

RPEA LEGISLATIVE BILL SUMMARY REPORT 6/6/2025 ON BEHALF OF PAT & AARON - AARON READ & ASSOCIATES

[AB 4](#)

(Arambula D) Covered California expansion.

Current Text: Introduced: 12/2/2024 [html](#) [pdf](#)

Introduced: 12/2/2024

Status: 5/23/2025-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. SUSPENSE FILE on 4/23/2025)(May be acted upon Jan 2026)

Location: 5/23/2025-A. 2 YEAR

Summary: Current federal law, the Patient Protection and Affordable Care Act (PPACA), requires each state to establish an American Health Benefit Exchange to facilitate the purchase of qualified health benefit plans by qualified individuals and qualified small employers. Current state law creates the California Health Benefit Exchange, also known as Covered California, to facilitate the enrollment of qualified individuals and qualified small employers in qualified health plans as required under PPACA. Current law requires the Exchange to apply for a federal waiver to allow persons otherwise not able to obtain coverage through the Exchange because of their immigration status to obtain coverage from the Exchange. This bill would delete that requirement and would instead require the Exchange, no sooner than January 1, 2027, and upon appropriation by the Legislature for this purpose, to administer a program to allow persons otherwise not able to obtain coverage by reason of immigration status to enroll in health insurance coverage in a manner as substantially similar to other Californians as feasible, consistent with federal guidance and given existing federal law and rules. The bill would require the Exchange to undertake outreach, marketing, and other efforts to ensure enrollment, which would begin on October 1, 2028.

Client	Position	Priority	Assigned To
RPEA	W	PM	AR, PM

[AB 83](#)

(Pacheco D) The California Elder Financial Abuse Prevention Act.

Current Text: Amended: 5/1/2025 [html](#) [pdf](#)

Introduced: 12/20/2024

Last Amend: 5/1/2025

Status: 5/1/2025-Failed Deadline pursuant to Rule 61(a)(2). (Last location was B. & F. on 3/24/2025)(May be acted upon Jan 2026)

Location: 5/1/2025-A. 2 YEAR

Summary: Would enact the California Elder Financial Abuse Prevention Act, which would authorize a depository institution, as defined, to take specified actions when, based on their own observations or information received from a governmental or law enforcement agency, the institution believes that an eligible adult, as defined, is the victim or target of financial abuse, including delaying or refusing a transaction involving the eligible adult and preventing the transfer of funds from the eligible adult's account. The bill would authorize a depository institution to notify an associated third party, as defined, if the depository institution believes an eligible adult may be the victim of financial abuse, and would exempt that disclosure from state privacy laws or requirements.

Client	Position	Priority	Assigned To
RPEA	COSPONSOR	PM	AR, PM

[AB 92](#)

(Gallagher R) Patient visitation.

Current Text: Introduced: 1/6/2025 [html](#) [pdf](#)

Introduced: 1/6/2025

Status: 5/1/2025-Failed Deadline pursuant to Rule 61(a)(2). (Last location was HEALTH on 2/3/2025)(May be acted upon Jan 2026)

Location: 5/1/2025-A. 2 YEAR

Summary: Current law requires a health facility to allow a patient's domestic partner, the children of the patient's domestic partner, and the domestic partner of the patient's parent or child to visit unless no visitors are allowed, the facility reasonably determines that the presence of a particular visitor would endanger the health or safety of a patient, member of the health facility staff, or other visitor to the health facility, or would significantly disrupt the operations of a facility, or the patient has indicated to the health facility staff that the patient does not want this person to visit. A violation of this provision is a misdemeanor. This bill, Dianne's Law, would require a health facility to allow specified persons to visit, including the patient's children and grandparents. The bill would require the health facility to develop alternate visitation protocols, