specialized health care service plan contracts covering dental services, and specialized health insurance policies covering dental services issued, amended, or renewed on or after January 1, 2016, to reimburse registered dental hygienists in alternative practice for performing dental hygiene services that may lawfully be performed by registered dental hygienists and that are reimbursable under the contracts or policies. The bill would
also require the plan or insurer to use the same fee schedule for reimbursing both registered dental hygienists and registered dental hygienists in alternative practice. Because a willful violation of the bill’s provisions by a health care service plan covering dental services or a specialized health care service plan covering dental services would be a crime, it would impose a state-mandated local program.

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

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


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

SECTION 1. Section 1924 of the Business and Professions Code is amended to read:

1924. A person licensed as a registered dental hygienist who has completed the prescribed classes through the Health Manpower Pilot Project (HMPP) and who has established an independent practice under the HMPP by June 30, 1997, shall be deemed to have satisfied the licensing requirements under Section 1922, and shall be authorized to continue to operate the practice he or she presently operates, so long as he or she follows the functions as specified in Sections 1922, 1925, 1926, 1927, 1928, and 1930, and subdivision (b) of Section 1929, and as long as he or she continues to personally practice and operate the practice or until he or she sells the practice to a licensed dentist.

SEC. 2.

SECTION 1. Section 1926 of the Business and Professions Code is amended to read:

1926. A registered dental hygienist in alternative practice may perform the duties authorized pursuant to subdivision (a) of Section 1907, subdivision (a) of Section 1908, and subdivisions (a) and (b) of Section 1910 in the following settings:

(a) Residences of the homebound.
(b) Schools.
(c) Residential facilities and other institutions.
(d) Dental health professional shortage areas, as certified by the Office of Statewide Health Planning and Development in accordance with existing office guidelines. An alternative dental hygiene practice established within a certified shortage area shall continue regardless of certification.

SEC. 3.—Section 1931 of the Business and Professions Code is amended to read:

1931. A registered dental hygienist in alternative practice may provide services to a patient without obtaining written verification that the patient has been examined by a dentist or physician and surgeon licensed to practice in this state.

SEC. 4.

SEC. 2. Section 13401 of the Corporations Code is amended to read:

13401. As used in this part:
(a) “Professional services” means any type of professional services that may be lawfully rendered only pursuant to a license, certification, or registration authorized by the Business and Professions Code, the Chiropractic Act, or the Osteopathic Act.
(b) “Professional corporation” means a corporation organized under the General Corporation Law or pursuant to subdivision (b) of Section 13406 that is engaged in rendering professional services in a single profession, except as otherwise authorized in Section 13401.5, pursuant to a certificate of registration issued by the governmental agency regulating the profession as herein provided and that in its practice or business designates itself as a professional or other corporation as may be required by statute. However, any professional corporation or foreign professional corporation rendering professional services by persons duly licensed by the Medical Board of California or any examining committee under the jurisdiction of the board, the Osteopathic Medical Board of California, the Dental Board of California, the Dental Hygiene Committee of California, the California State Board of Pharmacy, the Veterinary Medical Board, the California Architects Board, the Court Reporters Board of California, the Board of Behavioral Sciences, the Speech-Language Pathology and Audiology Board, the Board of Registered Nursing, or the State Board of Optometry shall not be required to obtain a certificate of registration in order to render those professional services.
(c) “Foreign professional corporation” means a corporation organized under the laws of a state of the United States other than this state that is engaged in a profession of a type for which there is authorization in the Business and Professions Code for the performance of professional services by a foreign professional corporation.

(d) “Licensed person” means any natural person who is duly licensed under the provisions of the Business and Professions Code, the Chiropractic Act, or the Osteopathic Act to render the same professional services as are or will be rendered by the professional corporation or foreign professional corporation of which he or she is, or intends to become, an officer, director, shareholder, or employee.

(e) “Disqualified person” means a licensed person who for any reason becomes legally disqualified (temporarily or permanently) to render the professional services that the particular professional corporation or foreign professional corporation of which he or she is an officer, director, shareholder, or employee is or was rendering.

SEC. 3. Section 13401.5 of the Corporations Code is amended to read:

13401.5. Notwithstanding subdivision (d) of Section 13401 and any other provision of law, the following licensed persons may be shareholders, officers, directors, or professional employees of the professional corporations designated in this section so long as the sum of all shares owned by those licensed persons does not exceed 49 percent of the total number of shares of the professional corporation so designated herein, and so long as the number of those licensed persons owning shares in the professional corporation so designated herein does not exceed the number of persons licensed by the governmental agency regulating the designated professional corporation. This section does not limit employment by a professional corporation designated in this section to only those licensed professionals listed under each subdivision. Any person duly licensed under Division 2 (commencing with Section 500) of the Business and Professions Code, the Chiropractic Act, or the Osteopathic Act may be employed to render professional services by a professional corporation designated in this section.

(a) Medical corporation.
(1) Licensed doctors of podiatric medicine.
(2) Licensed psychologists.
(3) Registered nurses.
(4) Licensed optometrists.
(5) Licensed marriage and family therapists.
(6) Licensed clinical social workers.
(7) Licensed physician assistants.
(8) Licensed chiropractors.
(9) Licensed acupuncturists.
(10) Naturopathic doctors.
(11) Licensed professional clinical counselors.
(12) Licensed physical therapists.
(b) Podiatric medical corporation.
(1) Licensed physicians and surgeons.
(2) Licensed psychologists.
(3) Registered nurses.
(4) Licensed optometrists.
(5) Licensed chiropractors.
(6) Licensed acupuncturists.
(7) Naturopathic doctors.
(8) Licensed physical therapists.
(c) Psychological corporation.
(1) Licensed physicians and surgeons.
(2) Licensed doctors of podiatric medicine.
(3) Registered nurses.
(4) Licensed optometrists.
(5) Licensed marriage and family therapists.
(6) Licensed clinical social workers.
(7) Licensed chiropractors.
(8) Licensed acupuncturists.
(9) Naturopathic doctors.
(10) Licensed professional clinical counselors.
(d) Speech-language pathology corporation.
(1) Licensed audiologists.
(e) Audiology corporation.
(1) Licensed speech-language pathologists.
(f) Nursing corporation.
(1) Licensed physicians and surgeons.
(2) Licensed doctors of podiatric medicine.
(3) Licensed psychologists.
(4) Licensed optometrists.
(5) Licensed marriage and family therapists.
(6) Licensed clinical social workers.
(7) Licensed physician assistants.
(8) Licensed chiropractors.
(9) Licensed acupuncturists.
(10) Naturopathic doctors.
(11) Licensed professional clinical counselors.
(g) Marriage and family therapist corporation.
(1) Licensed physicians and surgeons.
(2) Licensed psychologists.
(3) Licensed clinical social workers.
(4) Registered nurses.
(5) Licensed chiropractors.
(6) Licensed acupuncturists.
(7) Naturopathic doctors.
(8) Licensed professional clinical counselors.
(h) Licensed clinical social worker corporation.
(1) Licensed physicians and surgeons.
(2) Licensed psychologists.
(3) Licensed marriage and family therapists.
(4) Registered nurses.
(5) Licensed chiropractors.
(6) Licensed acupuncturists.
(7) Naturopathic doctors.
(8) Licensed professional clinical counselors.
(i) Physician assistants corporation.
(1) Licensed physicians and surgeons.
(2) Registered nurses.
(3) Licensed acupuncturists.
(4) Naturopathic doctors.
(j) Optometric corporation.
(1) Licensed physicians and surgeons.
(2) Licensed doctors of podiatric medicine.
(3) Licensed psychologists.
(4) Registered nurses.
(5) Licensed chiropractors.
(6) Licensed acupuncturists.
(7) Naturopathic doctors.
(k) Chiropractic corporation.
1. Licensed physicians and surgeons.
2. Licensed doctors of podiatric medicine.
3. Licensed psychologists.
4. Registered nurses.
5. Licensed optometrists.
6. Licensed marriage and family therapists.
7. Licensed clinical social workers.
8. Licensed acupuncturists.
9. Licensed marriage and family therapists.
10. Licensed acupuncturists.
11. Licensed optometrists.
12. Licensed marriage and family therapists.
13. Licensed clinical social workers.
14. Licensed professional clinical counselors.
16. Licensed physicians and surgeons.
17. Licensed doctors of podiatric medicine.
18. Licensed psychologists.
19. Registered nurses.
20. Licensed physician assistants.
21. Licensed chiropractors.
22. Naturopathic doctors.
23. Licensed professional clinical counselors.
25. Licensed physicians and surgeons.
26. Licensed psychologists.
27. Registered nurses.
29. Licensed chiropractors.
30. Licensed acupuncturists.
31. Licensed physical therapists.
32. Naturopathic doctors.
33. Licensed professional clinical counselors.
34. Dental corporation.
35. Licensed physicians and surgeons.
36. Dental assistants.
37. Registered dental assistants.
38. (4) Registered dental assistants in extended functions.
(5) Registered dental hygienists.
(6) Registered dental hygienists in extended functions.
(7) Registered dental hygienists in alternative practice.
(o) Professional clinical counselor corporation.
(1) Licensed physicians and surgeons.
(2) Licensed psychologists.
(3) Licensed clinical social workers.
(4) Licensed marriage and family therapists.
(5) Registered nurses.
(6) Licensed chiropractors.
(7) Licensed acupuncturists.
(8) Naturopathic doctors.
(p) Physical therapy corporation.
(1) Licensed physicians and surgeons.
(2) Licensed doctors of podiatric medicine.
(3) Licensed acupuncturists.
(4) Naturopathic doctors.
(5) Licensed occupational therapists.
(6) Licensed speech-language therapists.
(7) Licensed audiologists.
(8) Registered nurses.
(9) Licensed psychologists.
(10) Licensed physician assistants.
(q) Registered dental hygienist in alternative practice corporation.
(1) Dental assistants.
(2) Licensed dentists.

SEC. 6. Section 1374.196 is added to the Health and Safety Code, to read:

1374.196. (a) This section shall only apply to a health care service plan contract covering dental services or a specialized health care service plan contract covering dental services issued, amended, or renewed on or after January 1, 2016.

(b) A registered dental hygienist in alternative practice, licensed pursuant to Section 1922 of the Business and Professions Code, may submit or allow to be submitted on his or her behalf any claim for dental hygiene services performed as authorized pursuant to Article 9 (commencing with Section 1900) of Chapter 4 of Division 2 of the Business and Professions Code to a health care service
plan covering dental services or a specialized health care service plan covering dental services.

(c) If a health care service plan contract covering dental services or a specialized health care service plan contract covering dental services provides reimbursement for dental hygiene services that may lawfully be performed by a registered dental hygienist, licensed pursuant to Section 1917 of the Business and Professions Code, reimbursement under that plan contract shall not be denied when the service is performed by a registered dental hygienist in alternative practice.

(d) (1) Nothing in this section shall preclude a health care service plan contract covering dental services or a specialized health care service plan contract covering dental services from setting different fee schedules for different services provided by different providers.

(2) A health care service plan contract covering dental services or a specialized health care service plan contract covering dental services shall use the same fee schedule for dental hygiene services whether the services are performed by a registered dental hygienist or a registered dental hygienist in alternative practice.

SEC. 7.
SEC. 5. Section 10120.4 is added to the Insurance Code, to read:

10120.4. (a) This section shall only apply to a health insurance policy covering dental services or a specialized health insurance policy covering dental services issued, amended, or renewed on or after January 1, 2016.

(b) A registered dental hygienist in alternative practice, licensed pursuant to Section 1922 of the Business and Professions Code, may submit or allow to be submitted on his or her behalf any claim for dental hygiene services performed as authorized pursuant to Article 9 (commencing with Section 1900) of Chapter 4 of Division 2 of the Business and Professions Code to a health insurer covering dental services or a specialized health insurer covering dental services.

(c) If a health insurance policy covering dental services or a specialized health insurance policy covering dental services provides for reimbursement for dental hygiene services that may lawfully be performed by a registered dental hygienist, licensed pursuant to Section 1917 of the Business and Professions Code,
reimbursement under that policy shall not be denied when the
service is performed by a registered dental hygienist in alternative
practice.
(d) (1) Nothing in this section shall preclude a health insurance
policy covering dental services or a specialized health insurance
policy covering dental services from setting different fee schedules
for different services provided by different providers.
(2) A health insurance policy covering dental services or a
specialized health insurance policy covering dental services shall
use the same fee schedule for dental hygiene services whether the
services are performed by a registered dental hygienist or a
registered dental hygienist in alternative practice.
SEC. 8.
SEC. 6. No reimbursement is required by this act pursuant to
Section 6 of Article XIIIB of the California Constitution because
the only costs that may be incurred by a local agency or school
district will be incurred because this act creates a new crime or
infraction, eliminates a crime or infraction, or changes the penalty
for a crime or infraction, within the meaning of Section 17556 of
the Government Code, or changes the definition of a crime within
the meaning of Section 6 of Article XIII B of the California
Constitution.
SUMMARY
This bill would provide that any individual within the Department of Consumer Affairs (DCA) designated to investigate the holder of a professional license, may request the Department of Justice (DOJ) to release any data that may exist on that individual in the Controlled Substance Utilization Review and Evaluation System (CURES) database if there is probable cause that laws governing controlled substances have been violated by the licensee. This bill would also provide that if this designated individual is found to access data for any reason other than investigative purposes, their access will be denied or suspended.

ANALYSIS
This bill would authorize DHCC enforcement staff to apply for access to the CURES database for the purpose of investigating the alleged substance abuse of a licensee. CURES is an online database housed under the DOJ and allows access to information online regarding the controlled substance history of a licensee. Once the DOJ approves an application for enforcement staff for access to the CURES database, they will be able to receive the electronic history of controlled substances dispensed to the licensee based on data contained in the CURES database.

SUPPORT/OPPOSITION
• No official support or opposition filed.

TYPE OF BILL
Active Bill – In Committee Process  Non-Urgency
Majority Vote Required  Non-State-Mandated Local Program
Non-Appropriation  Non-Tax Levy
Fiscal Committee
ATTACHED:
  1) Language for AB 611 (Dahle) – Version Amended on April 15, 2015

COMMITTEE POSITION
The Committee has not yet taken a position on AB 611 (Dahle).

The Legislative and Regulatory Subcommittee may consider taking a position and make a recommendation to the full Committee.

COMMITTEE POSITION: _____Support _____ Oppose ______ Neutral ______ Watch
An act to amend Section 11165.1 of the Health and Safety Code, relating to controlled substances.

LEGISLATIVE COUNSEL’S DIGEST

AB 611, as amended, Dahle. Controlled substances: prescriptions: reporting.
Existing law requires certain health care practitioners and pharmacists to apply to the Department of Justice to obtain approval to access information contained in the Controlled Substance Utilization Review and Evaluation System (CURES) Prescription Drug Monitoring Program (PDMP) regarding the controlled substance history of a patient under his or her care. Existing law requires the Department of Justice, upon approval of an application, to provide the approved health care practitioner or pharmacist the history of controlled substances dispensed to an individual under his or her care. Existing law authorizes an application to be denied, or a subscriber to be suspended, for specified reasons, including, among others, a subscriber accessing information for any reason other than caring for his or her patients.
This bill would also authorize an individual designated to investigate a holder of a professional license to apply to the Department of Justice to obtain approval to access information contained in the CURES PDMP.
AB 611

regarding the controlled substance history of an applicant or a licensee for the purpose of investigating the alleged substance abuse of a licensee. The bill would, upon approval of an application, require the department to provide to the approved individual the history of controlled substances dispensed to the licensee. The bill would clarify that only a subscriber who is a health care practitioner or a pharmacist may have an application denied or be suspended for accessing subscriber information for any reason other than caring for his or her patients. The bill would also specify that an application may be denied, or a subscriber may be suspended, if a subscriber who has been designated to investigate the holder of a professional license accesses information for any reason other than investigating the holder of a professional license.


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

SECTION 1. Section 11165.1 of the Health and Safety Code is amended to read:

11165.1. (a) (1) (A) (i) A health care practitioner authorized to prescribe, order, administer, furnish, or dispense Schedule II, Schedule III, or Schedule IV controlled substances pursuant to Section 11150 shall, before January 1, 2016, or upon receipt of a federal Drug Enforcement Administration (DEA) registration, whichever occurs later, submit an application developed by the Department of Justice to obtain approval to access information online regarding the controlled substance history of a patient that is stored on the Internet and maintained within the Department of Justice, and, upon approval, the department shall release to that practitioner the electronic history of controlled substances dispensed to an individual under his or her care based on data contained in the CURES Prescription Drug Monitoring Program (PDMP).

(ii) A pharmacist shall, before January 1, 2016, or upon licensure, whichever occurs later, submit an application developed by the Department of Justice to obtain approval to access information online regarding the controlled substance history of a patient that is stored on the Internet and maintained within the Department of Justice, and, upon approval, the department shall release to that pharmacist the electronic history of controlled substances.
substances dispensed to an individual under his or her care based on data contained in the CURES PDMP.

(iii) (I) An individual designated by a board, bureau, or program within the Department of Consumer Affairs to investigate a holder of a professional license may, for the purpose of investigating the alleged substance abuse of a licensee, submit an application developed by the Department of Justice to obtain approval to access information online regarding the controlled substance history of a licensee that is stored on the Internet and maintained within the Department of Justice, and, upon approval, the department shall release to that individual the electronic history of controlled substances dispensed to the licensee based on data contained in the CURES PDMP. An application for an individual designated by a board, bureau, or program that does not regulate health care practitioners authorized to prescribe, order, administer, furnish, or dispense Schedule II, Schedule III, or Schedule IV controlled substances pursuant to Section 11150 The application shall contain facts demonstrating the probable cause to believe the licensee has violated a law governing controlled substances.

(II) This clause does not require an individual designated by a board, bureau, or program within the Department of Consumer Affairs that regulates health care practitioners to submit an application to access the information stored within the CURES PDMP.

(B) An application may be denied, or a subscriber may be suspended, for reasons which include, but are not limited to, the following:

(i) Materially falsifying an application for a subscriber.

(ii) Failure to maintain effective controls for access to the patient activity report.

(iii) Suspended or revoked federal DEA registration.

(iv) Any subscriber who is arrested for a violation of law governing controlled substances or any other law for which the possession or use of a controlled substance is an element of the crime.

(v) Any subscriber described in clause (i) or (ii) of subparagraph (A) accessing information for any other reason than caring for his or her patients.
(vi) Any subscriber described in clause (iii) of subparagraph (A) accessing information for any other reason than investigating the holder of a professional license.

(C) Any authorized subscriber shall notify the Department of Justice within 30 days of any changes to the subscriber account.

(2) A health care practitioner authorized to prescribe, order, administer, furnish, or dispense Schedule II, Schedule III, or Schedule IV controlled substances pursuant to Section 11150 or a pharmacist shall be deemed to have complied with paragraph (1) if the licensed health care practitioner or pharmacist has been approved to access the CURES database through the process developed pursuant to subdivision (a) of Section 209 of the Business and Professions Code.

(b) Any request for, or release of, a controlled substance history pursuant to this section shall be made in accordance with guidelines developed by the Department of Justice.

(c) In order to prevent the inappropriate, improper, or illegal use of Schedule II, Schedule III, or Schedule IV controlled substances, the Department of Justice may initiate the referral of the history of controlled substances dispensed to an individual based on data contained in CURES to licensed health care practitioners, pharmacists, or both, providing care or services to the individual.

(d) The history of controlled substances dispensed to an individual based on data contained in CURES that is received by an authorized subscriber from the Department of Justice pursuant to this section shall be considered medical information subject to the provisions of the Confidentiality of Medical Information Act contained in Part 2.6 (commencing with Section 56) of Division 1 of the Civil Code.

(e) Information concerning a patient’s controlled substance history provided to an authorized subscriber pursuant to this section shall include prescriptions for controlled substances listed in Sections 1308.12, 1308.13, and 1308.14 of Title 21 of the Code of Federal Regulations.
**SUMMARY**
This bill would establish the Virtual Dental Home (VDH) program within the Department of Public Health to expand the virtual dental home model of community based delivery of dental care to those in the greatest need; encourage expansion of the model in community clinics and schools; and appropriate $4 million for this purpose.

**ANALYSIS**
Existing law establishes the State Department of Public Health to administer the state oral health program known as the Office of Oral Health for the purposes of, among other things, establishing community dental disease prevention programs for school-aged children.

This bill would not directly impact the DHCC; however, it may impact its licensees due to their participation in the VDH program. The bill establishes the VDH program under the Department of Public Health and provides $4 million in funding from the General Fund. This funding would provide the infrastructure and equipment needed to expand the program and the delivery of dental health services in schools, head start and preschool programs, and community clinics as set forth in Section 1910.5 of the Business and Professions Code. This includes development of related training modules, establishing community-based learning collaboratives, and provide grants to fund VDH technology and equipment.

As of this writing, there are 11 DHCC licensees that would be able to work for the VDH program since they have already participated and completed the Health Workforce Pilot Project no.172.

**SUPPORT/OPPosition**
**Support**
- California Dental Association (sponsor)
- Children’s Partnership (sponsor)
- California Dental Hygienists’ Association
- California Primary Care Association
- Children’s Defense Fund – California

<table>
<thead>
<tr>
<th>Bill Number: AB 648</th>
<th>AUTHOR: Assembly Member LOW</th>
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<tbody>
<tr>
<td>SPONSOR:</td>
<td>VERSION: Introduced – 02/24/15</td>
</tr>
<tr>
<td>Children’s Partnership and California Dental Association</td>
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<tr>
<td>INTRODUCED: February 24, 2015</td>
<td>BILL STATUS : 4/21/15 – Assembly Committee on Appropriations</td>
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<td>BILL LOCATION:</td>
<td>HISTORY:</td>
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<tr>
<td>Assembly Committee on Appropriations</td>
<td>04/15/15 - In committee: Set, first hearing. Referred to suspense file.</td>
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<tr>
<td>AGENDA ITEM:</td>
<td>04/08/15 - From committee: Do pass and re-refer to Com. on APPR. (Ayes 19. Noes 0.) (April 7). Re-referred to Com. on APPR.</td>
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<tr>
<td>LEG 5j - AB 648 (Low)</td>
<td>03/09/15 - Referred to Com. on HEALTH.</td>
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<tr>
<td>SUBJECT:</td>
<td>02/25/15 - From printer. May be heard in committee March 27.</td>
</tr>
<tr>
<td>Community-based services: Virtual Dental Home program</td>
<td>02/24/15 - Read first time. To print.</td>
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</table>
• LIBERTY Dental Plan of California, Inc.
• Maternal and Child Health Access
• North County Health Services

Opposition
• None on file.

TYPE OF BILL
Active Bill – In Committee Process  Non-Urgency
Two Thirds Vote Required  Non-State-Mandated Local Program
Appropriation  Non-Tax Levy
Fiscal Committee

ATTACHED:
1) Language for AB 648 (Low) – Introduced Version

COMMITTEE POSITION
The Committee has not yet taken a position on AB 648 (Low).

The Legislative and Regulatory Subcommittee may consider taking a position and make a recommendation to the full Committee.

COMMITTEE POSITION: _____Support _____Oppose _____Neutral _____Watch
An act to add Section 104755.5 to the Health and Safety Code, relating to oral health, and making an appropriation therefor.

LEGISLATIVE COUNSEL’S DIGEST

AB 648, as introduced, Low. Community-based services: Virtual Dental Home program.

Existing law establishes the State Department of Public Health and sets forth its powers and duties, including, but not limited to, the administration of a state oral health program known as the Office of Oral Health for the purposes of, among other things, establishing community dental disease prevention programs for schoolaged children.

This bill would establish the Virtual Dental Home program to expand the virtual dental home model of community-based delivery of dental care to the residents of this state who are in greatest need, as prescribed. The bill would authorize the administrator of the program to, among other things, encourage development and expansion of the delivery of dental health services in community clinics and school programs, as prescribed.

The bill would appropriate $4,000,000 to the department for the purposes of this program.

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

SECTION 1. Section 104755.5 is added to the Health and Safety Code, to read:

104755.5. (a) The Virtual Dental Home (VDH) program is hereby established to expand the virtual dental home model of community-based delivery of dental care to the residents of this state who are in greatest need.

(b) The administrator of the program shall be the dentist appointed by the director pursuant to Section 104755.

(c) The VDH program shall do all of the following to facilitate and expand the delivery of community-based dental health services:

1. Facilitate and encourage development and expansion of the delivery of dental health services in schools, head start and preschool programs, and community clinics as set forth in Section 1910.5 of the Business and Professions Code.

2. Encourage utilization of the teledentistry model described in subdivision (b) of Section 14132.725 of the Welfare and Institutions Code.

3. Develop related training modules.

4. Establish community-based learning collaboratives.

5. Provide grants to fund essential VDH technology and equipment.

(d) The administrator shall seek to secure funds to expand access to the VDH program that can be used along with other private and public funding opportunities.

(e) The VDH program shall be focused on providing needed services in geographic areas of highest need, as determined by the director after a thorough assessment, and in consultation with the administrator and oral health stakeholders.

SEC. 2. The sum of four million dollars ($4,000,000) is hereby appropriated from the General Fund to the State Department of Public Health for the purposes of the Virtual Dental Home (VDH) program established pursuant to Section 104755.5 of the Health and Safety Code.
This bill would require all state agencies to post their Financial Integrity and State Manager's Accountability Act (FISMA) biennial reports of internal accounting, administrative control, and monitoring practices on their website within five days of finalization.

Existing law specifies that heads of state agencies are responsible for establishing and maintaining a system of internal accounting and administrative control within their agencies. Agencies are required to conduct reviews and issue FISMA reports about these controls and monitoring processes. The report is already subject to Public Records Act requests and is currently required to be submitted to the Governor, Legislature, State Controller, Treasurer, and others, for inspection by the public.

The author of the bill seeks to increase transparency and, therefore, the public’s access to the FISMA report. This bill would require that a copy of the report be posted on the agency website five days after the report has been finalized. Staff anticipates little or no impact to the DHCC. This bill is being tracked by the Department of Consumer Affairs.

Support/Opposition

Support

• Howard Jarvis Taxpayers Association

Opposition

• None on file.
<table>
<thead>
<tr>
<th>TYPE OF BILL</th>
<th>ATTACHED:</th>
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<tbody>
<tr>
<td>Active Bill – In Committee Process</td>
<td>1) Language for AB 728 (Hayden) – version amended April 8, 2015</td>
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<tr>
<td>Majority Vote Required</td>
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<tr>
<td>Non-Appropriation</td>
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<td>Fiscal Committee</td>
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<td>Non-Urgency</td>
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<tr>
<td>Non-State-Mandated Local Program</td>
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<td>Non-Tax Levy</td>
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**COMMITTEE POSITION**

The Committee has not yet taken a position on AB 728 (Hadley).

The Legislative and Regulatory Subcommittee may consider taking a position and make a recommendation to the full Committee.

**COMMITTEE POSITION:**

_____ Support  _____ Oppose  _____ Neutral  _____ Watch
An act to amend Section 13405 of, and to add Section 13887.4 to, the Government Code, relating to state government.

LEGISLATIVE COUNSEL’S DIGEST

AB 728, as amended, Hadley. State government: financial reporting.

(1) Existing law, the Financial Integrity and State Manager’s Accountability Act of 1983 (FISMA), provides that state agency heads are responsible for the establishment and maintenance of a system or systems of internal accounting and administrative control within their agencies, as specified. Existing law requires state agency heads covered by the FISMA to, biennially, conduct an internal review and prepare a report on the adequacy of the agency’s systems of internal accounting, administrative control, and monitoring practices. Copies of the reports are required to be submitted to the Legislature, the California State Auditor, the Controller, the Treasurer, the Attorney General, the Governor, the director, and to the State Library where the copies are required to be available for public inspection.

This bill would also require the report to be posted on the agency’s Internet Web site within 5 days of finalization.

(2) Existing law requires the internal auditor operations of any state agency that does not report to a governing body to meet certain requirements, including, among others, the requirement that the chief internal auditor report audit findings and recommendations made under
his or her jurisdiction to the head or deputy head of the state agency and to the general counsel to the state agency, as specified. Existing law requires the internal auditor operations of any state agency that is overseen by a governing body to meet certain requirements, including, among others, the requirement that the chief internal auditor report audit findings and recommendations made under his or her jurisdiction to the audit committee and the general counsel to the governing body.

This bill would require a state agency to post any audit findings and recommendations on its Internet Web site within 5 days of a report of audit findings and recommendations to either the head or deputy head of the state agency and to the general counsel to the state agency, in the case of a state agency that does not report to a governing body, or to the audit committee and the general counsel to the governing body, in the case of a state agency that is overseen by a governing body.


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

SECTION 1. Section 13405 of the Government Code is amended to read:

13405. (a) To ensure that the requirements of this chapter are fully complied with, the head of each state agency that the director determines is covered by this section shall, on a biennial basis but no later than December 31 of each odd-numbered year, conduct an internal review and prepare a report on the adequacy of the agency’s systems of internal accounting, administrative control, and monitoring practices in accordance with the guide prepared by the director pursuant to subdivision (d).

(b) The report, including the state agency’s response to review recommendations, shall be signed by the head of the agency and addressed to the agency secretary, or the director for agencies without a secretary. Copies of the reports shall be posted on the agency’s Internet Web site within five days of finalization, and submitted to the Legislature, the California State Auditor, the Controller, the Treasurer, the Attorney General, the Governor, the director, and to the State Library where they shall be available for public inspection.

(c) The report shall identify any material inadequacy or material weakness in an agency’s systems of internal accounting and
administrative control that prevents the head of the agency from stating that the agency’s systems comply with this chapter. No later than 30 days after the report is submitted, the agency shall provide to the director a plan and schedule for correcting the identified inadequacies and weaknesses, which shall be updated every six months until all corrections are completed.

(d) The director, in consultation with the State Auditor and the Controller, shall establish, and may modify from time to time as necessary, a system of reporting and a general framework to guide state agencies in conducting internal reviews of their systems of internal accounting and administrative control.

(e) The director, in consultation with the State Auditor and the Controller, shall establish, and may modify from time to time as necessary, a general framework of recommended practices to guide state agencies in conducting active, ongoing monitoring of processes for internal accounting and administrative control.

SEC. 2. Section 13887.4 is added to the Government Code, to read:

13887.4. A state agency shall post any audit findings and recommendations on its Internet Web site within five days of a report being made pursuant to paragraph (2) of subdivision (a) or paragraph (2) of subdivision (b) of Section 13887.
SUMMARY
This bill would allow all programs within the Department of Consumer Affairs (DCA) to establish by regulation a retired category of licensure.

ANALYSIS
Existing law authorizes any of the boards within DCA to establish by regulation a system for an inactive category of licensure for persons who are not actively engaged in the practice of their profession or vocation. This bill would establish a similar section in law, but for the establishment of a retired license category. The bill does not have any mandates and would not create any additional mandates for the DHCC – it merely provides the authority for the DHCC to promulgate regulations to create a retired license category and charge a new fee.

SUPPORT/OPPOSITION
No support or opposition on file.

TYPE OF BILL
Active Bill – In Committee Process
Majority Vote Required
Non-Appropriation
Fiscal Committee
Non-Urgency
Non-State-Mandated Local Program
Non-Tax Levy

ATTACHED:
1) Language for AB 750 (Low) – version amended April 16, 2015
COMMITTEE POSITION
The Committee has not yet taken a position on AB 750 (Low).

The Legislative and Regulatory Subcommittee may consider taking a position and make a recommendation to the full Committee.

COMMITTEE POSITION: _____ Support _____ Oppose _____ Neutral _____ Watch
ASSEMBLY BILL No. 750

Introduced by Assembly Member Low

February 25, 2015

An act to add Section 463 to the Business and Professions Code, relating to business and professions.

LEGISLATIVE COUNSEL’S DIGEST


Existing law provides for numerous boards, bureaus, commissions, or programs within the Department of Consumer Affairs that administer the licensing and regulation of various businesses and professions. Existing law authorizes any of the boards, bureaus, commissions, or programs within the department, except as specified, to establish by regulation a system for an inactive category of license for persons who are not actively engaged in the practice of their profession or vocation. Under existing law, the holder of an inactive license is prohibited from engaging in any activity for which a license is required. Existing law defines “board” for these purposes to include, unless expressly provided otherwise, a bureau, commission, committee, department, division, examining committee, program, and agency.

This bill would additionally authorize any of the boards, bureaus, commissions, or programs within the department to establish by regulation a system for a retired category of license for persons who are not actively engaged in the practice of their profession or vocation,
and would prohibit the holder of a retired license from engaging in any activity for which a license is required, unless regulation specifies the criteria for a retired licensee to practice his or her profession. The bill would authorize a board upon its own determination, and would require a board upon receipt of a complaint from any person, to investigate the actions of any licensee, including, among others, a person with a license that is retired or inactive.


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

SECTION 1. Section 463 is added to the Business and Professions Code, to read:

463. (a) Any of the boards, bureaus, commissions, or programs within the department may establish, by regulation, a system for a retired category of licensure for persons who are not actively engaged in the practice of their profession or vocation.

(b) The regulation shall contain the following:

(1) The holder of a retired license issued pursuant to this section shall not engage in any activity for which a license is required, unless the board, by regulation, specifies the criteria for a retired licensee to practice his or her profession or vocation.

(2) The holder of a retired license shall not be required to renew that license.

(3) In order for the holder of a retired license issued pursuant to this section to restore his or her license to an active status, the holder of that license shall meet all the following:

(A) Pay a fee established by regulation.

(B) Certify, in a manner satisfactory to the board, that he or she has not committed an act or crime constituting grounds for denial of licensure.

(C) Comply with the fingerprint submission requirements established by regulation.

(D) If the board requires completion of continuing education for renewal of an active license, complete continuing education equivalent to that required for renewal of an active license, unless a different requirement is specified by the board.

(E) Complete any other requirements as specified by the board by regulation.
(c) A board may upon its own determination, and shall upon receipt of a complaint from any person, investigate the actions of any licensee, including a person with a license that either restricts or prohibits the practice of that person in his or her profession or vocation, including, but not limited to, a license that is retired, inactive, canceled, revoked, or suspended.
SUMMARY
This bill would require all proposed, major regulations (costing $50 million or more) submitted to the Secretary of State (SOS) by the Office of Administrative Law (OAL) to return to the Legislature for review and approval prior to enactment.

ANALYSIS
Existing law requires the OAL to file a regulation or an order of repeal with the SOS. The Constitution of the State of California grants the authority to the Legislature to create, amend, or repeal statute. The regulation would be reviewed by the appropriate legislative policy committees responsible for the subject matter of the regulation for review. According to the author, the bill would improve transparency of the rulemaking process and accountability to ensure that major government regulations, those with a fiscal impact on California's economy of $50 million or greater, face careful scrutiny by elected officials. In 2011, the Little Hoover Commission issued a report, Better Regulation: Improving California's Rulemaking Process, and recommended major regulations be sent to the Legislature for review.

SUPPORT/OPPOSITION
Support:
- American Chemistry Council
- Associated Builders and Contractors of California
- California Association of Boutique & Breakfast Inns
- California Business Properties Association
- California Business Roundtable
- California Chamber of Commerce
- California Hotel & Lodging Association
- California League of Food Processors
- California Manufacturers & Technology Association
- Consumer Specialty Products Association
- Los Angeles County Economic Development Corporation
• National Federation of Independent Business
• Southwest California Legislative Council
• USANA Health Sciences, Inc.
• Western Growers Association

Opposition:
• None on file.

TYPE OF BILL
Active Bill – In Committee Process    Non-Urgency
Majority Vote Required    Non-State-Mandated Local Program
Non-Appropriation    Non-Tax Levy
Fiscal Committee

ATTACHED:
1) Language for AB 797 (Steinorth) – version amended April 6, 2015

COMMITTEE POSITION
The Committee has not yet taken a position on AB 797 (Steinorth).

The Legislative and Regulatory Subcommittee may consider taking a position and make a recommendation to the full Committee.

COMMITTEE POSITION: ____Support _____ Oppose ______ Neutral ______ Watch
An act to amend Sections 11343.4 and 11349.3 of the Government Code, relating to regulations.

LEGISLATIVE COUNSEL’S DIGEST

AB 797, as amended, Steinorth. Regulations: effective dates and legislative review.

The Administrative Procedure Act governs the procedure for the adoption, amendment, or repeal of regulations by state agencies and for the review of those regulatory actions by the Office of Administrative Law. That act requires an agency, prior to submitting a proposal to adopt, amend, or repeal an administrative regulation, to determine the economic impact of that regulation, in accordance with certain procedures. The act defines a major regulation as a regulation that the agency determines has an expected economic impact on California business enterprises and individuals estimated to exceed $50,000,000. The act requires the office to transmit a copy of a regulation to the Secretary of State for filing if the office approves the regulation or fails to act on it within 30 days. The act provides that a regulation or an order of repeal of a regulation becomes effective on a quarterly basis, as prescribed, except in specified instances, including if a regulation adopted by the Fish and Game Commission requires a different effective date to conform with federal law. instances.

This bill would require the office to submit to the appropriate policy committees of each house of the Legislature for review a copy of each
major regulation that it submits to the Secretary of State. The bill would eliminate the quarterly schedule pursuant to which regulations and orders of repeal become effective, as well as the provisions specifically addressing the effective dates of regulations adopted by the Fish and Game Commission. The bill would, instead, provide that a regulation or order of repeal required to be filed with the Secretary of State generally becomes effective the 90th day after the date of filing, subject to certain exceptions. The bill would add another exception to those currently provided that specifies that a regulation does not become effective if the Legislature passes a statute to override the regulation.


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

SECTION 1. Section 11343.4 of the Government Code is amended to read:

SECTION 1. Section 11343.4 of the Government Code is amended to read:

line 1 11343.4. A regulation or an order of repeal required to be filed
line 2 with the Secretary of State shall become effective on the 90th day
line 3 after the date of filing unless any of the following occur:
line 4 (a) The statute pursuant to which the regulation or order of
line 5 repeal was adopted specifically provides otherwise, in which event
line 6 it becomes effective on the day prescribed by the statute.
line 7 (b) A later date is prescribed by the state agency in a written
line 8 instrument filed with, or as part of, the regulation or order of repeal.
line 9 (c) The agency makes a written request to the office
line 10 demonstrating good cause for an earlier effective date, in which
line 11 case the office may prescribe an earlier date.
line 12 (d) The Legislature passes a statute to override the regulation.

SECTION 1. Section 11343.4 of the Government Code is amended to read:

line 1 11343.4. (a) Except as otherwise provided in subdivision (b),
line 2 a regulation or an order of repeal required to be filed with the
line 3 Secretary of State shall become effective on a quarterly basis as
line 4 follows:
line 5 (1) January 1 if the regulation or order of repeal is filed on
line 6 September 1 to November 30, inclusive.
line 7 (2) April 1 if the regulation or order of repeal is filed on
line 8 December 1 to February 29, inclusive.
line 1 (3) July 1 if the regulation or order of repeal is filed on March
line 2 1 to May 31, inclusive.
line 3 (4) October 1 if the regulation or order of repeal is filed on June
line 4 1 to August 31, inclusive.
line 5 (b) The effective dates in subdivision (a) shall not apply in all
line 6 of the following:
line 7 (1) The effective date is specifically provided by the statute
line 8 pursuant to which the regulation or order of repeal was adopted,
line 9 in which event it becomes effective on the day prescribed by the
line 10 statute.
line 11 (2) A later date is prescribed by the state agency in a written
line 12 instrument filed with, or as part of, the regulation or order of repeal.
line 13 (3) The agency makes a written request to the office
line 14 demonstrating good cause for an earlier effective date, in which
line 15 case the office may prescribe an earlier date.
line 16 (4) (A) A regulation adopted by the Fish and Game Commission
line 17 pursuant to Article 1 (commencing with Section 200) of Chapter
line 18 2 of Division 1 of the Fish and Game Code.
line 19 (B) A regulation adopted by the Fish and Game Commission
line 20 that requires a different effective date in order to conform to a
line 21 federal regulation.
line 22 (5) The Legislature passes a statute to override the regulation.
line 23 SEC. 2. Section 11349.3 of the
line 24 Government Code is amended
line 25 to read:
line 26 11349.3. (a) (1) The office shall either approve a regulation
line 27 submitted to it for review and transmit it to the Secretary of State
line 28 for filing or disapprove it within 30 working days after the
line 29 regulation has been submitted to the office for review. If the office
line 30 fails to act within 30 days, the regulation shall be deemed to have
line 31 been approved and the office shall transmit it to the Secretary of
line 32 State for filing.
line 33 (2) The office shall submit a copy of each major regulation
line 34 submitted to the Secretary of State pursuant to paragraph (1) to
line 35 the appropriate policy committees with responsibility for the
line 36 subject matter of the regulation of each house of the Legislature
line 37 for review.
line 38 (b) If the office disapproves a regulation, it shall return it to the
line 39 adopting agency within the 30-day period specified in subdivision
line 40 (a) accompanied by a notice specifying the reasons for disapproval.
line 41 Within seven calendar days of the issuance of the notice, the office
shall provide the adopting agency with a written decision detailing
the reasons for disapproval. No regulation shall be disapproved
except for failure to comply with the standards set forth in Section
11349.1 or for failure to comply with this chapter.

(c) If an agency determines, on its own initiative, that a
regulation submitted pursuant to subdivision (a) should be returned
by the office prior to completion of the office’s review, it may
request the return of the regulation. All requests for the return of
a regulation shall be memorialized in writing by the submitting
agency no later than one week following the request. Any
regulation returned pursuant to this subdivision shall be resubmitted
to the office for review within the one-year period specified in
subdivision (b) of Section 11346.4 or shall comply with Article 5
(commencing with Section 11346) prior to resubmission.

(d) The office shall not initiate the return of a regulation pursuant
to subdivision (c) as an alternative to disapproval pursuant to
subdivision (b).
This bill would allow dental students, enrolled in their final year of completion at a dental school approved by the Dental Board of California (DBC), to be exempt from licensure and participate as unpaid volunteers at sponsored free health clinics.

Existing law exempts dental students from licensure if they are engaging in the practice of dentistry at the dental school's clinical departments or laboratories. The school is required to be approved by the DBC and the students are required to be supervised by a licensed dentist. This bill would expand the exemption to include students enrolled in their final year of dental school that participate as unpaid volunteers at sponsored free health clinics. The dental students would be allowed to treat patients in the underserved communities, under the supervision of licensed dentists, in the same clinical environment that currently exists in the California schools of dentistry.

Support:
- Oral and Facial Surgeons of California (sponsors)
- California Care Force
- Dr. No-Hee Park, Dean of the UCLA School of Dentistry

Opposition:
- None on file.

Summary:
- Bill Number: AB 880
- Author: Assembly Member RIDLEY-THOMAS
- Sponsor: Oral and Facial Surgeons of California
- Introduced: February 26, 2015
- Bill Status: 4/22/15 – Assembly Committee on Business and Professions
- History:
  - 04/06/15 - Re-referred to Com. on B. & P.
  - 03/26/15 - From committee chair, with author's amendments: Amend, and re-refer to Com. on B. & P. Read second time and amended.
  - 03/26/15 - Referred to Com. on B. & P.
  - 02/27/15 - From printer. May be heard in committee March 29.
  - 03/26/15 - Read first time. To print.
- Agenda Item: LEG 5n - AB 880 (Ridley-Thomas)
- Subject: Dentistry: licensure: exempt
ATTACHED:
1) Language for AB 880 (Ridley-Thomas) – version amended March 26, 2015

COMMITTEE POSITION
The Committee has not yet taken a position on AB 880 (Ridley-Thomas).

The Legislative and Regulatory Subcommittee may consider taking a position and make a recommendation to the full Committee.

COMMITTEE POSITION: _____Support _____ Oppose _____ Neutral _____ Watch
An act to amend add Section 1625 of 1626.6 to the Business and Professions Code, relating to dentistry.

LEGISLATIVE COUNSEL’S DIGEST

AB 880, as amended, Ridley-Thomas. Dentistry: licensure: exempt. The Dental Practice Act provides for the licensure and regulation of persons engaged in the practice of dentistry by the Dental Board of California. The act defines dentistry as the diagnosis or treatment, by surgery or other method, of diseases and lesions and the correction of malpositions of the human teeth, alveolar process, gums, jaws, or associated structures, and provides that a person practices dentistry if that person performs various specified acts, and prohibits the practice of dentistry by any person without a valid license, except in certain circumstances.

This bill would make nonsubstantive changes to those provisions. This bill would additionally exempt from that prohibition the practice of dentistry, as specified and as approved by the board, by a final year student without compensation or expectation of compensation and under the supervision of a licensed dentist in a free clinic.

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

SECTION 1. Section 1626.6 is added to the Business and Professions Code, to read:

1626.6. (a) (1) In addition to the exemptions set forth in Section 1626, the practice of dentistry by a final year student rendered or performed without compensation or expectation of compensation under the supervision of a licensed dentist in a free clinic is exempt from the operation of this chapter.

(2) The practice of dentistry exempted by paragraph (1) only includes those operations, approved by the board, that are described in the exemption provided in subdivision (b) of Section 1626 and rendered or performed under the same supervisory conditions.

(b) For purposes of this section, all of the following shall apply:

(1) “Free clinic” means a clinic as defined in Section 1200 of the Health and Safety Code where there are no charges directly to the patient for services rendered or for drugs, medicines, appliances, or apparatuses furnished, including, but not limited to, a free clinic as defined in subparagraph (B) of paragraph (1) of subdivision (a) of Section 1204 of the Health and Safety Code.

(2) “Final year student” means a student of dentistry in his or her final year of completion at a dental school approved by the board.

(3) “Licensed dentist” means a dentist licensed pursuant to this chapter.

SECTION 1. Section 1625 of the Business and Professions Code is amended to read:

1625. Dentistry is the diagnosis or treatment, by surgery or other method, of diseases and lesions and the correction of malpositions of the human teeth, alveolar process, gums, jaws, or associated structures. That diagnosis or treatment may include all necessary related procedures as well as the use of drugs, anesthetic agents, and physical evaluation. Without limiting the foregoing, a person practices dentistry within the meaning of this chapter who does one or more of the following:

(a) By card, circular, pamphlet, newspaper, or in any other way advertises himself or herself or represents himself or herself to be a dentist.
(b) Performs, or offers to perform, an operation or diagnosis of any kind, or treats diseases or lesions of the human teeth, alveolar process, gums, jaws, or associated structures, or corrects malposed positions thereof.

(c) In any way indicates that he or she will perform by himself or herself or his or her agents or servants an operation upon the human teeth, alveolar process, gums, jaws, or associated structures, or in any way indicates that he or she will construct, alter, repair, or sell a bridge, crown, denture or other prosthetic appliance or orthodontic appliance.

(d) Makes, or offers to make, an examination of, with the intent to perform or cause to be performed an operation on the human teeth, alveolar process, gums, jaws, or associated structures.

(e) Manages or conducts as manager, proprietor, conductor, lessor, or otherwise, a place where dental operations are performed.
SUMMARY
This bill would require a board or bureau under the Department of Consumer Affairs (DCA) to provide specified information to an ex-licensee when their license is suspended or revoked. The board or bureau would have to send the information to an ex-licensee through first-class mail and by email, if a board has an email address on file for the ex-licensee.

ANALYSIS
Current law requires any board under the jurisdiction of the DCA to send the specified documents to an ex-licensee who has had their license revoked or suspended, but does not specify by what means of communication. This bill would require that the documents be sent by first-class mail and email, if available. Staff does not anticipate a major impact on the DHCC due to this bill.

SUPPORT/OPPosition
No registered support or opposition on file.

TYPE OF BILL
Active Bill – In Committee Process Non-Urgency
Majority Vote Required Non-State-Mandated Local Program
Non-Appropriation Non-Tax Levy
Fiscal Committee

ATTACHED:
1) Language for AB 1060 (Bonilla) – version amended March 26, 2015

COMMITTEE POSITION
The Committee has not yet taken a position on AB 1060 (Bonilla). The Legislative and Regulatory Subcommittee may consider taking a position and make a recommendation to the full Committee.

COMMITTEE POSITION: ____Support _____ Oppose _______ Neutral _______ Watch
An act to amend Section 491 of the Business and Professions Code, relating to professions and vocations.

LEGISLATIVE COUNSEL’S DIGEST

AB 1060, as amended, Bonilla. Professions and vocations: licensure. Existing law provides for the licensure and regulation of various professions and vocations by boards within the Department of Consumer Affairs. Existing law authorizes a board to suspend or revoke a license on the ground that the licensee has been convicted of a crime, if the crime is substantially related to the qualifications, functions, or duties of the business or profession for which the license was issued. Existing law requires the board, upon suspension or revocation of a license, to provide the ex-licensee with certain information pertaining to rehabilitation, reinstatement, or reduction of penalty, as specified.

This bill would authorize the board to provide that information through first-class mail and by electronic means. If the board has an email address on file for the ex-licensee, the information would be provided by email.


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

SECTION 1. Section 491 of the Business and Professions Code is amended to read:
491. (a) Upon suspension or revocation of a license by a board on one or more of the grounds specified in Section 490, the board shall:

(1) Send a copy of the provisions of Section 11522 of the Government Code to the ex-licensee.

(2) Send a copy of the criteria relating to rehabilitation formulated under Section 482 to the ex-licensee.

(b) Subdivision (a) may shall be satisfied through first-class mail and by electronic means: email if the board has an email address on file for the ex-licensee.
SUMMARY
Among other provisions, this bill would expressly authorize the incorporation of a Registered Dental Hygienist in Alternative Practice (RDHAP) and allow an RDHAP to include the following licensed professionals as shareholders, officers, directors, or professional employees of the professional corporation: licensed dentists, dental assistants, registered dental hygienists, and registered dental hygienists in extended functions.

ANALYSIS
Existing law (Business and Professions Code) already allows for RDHAPs to incorporate; however, the authority to incorporate was not provided to RDHAPs in the Moscone-Knox Professional Corporation Act in the Corporations Code. Section 18 of this bill would provide this authority and allow RDHAPs to fully incorporate. A similar provision is included in AB 502 (Chau, 2015).

SUPPORT/OPPOSITION
Support:
- Nonprofit Organization Committee of Business Law Section of the California State Bar (co-sponsor)
- Corporations Committee of The Business Law Section of the California State Bar (co-sponsor)
- California Dental Hygienists’ Association (co-sponsor)

Opposition:
- None on file.
TYPE OF BILL
Active Bill – In Committee Process Non-Urgency
Majority Vote Required Non-State-Mandated Local Program
Non-Appropriation Non-Tax Levy
Fiscal Committee

ATTACHED:
1) Language for AB 351 (Committee on Banking and Financial Institutions) – version amended April 6, 2015

COMMITTEE POSITION
The Committee has not yet taken a position on AB 351 (Committee on Banking and Financial Institutions).

The Legislative and Regulatory Subcommittee may consider taking a position and make a recommendation to the full Committee.

COMMITTEE POSITION: ____Support _____ Oppose ______ Neutral ______ Watch
An act to amend Sections 173, 305, 307, 312, 313, 416, 703, 1102, 5039.5, 5213, 7213, 9213, 12228.5, 12320, 12331, and 12353, and 13401.5 of, and to add Section 156.6 to, the Corporations Code, relating to corporations.

LEGISLATIVE COUNSEL’S DIGEST


(1) The General Corporation Law generally authorizes the formation of general corporations. The Nonprofit Corporation Law authorizes the formation of public benefit corporations, mutual benefit corporations, and religious corporations. The Consumer Cooperative Corporation Law authorizes the formation of consumer cooperatives. Each of these laws require a corporation formed under its provisions to have specific corporate officers, which include, among others, a chair of the board, which is also referred to with gender variations.

This bill would specifically expand the permissible titles relating to a chair of a board. This bill would make nonsubstantive changes relating to bylaws effective during an emergency, as defined.

(2) The Consumer Cooperative Corporation Law authorizes the formation of consumer cooperatives corporations, and specifies the corporate power of a corporation and its officers formed under its provisions.
This bill would expand the authority of a consumer cooperative corporation to conduct its ordinary business operations in anticipation of, or under the conditions of, an emergency, as defined, to include, among others, the authority to modify the requirements of giving notice to directors of a meeting of the board of directors in any practicable manner. The bill would also authorize a consumer cooperative corporation to enact bylaws effective only during an emergency relating to the management and conduct of its ordinary business affairs, to include, among others, bylaws providing procedures for designating additional or substitute directors.

(3) The Moscone–Knox Professional Corporation Act provides for the organization of a corporation under certain existing law for the purposes of qualifying as a professional corporation under that act and rendering professional services. The act authorizes specified healing arts practitioners to be shareholders, officers, directors, or professional employees of a designated professional corporation, subject to certain limitations relating to ownership of shares.

This bill would add dental assistants, licensed dentists, registered dental hygienists, and registered dental hygienists in extended functions to the list of healing arts practitioners who may be shareholders, officers, or directors of a registered dental hygienist in alternative practice corporation.


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

SECTION 1. Section 156.6 is added to the Corporations Code, to read:

156.6. All references in this division to “chairperson of the board” shall be deemed to refer to all permissible titles for the chairperson of the board, as permitted by Section 312.

SEC. 2. Section 173 of the Corporations Code is amended to read:

173. “Officers’ certificate” means a certificate signed and verified by the chairperson of the board, the president or any vice president and by the secretary, the chief financial officer, the treasurer or any assistant secretary or assistant treasurer.

SEC. 3. Section 305 of the Corporations Code is amended to read:
305. (a) Unless otherwise provided in the articles or bylaws and except for a vacancy created by the removal of a director, vacancies on the board may be filled by approval of the board (Section 151) or, if the number of directors then in office is less than a quorum, by (1) the unanimous written consent of the directors then in office, (2) the affirmative vote of a majority of the directors then in office at a meeting held pursuant to notice or waivers of notice complying with Section 307 or (3) a sole remaining director. Unless the articles or a bylaw adopted by the shareholders provide that the board may fill vacancies occurring in the board by reason of the removal of directors, such vacancies may be filled only by approval of the shareholders (Section 153).

(b) The shareholders may elect a director at any time to fill any vacancy not filled by the directors. Any such election by written consent other than to fill a vacancy created by removal, which requires the unanimous consent of all shares entitled to vote for the election of directors, requires the consent of a majority of the outstanding shares entitled to vote.

(c) If, after the filling of any vacancy by the directors, the directors then in office who have been elected by the shareholders shall constitute less than a majority of the directors then in office, then both of the following shall be applicable:

(1) Any holder or holders of an aggregate of 5 percent or more of the total number of shares at the time outstanding having the right to vote for those directors may call a special meeting of shareholders, or

(2) The superior court of the proper county shall, upon application of such shareholder or shareholders, summarily order a special meeting of shareholders, to be held to elect the entire board. The term of office of any director shall terminate upon that election of a successor.

The hearing on any application filed pursuant to this subdivision shall be held on not less than 10 business days notice to the corporation. If the corporation intends to oppose the application, it shall file with the court a notice of opposition not later than five business days prior to the date set for the hearing. The application and any notice of opposition shall be supported by appropriate affidavits and the court’s determination shall be made on the basis of the papers in the record; but, for good cause shown, the court may receive and consider at the hearing additional evidence, oral
or documentary, and additional points and authorities. The hearing
shall take precedence over all other matters not of a similar nature
pending on the date set for the hearing.
(d) Any director may resign effective upon giving written notice
to the chairman of the board, the president, the
secretary or the board of directors of the corporation, unless the
notice specifies a later time for the effectiveness of such
resignation. If the resignation is effective at a future time, a
successor may be elected to take office when the resignation
becomes effective.

SEC. 4. Section 307 of the Corporations Code is amended to
read:
307. (a) Unless otherwise provided in the articles or, subject
to paragraph (5) of subdivision (a) of Section 204, in the bylaws,
all of the following apply:
(1) Meetings of the board may be called by the chair of the board or the president or any vice president or the secretary
or any two directors.
(2) Regular meetings of the board may be held without notice
if the time and place of the meetings are fixed by the bylaws or
the board. Special meetings of the board shall be held upon four
days’ notice by mail or 48 hours’ notice delivered personally or
by telephone, including a voice messaging system or by electronic
transmission by the corporation (Section 20). The articles or bylaws
may not dispense with notice of a special meeting. A notice, or
waiver of notice, need not specify the purpose of any regular or
special meeting of the board.
(3) Notice of a meeting need not be given to a director who
provides a waiver of notice or a consent to holding the meeting or
an approval of the minutes thereof in writing, whether before or
after the meeting, or who attends the meeting without protesting,
prior thereto or at its commencement, the lack of notice to that
director. These waivers, consents and approvals shall be filed with
the corporate records or made a part of the minutes of the meeting.
(4) A majority of the directors present, whether or not a quorum
is present, may adjourn any meeting to another time and place. If
the meeting is adjourned for more than 24 hours, notice of an
adjournment to another time or place shall be given prior to the
time of the adjourned meeting to the directors who were not present
at the time of the adjournment.
Meetings of the board may be held at a place within or without the state that has been designated in the notice of the meeting or, if not stated in the notice or there is no notice, designated in the bylaws or by resolution of the board.

Members of the board may participate in a meeting through use of conference telephone, electronic video screen communication, or electronic transmission by and to the corporation (Sections 20 and 21). Participation in a meeting through use of conference telephone or electronic video screen communication pursuant to this subdivision constitutes presence in person at that meeting as long as all members participating in the meeting are able to hear one another. Participation in a meeting through electronic transmission by and to the corporation (other than conference telephone and electronic video screen communication), pursuant to this subdivision constitutes presence in person at that meeting if both of the following apply:

(A) Each member participating in the meeting can communicate with all of the other members concurrently.

(B) Each member is provided the means of participating in all matters before the board, including, without limitation, the capacity to propose, or to interpose an objection to, a specific action to be taken by the corporation.

A majority of the authorized number of directors constitutes a quorum of the board for the transaction of business. The articles or bylaws may not provide that a quorum shall be less than one-third the authorized number of directors or less than two, whichever is larger, unless the authorized number of directors is one, in which case one director constitutes a quorum.

An act or decision done or made by a majority of the directors present at a meeting duly held at which a quorum is present is the act of the board, subject to the provisions of Section 310 and subdivision (e) of Section 317. The articles or bylaws may not provide that a lesser vote than a majority of the directors present at a meeting is the act of the board. A meeting at which a quorum is initially present may continue to transact business notwithstanding the withdrawal of directors, if any action taken is approved by at least a majority of the required quorum for that meeting.

(b) An action required or permitted to be taken by the board may be taken without a meeting, if all members of the board shall
individually or collectively consent in writing to that action and
if the number of members of the board serving at the time
constitutes a quorum. The written consent or consents shall be
filed with the minutes of the proceedings of the board. For purposes
of this subdivision only, “all members of the board” shall include
an “interested director” as described in subdivision (a) of Section
310 or a “common director” as described in subdivision (b) of
Section 310 who abstains in writing from providing consent, where
the disclosures required by Section 310 have been made to the
noninterested or noncommon directors, as applicable, prior to their
execution of the written consent or consents, the specified
disclosures are conspicuously included in the written consent or
consents executed by the noninterested or noncommon directors,
and the noninterested or noncommon directors, as applicable,
approve the action by a vote that is sufficient without counting the
votes of the interested or common directors. If written consent is
provided by the directors in accordance with the immediately
preceding sentence and the disclosures made regarding the action
that is the subject of the consent do not comply with the
requirements of Section 310, the action that is the subject of the
consent shall be deemed approved, but in any suit brought to
challenge the action, the party asserting the validity of the action
shall have the burden of proof in establishing that the action was
just and reasonable to the corporation at the time it was approved.
(c) This section applies also to committees of the board and
incorporators and action by those committees and incorporators,
mutatis mutandis.
SEC. 5. Section 312 of the Corporations Code is amended to
read:
312. (a) A corporation shall have (1) a chairman chairperson
of the board, who may be given the title of chair, chairperson,
chairman, chairwoman, chair of the board, chairperson of the
board, chairman of the board, or chairwoman of the board, or a
president or both, (2) a secretary, (3) a chief financial officer, and
(4) such other officers with such titles and duties as shall be stated
in the bylaws or determined by the board and as may be necessary
to enable it to sign instruments and share certificates. The president,
or if there is no president the chairman chairperson of the board,
is the general manager and chief executive officer of the
corporation, unless otherwise provided in the articles or bylaws.
Any number of offices may be held by the same person unless the articles or bylaws provide otherwise.

(b) Except as otherwise provided by the articles or bylaws, officers shall be chosen by the board and serve at the pleasure of the board, subject to the rights, if any, of an officer under any contract of employment. Any officer may resign at any time upon written notice to the corporation without prejudice to the rights, if any, of the corporation under any contract to which the officer is a party.

SEC. 6. Section 313 of the Corporations Code is amended to read:

313. Subject to the provisions of subdivision (a) of Section 208, any note, mortgage, evidence of indebtedness, contract, share certificate, initial transaction statement or written statement, conveyance, or other instrument in writing, and any assignment or endorsement thereof, executed or entered into between any corporation and any other person, when signed by the chairman or vice chairman of the board, the president or any vice president and the secretary, any assistant secretary, the chief financial officer or any assistant treasurer of such corporation, is not invalidated as to the corporation by any lack of authority of the signing officers in the absence of actual knowledge on the part of the other person that the signing officers had no authority to execute the same.

SEC. 7. Section 416 of the Corporations Code is amended to read:

416. (a) Every holder of shares in a corporation shall be entitled to have a certificate signed in the name of the corporation by the chairman or vice chairman of the board or the president or a vice president and by the chief financial officer or an assistant treasurer or the secretary or any assistant secretary, certifying the number of shares and the class or series of shares owned by the shareholder. Any or all of the signatures on the certificate may be facsimile. In case any officer, transfer agent or registrar who has signed or whose facsimile signature has been placed upon a certificate has ceased to be such officer, transfer agent or registrar before such certificate is issued, it may be issued by the corporation with the same effect as if such person were an officer, transfer agent or registrar at the date of issue.

(b) Notwithstanding subdivision (a), a corporation may adopt a system of issuance, recordation and transfer of its shares by
electronic or other means not involving any issuance of certificates, including provisions for notice to purchasers in substitution for the required statements on certificates under Sections 417, 418, and 1302, and as may be required by the commissioner in administering the Corporate Securities Law of 1968, which system (1) has been approved by the United States Securities and Exchange Commission, (2) is authorized in any statute of the United States, or (3) is in accordance with Division 8 (commencing with Section 8101) of the Commercial Code. Any system so adopted shall not become effective as to issued and outstanding certificated securities until the certificates therefor have been surrendered to the corporation.

SEC. 8. Section 703 of the Corporations Code is amended to read:

703. (a) Shares standing in the name of another corporation, domestic or foreign, may be voted by an officer, agent, or proxyholder as the bylaws of the other corporation may prescribe or, in the absence of such provision, as the board of the other corporation may determine or, in the absence of that determination, by the chairman chairperson of the board, president or any vice president of the other corporation, or by any other person authorized to do so by the chairman chairperson of the board, president, or any vice president of the other corporation. Shares which are purported to be voted or any proxy purported to be executed in the name of a corporation (whether or not any title of the person signing is indicated) shall be presumed to be voted or the proxy executed in accordance with the provisions of this subdivision, unless the contrary is shown.

(b) Shares of a corporation owned by its subsidiary shall not be entitled to vote on any matter.

(c) Shares held by the issuing corporation in a fiduciary capacity, and shares of an issuing corporation held in a fiduciary capacity by its subsidiary, shall not be entitled to vote on any matter, except as follows:

1) To the extent that the settlor or beneficial owner possesses and exercises a right to vote or to give the corporation binding instructions as to how to vote such shares.

2) Where there are one or more cotrustees who are not affected by the prohibition of this subdivision, in which case the shares may be voted by the cotrustees as if it or they are the sole trustee.
SEC. 9. Section 1102 of the Corporations Code is amended to read:

1102. Each corporation shall sign the agreement by its chairman or chairperson of the board, president or a vice president and secretary or an assistant secretary acting on behalf of their respective corporations.

SEC. 10. Section 5039.5 of the Corporations Code is amended to read:

5039.5. All references in this division to “chairman of the board,” other than in Sections 5213, 7213, and 9213, shall be deemed to refer to all permissible titles for a chair of the board, as permitted by Sections 5213, 7213, and 9213.

SEC. 11. Section 5213 of the Corporations Code is amended to read:

5213. (a) A corporation shall have (1) a chair of the board, who may be given the title chair, chairperson, chairman, chairwomen, chairwoman, chair of the board, chairperson of the board, chairman of the board, or chairwoman of the board, or a president or both, (2) a secretary, (3) a treasurer or a chief financial officer or both, and (4) any other officers with any titles and duties as shall be stated in the bylaws or determined by the board and as may be necessary to enable it to sign instruments. The president, or if there is no president the chair of the board, is the general manager and chief executive officer of the corporation, unless otherwise provided in the articles or bylaws. Unless otherwise specified in the articles or the bylaws, if there is no chief financial officer, the treasurer is the chief financial officer of the corporation. Any number of offices may be held by the same person unless the articles or bylaws provide otherwise, except that no person serving as the secretary, the treasurer, or the chief financial officer may serve concurrently as the president or chair of the board. Any compensation of the president or chief executive officer and the chief financial officer or treasurer shall be determined in accordance with subdivision (g) of Section 12586 of the Government Code, if applicable.

(b) Except as otherwise provided by the articles or bylaws, officers shall be chosen by the board and serve at the pleasure of the board, subject to the rights, if any, of an officer under any
contract of employment. Any officer may resign at any time upon
written notice to the corporation without prejudice to the rights, if
any, of the corporation under any contract to which the officer is
a party.
(c) If the articles or bylaws provide for the election of any
officers by the members, the term of office of the elected officer
shall be one year unless the articles or bylaws provide for a
different term which shall not exceed three years.
SEC. 3.
SEC. 12. Section 7213 of the Corporations Code is amended
to read:
7213. (a) A corporation shall have (1) a chair of the board,
who may be given the title chair, chairperson, chairman,
chairwoman, chairwoman, chair of the board, chairperson of the
board, chairman of the board, or chairwoman of the board, or a
president or both, (2) a secretary, (3) a treasurer or a chief financial
officer or both, and (4) any other officers with any titles and duties
as shall be stated in the bylaws or determined by the board and as
may be necessary to enable it to sign instruments. The president,
or if there is no president the chair of the board, is the general
manager and chief executive officer of the corporation, unless
otherwise provided in the articles or bylaws. Unless otherwise
specified in the articles or the bylaws, if there is no chief financial
officer, the treasurer is the chief financial officer of the corporation.
Any number of offices may be held by the same person unless the
articles or bylaws provide otherwise. Where a corporation holds
assets in charitable trust, any compensation of the president or
chief executive officer and the chief financial officer or treasurer
shall be determined in accordance with subdivision (g) of Section
12586 of the Government Code, if applicable.
(b) Except as otherwise provided by the articles or bylaws,
officers shall be chosen by the board and serve at the pleasure of
the board, subject to the rights, if any, of an officer under any
contract of employment. Any officer may resign at any time upon
written notice to the corporation without prejudice to the rights, if
any, of the corporation under any contract to which the officer is
a party.
SEC. 4.
SEC. 13. Section 9213 of the Corporations Code is amended
to read:
(a) A corporation shall have (1) a chair of the board, who may be given the title chair, chairperson, chairman, chairwomen, chairwoman, chair of the board, chairperson of the board, chairman of the board, or chairwoman of the board, or a president or both, (2) a secretary, (3) a treasurer or a chief financial officer or both and (4) any other officers with any titles and duties as are stated in the bylaws or determined by the board and as may be necessary to enable it to sign instruments. The president, or if there is no president, the chair of the board, is the general manager and chief executive officer of the corporation, unless otherwise provided in the articles or bylaws. Unless otherwise specified in the articles or the bylaws, if there is no chief financial officer, the treasurer is the chief financial officer of the corporation. Any number of offices may be held by the same person unless the articles or bylaws provide otherwise, except that no person serving as the secretary, the treasurer, or the chief financial officer may serve concurrently as the president or chair of the board. Any compensation of the president or chief executive officer and the chief financial officer or treasurer shall be determined in accordance with subdivision (g) of Section 12586 of the Government Code, if applicable.

(b) Except as otherwise provided by the articles or bylaws, officers shall be chosen by the board and serve at the pleasure of the board, subject to the rights, if any, of an officer under any contract of employment. Any officer may resign at any time upon written notice to the corporation without prejudice to the rights, if any, of the corporation under any contract to which the officer is a party.

SEC. 5.

SEC. 14. Section 12228.5 of the Corporations Code is amended to read:

12228.5. For the purposes of this part, all references to “chairman of the board,” other than in Section 12353, shall be deemed to refer to all permissible titles for a chair of the board, as permitted by Section 12353.

SEC. 6.

SEC. 15. Section 12320 of the Corporations Code is amended to read:

12320. Subject to any limitations contained in the articles or bylaws and to compliance with other provisions of this part and
any other applicable laws, a corporation, in carrying out its activities, shall have all of the powers of a natural person, including, without limitation, the power to:

(a) Adopt, use, and at will alter a corporate seal, but failure to affix a seal does not affect the validity of any instrument.

(b) Adopt, amend, and repeal bylaws.

(c) Qualify to conduct its activities in any other state, territory, dependency, or foreign country.

(d) Issue, purchase, redeem, receive, take or otherwise acquire, own, sell, lend, exchange, transfer or otherwise dispose of, pledge, use and otherwise deal in and with its own memberships, bonds, debentures, notes, and debt securities.

(e) Pay pensions, and establish and carry out pension, deferred compensation, saving, thrift and other retirement, incentive and benefit plans, trusts and provisions for any or all of its directors, officers, employees, and persons providing services to it or any of its subsidiary or related or associated corporations, and to indemnify and purchase and maintain insurance on behalf of any fiduciary of such plans, trusts, or provisions.

(f) Issue certificates evidencing membership in accordance with the provisions of Section 12401 and issue identity cards to identify those persons eligible to use the corporation’s facilities.

(g) Levy dues, assessments, and membership and transfer fees.

(h) Make donations for the public welfare or for community funds, hospital, charitable, educational, scientific, civic, religious, or similar purposes.

(i) Assume obligations, enter into contracts, including contracts of guarantee or suretyship, incur liabilities, borrow or lend money or otherwise use its credit, and secure any of its obligations, contracts or liabilities by mortgage, pledge or other encumbrance of all or any part of its property and income.

(j) Participate with others in any partnership, joint venture or other association, transaction or arrangement of any kind whether or not such participation involves sharing or delegation of control with or to others.

(k) Act as trustee under any trust incidental to the principal objects of the corporation, and receive, hold, administer, exchange, and expend funds and property subject to such trust.
(l) Carry on a business at a profit and apply any profit that results
from the business activity to any activity in which it may lawfully
engage.

(m) (1) In anticipation of or during an emergency, take either
or both of the following actions necessary to conduct the
company’s ordinary business operations and affairs, unless
bylaws, authorized pursuant to subdivision (h) of Section 12331,
provide otherwise:

(A) Modify lines of succession to accommodate the incapacity
of any director, officer, employee, or agent resulting from the
emergency.

(B) Relocate the principal office, designate alternative principal
offices or regional offices, or authorize the officers to do so.

(2) During an emergency, take either or both of the following
actions necessary to conduct the company’s ordinary business
operations and affairs, unless bylaws, authorized pursuant to
subdivision (h) of Section 12331, provide otherwise:

(A) Give notice to a director or directors in any practicable
manner under the circumstances, including, but not limited to, by
publication and radio, when notice of a meeting of the board cannot
be given to that director or directors in the manner prescribed by
the bylaws or Section 12351.

(B) Deem that one or more officers of the corporation present
at a board meeting is a director, in order of rank and within the
same rank in order of seniority, as necessary to achieve a quorum
for that meeting.

(3) In anticipation of or during an emergency, the board may
not take any action that requires the vote of the members or is not
in the corporation’s ordinary course of business, unless the required
vote of the members was obtained prior to the emergency.

(4) Any actions taken in good faith in anticipation of or during
an emergency under this subdivision bind the corporation and may
not be used to impose liability on a corporate director, officer, employee, or agent.

(5) For purposes of this subdivision, “emergency” means any of the following events or circumstances as a result of which, and only so long as, a quorum of the corporation’s board of directors cannot be readily convened for action:

(A) A natural catastrophe, including, but not limited to, a hurricane, tornado, storm, high water, wind-driven water, tidal wave, tsunami, earthquake, volcanic eruption, landslide, mudslide, snowstorm, or, regardless of cause, any fire, flood, or explosion.

(B) An attack on this state or nation by an enemy of the United States of America, or upon receipt by this state of a warning from the federal government indicating that an enemy attack is probable or imminent.

(C) An act of terrorism or other manmade disaster that results in extraordinary levels of casualties or damage or disruption severely affecting the infrastructure, environment, economy, government functions, or population, including, but not limited to, mass evacuations.

(D) A state of emergency proclaimed by the Governor or by the President of the United States.

SEC. 7. SEC. 16. Section 12331 of the Corporations Code is amended to read:

12331. (a) The bylaws shall set forth (unless such provision is contained in the articles, in which case it may only be changed by an amendment of the articles) the number of directors of the corporation, or the method of determining the number of directors of the corporation, or that the number of directors shall be not less than a stated minimum or more than a stated maximum with the exact number of directors to be fixed, within the limits specified, by approval of the board or the members (Sections 12222 and 12224), in the manner provided in the bylaws, subject to subdivision (e). The number or minimum number of directors shall not be less than three. Alternate directors may be permitted, in which event, the bylaws shall specify the manner and times of their election and the conditions to their service in place of a director.

(b) Once members have been admitted, a bylaw specifying or changing a fixed number of directors or the maximum or minimum
number or changing from a fixed to a variable board or vice versa may only be adopted by approval of the members.

(c) The bylaws may contain any provision, not in conflict with law or the articles, for the management of the activities and for the conduct of the affairs of the corporation, including, but not limited to:

(1) Any provision referred to in subdivision (c) of Section 12313.

(2) The time, place and manner of calling, conducting and giving notice of members’, directors’, and committee meetings, or of conducting mail ballots.

(3) The qualifications, duties, and compensation of directors; the time of their election; and the requirements of a quorum for directors’ and committee meetings.

(4) The appointment of committees, composed of directors or nondirectors or both, by the board or any officer and the authority of these committees.

(5) The appointment, duties, compensation, and tenure of officers.

(6) The mode of determination of members of record.

(7) The making of reports and financial statements to members.

(8) Setting, imposing, and collecting dues, assessments, and membership and transfer fees.

(9) The time and manner of patronage distributions consistent with this part.

(d) The bylaws may provide for eligibility, the manner of admission, withdrawal, suspension, and expulsion of members, and the suspension or termination of memberships consistent with the requirements of Section 12431.

(e) The bylaws may require, for any or all corporate actions, the vote of a larger proportion of, or all of, the members or the members of any class, unit, or grouping of members or the vote of a larger proportion of, or all of, the directors, than is otherwise required by this part. A provision in the bylaws requiring a greater vote shall not be altered, amended, or repealed except by the greater vote, unless otherwise provided in the bylaws.

(f) The bylaws may contain a provision limiting the number of members, in total or of any class or series, which the corporation is authorized to admit.
(g) The bylaws may provide for the establishment by the corporation of a program for the education of its members, officers, employees, and the general public in the principles and techniques of cooperation.

(h)(1) The bylaws may contain any provision, not in conflict with the articles, to manage and conduct the ordinary business affairs of the corporation effective only during an emergency, including, but not limited to, procedures for calling a board meeting, quorum requirements for a board meeting, and designation of additional or substitute directors.

(2) The bylaws may contain any provision, not in conflict with the articles, to manage and conduct the ordinary business affairs of the corporation effective only in an emergency as defined in Section 12320, including, but not limited to, procedures for calling a board meeting, quorum requirements for a board meeting, and designation of additional or substitute directors.

(2) During an emergency, the board may not take any action that requires the vote of the members or otherwise is not in the corporation’s ordinary course of business, unless the required vote of the members was obtained prior to the emergency.

(3) All provisions of the regular bylaws consistent with the bylaws effective only in the event of an emergency shall remain effective during the emergency, and the emergency bylaws shall not be effective after the emergency ends.

(4) Corporate action taken in good faith in accordance with the bylaws effective only in the event of an emergency binds the corporation, and may not be used to impose liability on a corporate director, officer, employee, or agent. Corporate action taken in good faith in accordance with the emergency bylaws binds the corporation, and may not be used to impose liability on a corporate director, officer, employee, or agent.

(5) For purposes of this subdivision, “emergency” has the same meaning as the term does in Section 12320.

SEC. 8. 
SEC. 17. Section 12353 of the Corporations Code is amended to read:
12353. (a) A corporation shall have (1) a chair of the board, who may be given the title chair, chairperson, chairman, chairwomen, chairwoman, chair of the board, chairperson of the board, chairman of the board, or chairwoman of the board, or a president or both, (2) a secretary, (3) a treasurer or a chief financial officer or both, and (4) any other officers with any titles and duties as shall be stated in the bylaws or determined by the board and as may be necessary to enable it to sign instruments. The president, or if there is no president the chair of the board, is the chief executive officer of the corporation, unless otherwise provided in the articles or bylaws. Unless otherwise specified in the articles or bylaws, if there is no chief financial officer, the treasurer is the chief financial officer of the corporation. Any number of offices may be held by the same person unless the articles or bylaws provide otherwise. Either the chair of the board or the president shall be elected from among those board members elected by the membership of the corporation.

(b) Except as otherwise provided by the articles or bylaws, officers shall be chosen by the board and serve at the pleasure of the board, subject to the rights, if any, of an officer under any contract of employment. Any officer may resign at any time upon written notice to the corporation without prejudice to the rights, if any, of the corporation under any contract to which the officer is a party.

SEC. 18. Section 13401.5 of the Corporations Code is amended to read:

13401.5. Notwithstanding subdivision (d) of Section 13401 and any other provision of law, the following licensed persons may be shareholders, officers, directors, or professional employees of the professional corporations designated in this section so long as the sum of all shares owned by those licensed persons does not exceed 49 percent of the total number of shares of the professional corporation so designated herein, and so long as the number of those licensed persons owning shares in the professional corporation so designated herein does not exceed the number of persons licensed by the governmental agency regulating the designated professional corporation. This section does not limit employment by a professional corporation designated in this section of only those licensed professionals listed under each subdivision. Any person duly licensed under Division 2 (commencing with
Section 500) of the Business and Professions Code, the Chiropractic Act, or the Osteopathic Act may be employed to render professional services by a professional corporation designated in this section.

(a) Medical corporation.
   (1) Licensed doctors of podiatric medicine.
   (2) Licensed psychologists.
   (3) Registered nurses.
   (4) Licensed optometrists.
   (5) Licensed marriage and family therapists.
   (6) Licensed clinical social workers.
   (7) Licensed physician assistants.
   (8) Licensed chiropractors.
   (9) Licensed acupuncturists.
   (10) Naturopathic doctors.
   (11) Licensed professional clinical counselors.
   (12) Licensed physical therapists.

(b) Podiatric medical corporation.
   (1) Licensed physicians and surgeons.
   (2) Licensed psychologists.
   (3) Registered nurses.
   (4) Licensed optometrists.
   (5) Licensed chiropractors.
   (6) Licensed acupuncturists.
   (7) Naturopathic doctors.
   (8) Licensed physical therapists.

(c) Psychological corporation.
   (1) Licensed physicians and surgeons.
   (2) Licensed doctors of podiatric medicine.
   (3) Registered nurses.
   (4) Licensed optometrists.
   (5) Licensed marriage and family therapists.
   (6) Licensed clinical social workers.
   (7) Licensed chiropractors.
   (8) Licensed acupuncturists.
   (9) Naturopathic doctors.
   (10) Licensed professional clinical counselors.

(d) Speech-language pathology corporation.
   (1) Licensed audiologists.

(e) Audiology corporation.
(1) Licensed speech-language pathologists.
(f) Nursing corporation.
(1) Licensed physicians and surgeons.
(2) Licensed doctors of podiatric medicine.
(3) Licensed psychologists.
(4) Licensed optometrists.
(5) Licensed marriage and family therapists.
(6) Licensed clinical social workers.
(7) Licensed physician assistants.
(8) Licensed chiropractors.
(9) Licensed acupuncturists.
(10) Naturopathic doctors.
(11) Licensed professional clinical counselors.
(g) Marriage and family therapist corporation.
(1) Licensed physicians and surgeons.
(2) Licensed psychologists.
(3) Licensed clinical social workers.
(4) Registered nurses.
(5) Licensed chiropractors.
(6) Licensed acupuncturists.
(7) Naturopathic doctors.
(8) Licensed professional clinical counselors.
(h) Licensed clinical social worker corporation.
(1) Licensed physicians and surgeons.
(2) Licensed psychologists.
(3) Licensed marriage and family therapists.
(4) Registered nurses.
(5) Licensed chiropractors.
(6) Licensed acupuncturists.
(7) Naturopathic doctors.
(8) Licensed professional clinical counselors.
(i) Physician assistants corporation.
(1) Licensed physicians and surgeons.
(2) Registered nurses.
(3) Licensed acupuncturists.
(4) Naturopathic doctors.
(j) Optometric corporation.
(1) Licensed physicians and surgeons.
(2) Licensed doctors of podiatric medicine.
(3) Licensed psychologists.
(4) Registered nurses.
(5) Licensed chiropractors.
(6) Licensed acupuncturists.
(7) Naturopathic doctors.
(k) Chiropractic corporation.
(1) Licensed physicians and surgeons.
(2) Licensed doctors of podiatric medicine.
(3) Licensed psychologists.
(4) Registered nurses.
(5) Licensed optometrists.
(6) Licensed marriage and family therapists.
(7) Licensed clinical social workers.
(8) Licensed acupuncturists.
(9) Naturopathic doctors.
(10) Licensed professional clinical counselors.
(l) Acupuncture corporation.
(1) Licensed physicians and surgeons.
(2) Licensed doctors of podiatric medicine.
(3) Licensed psychologists.
(4) Registered nurses.
(5) Licensed optometrists.
(6) Licensed marriage and family therapists.
(7) Licensed clinical social workers.
(8) Licensed physician assistants.
(9) Licensed chiropractors.
(10) Naturopathic doctors.
(11) Licensed professional clinical counselors.
(m) Naturopathic doctor corporation.
(1) Licensed physicians and surgeons.
(2) Licensed psychologists.
(3) Registered nurses.
(4) Licensed physician assistants.
(5) Licensed chiropractors.
(6) Licensed acupuncturists.
(7) Licensed physical therapists.
(8) Licensed doctors of podiatric medicine.
(9) Licensed marriage and family therapists.
(10) Licensed clinical social workers.
(11) Licensed optometrists.
(12) Licensed professional clinical counselors.
(n) Dental corporation.
  (1) Licensed physicians and surgeons.
  (2) Dental assistants.
  (3) Registered dental assistants.
  (4) Registered dental assistants in extended functions.
  (5) Registered dental hygienists.
  (6) Registered dental hygienists in extended functions.
  (7) Registered dental hygienists in alternative practice.
  (o) Professional clinical counselor corporation.
  (1) Licensed physicians and surgeons.
  (2) Licensed psychologists.
  (3) Licensed clinical social workers.
  (4) Licensed marriage and family therapists.
  (5) Registered nurses.
  (6) Licensed chiropractors.
  (7) Licensed acupuncturists.
  (8) Naturopathic doctors.
  (p) Physical therapy corporation.
  (1) Licensed physicians and surgeons.
  (2) Licensed doctors of podiatric medicine.
  (3) Licensed acupuncturists.
  (4) Naturopathic doctors.
  (5) Licensed occupational therapists.
  (6) Licensed speech-language therapists.
  (7) Licensed audiologists.
  (8) Registered nurses.
  (9) Licensed psychologists.
  (10) Licensed physician assistants.
  (q) Registered Dental Hygienist in Alternative Practice Corporation.
        (1) Dental assistants.
        (2) Licensed dentists.
        (3) Registered dental hygienists.
        (4) Registered dental hygienists in extended functions.
SUMMARY
This is the Senate Committee on Business, Professions and Economic Development’s Omnibus Bill for non-substantive changes for the Department of Consumer Affairs’ healing arts boards.

ANALYSIS
This bill provides clean-up for four sections that directly impact the DHCC:

1) Business and Professions Code Section 800 – This amendment would include the authority for the DHCC to maintain central files of licensees’ individual historical records. This change should have been made to this section when the DHCC was created, but it was inadvertently omitted at the time.
2) Business and Professions Code Section 1905.1 – This amendment would remove dates that are no longer relevant from the DHCC statute.
3) Business and Professions Code Section 1917.2 – This section would be repealed since it is no longer effective.
4) Business and Professions Code Section 1944 – This amendment would clarify section 1944(a)(10).

SUPPORT/OPPOSITION
• No registered support and opposition on file.

TYPE OF BILL
Active Bill – In Committee Process
Majority Vote Required
Non-Appropriation
Fiscal Committee

Non-Urgency
State-Mandated Local Program
Non-Tax Levy
ATTACHED:
  1) Language Excerpt of SB 800 (Committee on Business, Professions and Economic Development) – version amended April 20, 2015

COMMITTEE POSITION
The Committee has not yet taken a position on SB 800 (Committee on Business, Professions and Economic Development).

The Legislative and Regulatory Subcommittee may consider taking a position and make a recommendation to the full Committee.

COMMITTEE POSITION: _____Support _____ Oppose _____ Neutral _____ Watch
AMENDED IN SENATE APRIL 20, 2015

SENATE BILL No. 800

Introduced by Committee on Business, Professions and Economic Development (Senators Hill (Chair), Bates, Berryhill, Block, Galgiani, Hernandez, Jackson, Mendoza, and Wieckowski)

March 18, 2015

An act to amend Sections 28, 146, 500, 650.2, 800, 1603a, 1618.5, 1640.1, 1648.10, 1650, 1695, 1695.1, 1905.1, 1944, 2054, 2221, 2401, 2428, 2519, 2520, 2529, 2546.7, 2546.9, 2559.3, 2563, 2565, 2566, 2566.1, 2650, 2770, 2770.1, 2770.2, 2770.7, 2770.8, 2770.10, 2770.11, 2770.12, 2770.13, 2835.5, 2914, 3057, 3509.5, 3576, 3577, 4836.2, 4987, 4938, 4939, 4980.399, 4980.43, 4980.54, 4984.01, 4989.34, 4992.09, 4996.2, 4996.22, 4996.28, 4999.1, 4999.2, 4999.3, 4999.4, 4999.5, 4999.7, 4999.45, 4999.46, 4999.55, 4999.76, and 4999.100 of, to amend the heading of Article 3.1 (commencing with Section 2770) of Chapter 6 of Division 2 of, to add Sections 2519.5, 2546.11, 2555.5, 2559.7, 2563.5, and 3576.5 to, and to repeal Section 1917.2 of, the Business and Professions Code, relating to healing arts.

LEGISLATIVE COUNSEL'S DIGEST

SB 800, as amended, Committee on Business, Professions and Economic Development. Healing arts.

Under existing law, the Department of Consumer Affairs is comprised of various boards, bureaus, commissions, committees, and similarly constituted agencies that license and regulate the practice of various professions and vocations, including those relating to the healing arts:

1. Existing law requires persons applying for initial licensure or renewal of a license as a psychologist, clinical social worker, professional clinical counselor, or marriage and family therapist to have
completed prescribed coursework or training in child abuse assessment and reporting. Existing law requires the training to have been obtained from an accredited or approved educational institution, a continuing education provider approved by the responsible board, or a course sponsored or offered by a professional association or a local, county, or state department of health or mental health for continuing education and approved by the responsible board.

This bill would require the responsible board to specify a continuing education provider for child abuse assessment and reporting coursework by regulation, and would permit the responsible board to approve or accept a sponsored or offered course.

(2) Existing law relating to unlicensed activity enforcement lists specified provisions that require registration, licensure, certification, or other authorization in order to engage in certain businesses or professions regulated by the department and, notwithstanding any other law, makes a violation of a listed provision punishable as an infraction punishable as prescribed under specified circumstances.

This bill would include in those listed provisions an existing requirement for the registration of individuals as certified polysomnographic technicians, polysomnographic trainees. By creating a new infraction, this bill would impose a state-mandated local program.

The bill would also include in those listed provisions a provision of the Educational Psychologist Practice Act that makes it unlawful for any person to practice educational psychology or use any title or letters that imply that he or she is a licensed educational psychologist unless, at the time of so doing, he or she holds a valid, unexpired, and unrevoked license under that act, the violation of which is a misdemeanor. The bill would further include in those listed provisions existing requirements of the Licensed Professional Clinical Counselor Act that a person not practice or advertise the performance of professional clinical counseling services without a license issued by the board, and pay the license fee, as required by that act, the violation of which is a misdemeanor.

By creating new infractions, this bill would impose a state-mandated local program.

(3) The Dental Practice Act provides for the licensure and regulation of dentists by the Dental Board of California. For purposes of the act, any reference to the Board of Dental Examiners is deemed a reference to the Dental Board of California.
This bill would delete certain existing references to the Board of Dental Examiners and, instead, refer to the Dental Board of California.

(4) Existing law provides for the regulation of dental hygienists by the Dental Hygiene Committee of California, within the jurisdiction of the Dental Board of California. Existing law authorizes the committee, until January 1, 2010, to contract with the dental board to carry out any of specified provisions relating to the regulation of dental hygienists, and, on and after January 1, 2010, to contract with the dental board to perform investigations of applicants and licensees under those provisions. Existing law requires the committee to establish fees that relate to the licensing of a registered dental hygienist, subject to specified limitations, including fees for curriculum review and site evaluation for accreditation of educational programs.

This bill would require the Dental Hygiene Committee of California to create and maintain a central file of the names of licensees, to provide an individual historical record with information on acts of licensee misconduct and discipline. The bill would remove the limiting dates from the contracting provisions, thereby authorizing the committee to contract with the dental board to carry out any of specified provisions relating to the regulation of dental hygienists, including performing investigations of applicants and licensees. This bill, with regard to fees for accreditation of educational programs, would add a maximum fee for feasibility study review.

(5) The Medical Practice Act provides for the licensure and regulation of physicians and surgeons by the Medical Board of California. Under existing law, the board issues a physician and surgeon’s certificate to a licensed physician and surgeon, and authorizes the board to deny a certificate to an applicant guilty of unprofessional conduct or of any cause that would subject a licensee to revocation or suspension of his or her license. The act prohibits a person who fails to renew his or her license within 5 years after its expiration from renewing it, and prohibits the license from being reissued, reinstated, or restored thereafter, although the act authorizes a person to apply for and obtain a new license under specified circumstances.

This bill would additionally authorize the board to deny a postgraduate training authorization letter to an applicant guilty of unprofessional conduct or of any cause that would subject a licensee to revocation or suspension of his or her license. The bill would recast that renewal provision to prohibit renewal by a person who voluntarily cancels his or her license or who fails to renew it as described, and
would authorize that person to apply for and obtain a license under those specified circumstances, without regard to reissuance, reinstatement, or restoration.

(6) Existing law relating to research psychoanalysts authorizes certain students and graduates in psychoanalysis to engage in psychoanalysis under prescribed circumstances if they register with the Medical Board of California and present evidence of their student or graduate status. Existing law authorizes that board to suspend or revoke the exemption of those persons from licensure for unprofessional conduct for, among other things, repeated acts of clearly excessive prescribing, furnishing, dispensing, or administering of drugs or treatment, use of diagnostic procedures, or use of diagnostic or treatment facilities.

This bill would substitute, for those described bases for suspension or revocation of the exemption, the commission of any act of sexual abuse, misconduct, or relations with a patient, client, or customer.

(7) The Physical Therapy Practice Act provides for the licensure, approval, and regulation of physical therapists and physical therapist assistants by the Physical Therapy Board of California. The act establishes education requirements for a physical therapist assistant, including subject matter instruction through a combination of didactic and clinical experiences, and requires the clinical experience to include at least 18 weeks of full-time experience with a variety of patients.

This bill would delete that 18-week full-time experience requirement for physical therapist assistant education.

(8) The Nursing Practice Act provides for the licensure and regulation of nurse practitioners by the Board of Registered Nursing. The act, on and after January 1, 2008, requires an applicant for initial qualification or certification as a nurse practitioner under the act who has not been qualified or certified as a nurse practitioner to meet specified requirements. Certain provisions allow the board to find other persons in practice qualified to use the title of "nurse practitioner."

This bill would delete those title provisions.

(9) The Nursing Practice Act provides for a diversion program to identify and rehabilitate registered nurses whose competency may be impaired due to abuse of alcohol and other drugs, or due to mental illness.

This bill would instead refer to the program as an intervention program.

(10) The Optometry Practice Act provides for the licensure and regulation of optometrists by the State Board of Optometry. The act
prescribes license eligibility requirements, including, but not limited to, submitting proof that the person is licensed in good standing as of the date of application in every state where he or she holds a license, including compliance with continuing education requirements, submitting proof that the person has been in active practice in a state in which he or she is licensed for a total of at least 5,000 hours in 5 of the 7 consecutive years immediately preceding the date of his or her application, and has never had his or her license to practice optometry revoked or suspended. For purposes of those provisions, “in good standing” includes the requirement that the person have not been found mentally incompetent by a physician so that the person is unable to undertake the practice of optometry in a manner consistent with the safety of a patient or the public.

This bill would delete that active practice requirement and would require that the license never have been revoked or suspended in any state where the person holds a license. The bill, with regard to making such a finding of mental incompetence, would replace a finding by a physician with a finding by a licensed psychologist or licensed psychiatrist.

(11) The Physician Assistant Practice Act requires the Physician Assistant Board to annually elect a chairperson and vice chairperson from among its members.
This bill would require the annual election of a president and vice president.

(12) Existing law relating to veterinary medicine requires a veterinary assistant to obtain a controlled substance permit from the Veterinary Medical Board in order to administer a controlled substance, and authorizes the board to deny, revoke, or suspend the permit, after notice and hearing, for any of specified causes. Existing law authorizes the board to revoke or suspend a permit for the same.
This bill would, instead, authorize the board to suspend or revoke the controlled substance permit of a veterinary assistant, after notice and hearing, for any of specified causes, and to deny, revoke, or suspend a permit for the same.

(13) The Acupuncture Licensure Act provides for the licensure and regulation of the practice of acupuncture by the Acupuncture Board. The act requires the board to issue a license to practice acupuncture to a person who meets prescribed requirements. The act requires, in the case of an applicant who has completed education and training outside the United States and Canada, documented educational training and...
clinical experience that meets certain standards established by the board. Existing law, commencing January 1, 2017, specifically requires the board to establish standards for the approval of educational training and clinical experience received outside the United States and Canada.

This bill would remove Canada from those provisions, thereby applying the same standards to all training and clinical experience completed outside the United States.

(14) The Licensed Marriage and Family Therapist Act provides for the licensure and regulation of marriage and family therapists by the Board of Behavioral Sciences. The act sets forth the educational and training requirements for licensure as a marriage and family therapist, including certain supervised-experience requirements whereby a prospective licensee is required to work a specified number of hours in a clinical setting under the supervision of experienced professionals. The act requires all persons to register with the board as an intern in order to be credited for postdegree hours of supervised experience gained toward licensure. The act, with regard to interns, requires all postdegree hours of experience to be credited toward licensure, except when employed in a private practice setting, if certain conditions are met.

This bill would require postdegree hours of experience to be credited toward licensure if certain conditions are met. The bill would prohibit an applicant for licensure as a marriage and family therapist from being employed or volunteering in a private practice until registered as an intern by the board. This bill would similarly prohibit an applicant for professional clinical counselor under the Licensed Professional Clinical Counselor Act from being employed or volunteering in a private practice until registered as an intern by the board.

(15) The Licensed Marriage and Family Therapist Act, the Educational Psychologist Practice Act, the Clinical Social Worker Practice Act, and the Licensed Professional Clinical Counselor Act require the Board of Behavioral Sciences to approve continuing education providers for specified educational courses relating to licensure for marriage and family therapists, educational psychologists, clinical social workers, and professional clinical counselors.

The bill would modify those acts to require the Board of Behavioral Sciences to identify, by regulation, acceptable continuing education providers.

(16) The Licensed Marriage and Family Therapist Act and the Licensed Professional Clinical Counselor Act provide for the registration
of interns and allow a maximum of possible renewals after initial registration, after which a new registration number is required to be obtained. The Clinical Social Worker Practice Act provides similarly for the registration and renewal of registration of associate clinical social workers. An applicant who is issued a subsequent number is barred from employment or volunteering in a private practice.

This bill would revise those provisions to refer throughout to subsequent registration numbers.

(17) Existing law authorizes the Medical Board of California to take specific actions with regard to the licences of licensed midwives, and the registration of nonresident contact lens sellers, spectacle lens dispensers, contact lens dispensers, dispensing opticians, and polysomnographic technologists.

This bill would authorize the board to place on probation for specified grounds a midwife license or the registration certificate of a nonresident contact lens seller, spectacle lens dispenser, contact lens dispenser, or polysomnographic technologist. The bill would require such a licensee or registrant to pay probation monitoring fees upon order of the board. The bill would authorize a person whose license or certificate has been surrendered while under investigation or while charges are pending, or whose license or certificate has been revoked or suspended or placed on probation, to petition the board for reinstatement or modification of penalty, as prescribed.

(18) Existing law provides for the registration of telephone medical advice services. Existing law imposes requirements for obtaining and maintaining registration, including a requirement that the provision of medical advice services are provided by specified licensed, registered, or certified health care professionals.

This bill would expand the specified health care professionals to include naturopathic doctors and licensed professional clinical counselors. The bill would require a service to notify the department of certain business changes, and to submit quarterly reports.

(19) This bill would additionally delete or update obsolete provisions and make conforming or nonsubstantive changes.

(20) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.
This bill would provide that no reimbursement is required by this act for a specified reason.

State-mandated local program: yes.

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

SECTION 1. Section 28 of the Business and Professions Code is amended to read:

28. (a) The Legislature finds that there is a need to ensure that professionals of the healing arts who have demonstrable contact with victims and potential victims of child, elder, and dependent adult abuse, and abusers and potential abusers of children, elders, and dependent adults are provided with adequate and appropriate training regarding the assessment and reporting of child, elder, and dependent adult abuse that will ameliorate, reduce, and eliminate the trauma of abuse and neglect and ensure the reporting of abuse in a timely manner to prevent additional occurrences.

(b) The Board of Psychology and the Board of Behavioral Sciences shall establish required training in the area of child abuse assessment and reporting for all persons applying for initial licensure and renewal of a license as a psychologist, clinical social worker, professional clinical counselor, or marriage and family therapist. This training shall be required once only for all persons applying for initial licensure or for licensure renewal.

(c) All persons applying for initial licensure or renewal of a license as a psychologist, clinical social worker, professional clinical counselor, or marriage and family therapist shall, in addition to all other requirements for licensure or renewal, have completed coursework or training in child abuse assessment and reporting that meets the requirements of this section, including detailed knowledge of the Child Abuse and Neglect Reporting Act (Article 2.5 (commencing with Section 11164) of Chapter 2 of Title 1 of Part 4 of the Penal Code). The training shall meet all of the following requirements:

1. Be obtained from one of the following sources:
   A. An accredited or approved educational institution, as defined in Sections 2902, 4980.36, 4980.37, 4996.18, and 4999.12, including extension courses offered by those institutions.
advertisements, the required statement shall be either clearly audible and understandable to the television audience, or displayed in a written form that remains clearly visible for at least five seconds to the television audience. This subdivision shall be operative on and after July 1, 1994.

The Dental Board of California may adopt regulations necessary to enforce and administer this section.

The Dental Board of California may suspend or revoke the registration of any service that fails to comply with subdivision (i). No service may reregister with the board if it has a registration that is currently under suspension for a violation of subdivision (i), nor may a service reregister with the board if it had a registration revoked by the board for a violation of subdivision (i) less than one year after that revocation.

The Dental Board of California may petition the superior court of any county for the issuance of an injunction restraining any conduct that constitutes a violation of this section.

It is unlawful and shall constitute a misdemeanor for a person to operate a group advertising and referral service for dentists without providing its name and address to the Dental Board of California.

It is the intent of the Legislature in enacting this section not to otherwise affect the prohibitions provided in Section 650. The Legislature intends to allow the pooling of resources by dentists for the purposes of advertising.

This section shall not be construed to authorize a referral service to engage in the practice of dentistry.

SEC. 5. Section 800 of the Business and Professions Code is amended to read:

800. (a) The Medical Board of California, the Board of Psychology, the Dental Board of California, the Dental Hygiene Committee of California, the Osteopathic Medical Board of California, the State Board of Chiropractic Examiners, the Board of Registered Nursing, the Board of Vocational Nursing and Psychiatric Technicians, the State Board of Optometry, the Veterinary Medical Board, the Board of Behavioral Sciences, the Physical Therapy Board of California, the California State Board of Pharmacy, the Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board, the California Board of Occupational Therapy, the Acupuncture Board, and the Physician
Assistant Board shall each separately create and maintain a central
file of the names of all persons who hold a license, certificate, or
similar authority from that board. Each central file shall be created
and maintained to provide an individual historical record for each
licensee with respect to the following information:
(1) Any conviction of a crime in this or any other state that
constitutes unprofessional conduct pursuant to the reporting
requirements of Section 803.
(2) Any judgment or settlement requiring the licensee or his or
her insurer to pay any amount of damages in excess of three
thousand dollars ($3,000) for any claim that injury or death was
proximately caused by the licensee’s negligence, error or omission
in practice, or by rendering unauthorized professional services,
pursuant to the reporting requirements of Section 801 or 802.
(3) Any public complaints for which provision is made pursuant
to subdivision (b).
(4) Disciplinary information reported pursuant to Section 805,
including any additional exculpatory or explanatory statements
submitted by the licentiate pursuant to subdivision (f) of Section
805. If a court finds, in a final judgment, that the peer review
resulting in the 805 report was conducted in bad faith and the
licensee who is the subject of the report notifies the board of that
finding, the board shall include that finding in the central file. For
purposes of this paragraph, “peer review” has the same meaning
as defined in Section 805.
(5) Information reported pursuant to Section 805.01, including
any explanatory or exculpatory information submitted by the
licensee pursuant to subdivision (b) of that section.
(b) (1) Each board shall prescribe and promulgate forms on
which members of the public and other licensees or certificate
holders may file written complaints to the board alleging any act
of misconduct in, or connected with, the performance of
professional services by the licensee.
(2) If a board, or division thereof, a committee, or a panel has
failed to act upon a complaint or report within five years, or has
found that the complaint or report is without merit, the central file
shall be purged of information relating to the complaint or report.
(3) Notwithstanding this subdivision, the Board of Psychology,
the Board of Behavioral Sciences, and the Respiratory Care Board
(a) "Board" means the Dental Board of California.
(b) "Committee" means a diversion evaluation committee created by this article.
(c) "Program manager" means the staff manager of the diversion program, as designated by the executive officer of the board. The program manager shall have background experience in dealing with substance abuse issues.

SEC. 13. Section 1905.1 of the Business and Professions Code is amended to read:

1905.1. The committee may contract with the dental board to carry out this article. The committee may contract with the dental board to perform investigations of applicants and licensees under this article.

SEC. 14. Section 1917.2 of the Business and Professions Code is repealed.

SEC. 15. Section 1944 of the Business and Professions Code is amended to read:

1944. (a) The committee shall establish by resolution the amount of the fees that relate to the licensing of a registered dental hygienist, a registered dental hygienist in alternative practice, and a registered dental hygienist in extended functions. The fees established by board resolution in effect on June 30, 2009, as they relate to the licensure of registered dental hygienists, registered dental hygienists in alternative practice, and registered dental hygienists in extended functions, shall remain in effect until modified by the committee. The fees are subject to the following limitations:

(1) The application fee for an original license and the fee for issuance of an original license shall not exceed two hundred fifty dollars ($250).
(2) The fee for examination for licensure as a registered dental hygienist shall not exceed the actual cost of the examination.
(3) The fee for examination for licensure as a registered dental hygienist in extended functions shall not exceed the actual cost of the examination.
(4) The fee for examination for licensure as a registered dental hygienist in alternative practice shall not exceed the actual cost of administering the examination.
(5) The biennial renewal fee shall not exceed one hundred sixty dollars ($160).
(6) The delinquency fee shall not exceed one-half of the renewal fee. Any delinquent license may be restored only upon payment of all fees, including the delinquency fee, and compliance with all other applicable requirements of this article.

(7) The fee for issuance of a duplicate license to replace one that is lost or destroyed, or in the event of a name change, shall not exceed twenty-five dollars ($25) or one-half of the renewal fee, whichever is greater.

(8) The fee for certification of licensure shall not exceed one-half of the renewal fee.

(9) The fee for each curriculum review, feasibility study review, and site evaluation for educational programs for dental hygienists who are not accredited by a committee-approved agency shall not exceed two thousand one hundred dollars ($2,100).

(10) The fee for each review or approval of course requirements for licensure or procedures that require additional training shall not exceed seven hundred fifty dollars ($750).

(11) The initial application and biennial fee for a provider of continuing education shall not exceed five hundred dollars ($500).

(12) The amount of fees payable in connection with permits issued under Section 1962 is as follows:

(A) The initial permit fee is an amount equal to the renewal fee for the applicant's license to practice dental hygiene in effect on the last regular renewal date before the date on which the permit is issued.

(B) If the permit will expire less than one year after its issuance, then the initial permit fee is an amount equal to 50 percent of the renewal fee in effect on the last regular renewal date before the date on which the permit is issued.

(b) The renewal and delinquency fees shall be fixed by the committee by resolution at not more than the current amount of the renewal fee for a license to practice under this article nor less than five dollars ($5).

(c) Fees fixed by the committee by resolution pursuant to this section shall not be subject to the approval of the Office of Administrative Law.

(d) Fees collected pursuant to this section shall be collected by the committee and deposited into the State Dental Hygiene Fund, which is hereby created. All money in this fund shall, upon
appropriation by the Legislature in the annual Budget Act, be used
to implement this article.
4 (e) No fees or charges other than those listed in this section shall
be levied by the committee in connection with the licensure of
registered dental hygienists, registered dental hygienists in
alternative practice, or registered dental hygienists in extended
functions.
(f) The fee for registration of an extramural dental facility shall
not exceed two hundred fifty dollars ($250).
(g) The fee for registration of a mobile dental hygiene unit shall
not exceed one hundred fifty dollars ($150).
(h) The biennial renewal fee for a mobile dental hygiene unit
shall not exceed two hundred fifty dollars ($250).
(i) The fee for an additional office permit shall not exceed two
hundred fifty dollars ($250).
(j) The biennial renewal fee for an additional office as described
in Section 1926.4 shall not exceed two hundred fifty dollars ($250).
(k) The initial application and biennial special permit fee is an
amount equal to the biennial renewal fee specified in paragraph
(6) of subdivision (a).
(l) The fees in this section shall not exceed an amount sufficient
to cover the reasonable regulatory cost of carrying out this article.
SEC. 16. Section 2054 of the Business and Professions Code
is amended to read:
2054. (a) Any person who uses in any sign, business card, or
letterhead, or, in an advertisement, the words “doctor” or
“physician,” the letters or prefix “Dr.,” the initials “M.D.,” or any
other terms or letters indicating or implying that he or she is a
physician and surgeon, physician, surgeon, or practitioner under
the terms of this or any other law, or that he or she is entitled to
practice hereunder, or who represents or holds himself or herself
out as a physician and surgeon, physician, surgeon, or practitioner
under the terms of this or any other law, without having at the time
of so doing a valid, unrevoked, and unsuspended certificate as a
physician and surgeon under this chapter, is guilty of a
misdemeanor.
(b) A holder of a valid, unrevoked, and unsuspended certificate
to practice podiatric medicine may use the phrases “doctor of
podiatric medicine,” “doctor of podiatry,” and “podiatric doctor,”
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Agenda Item 7

Adjournment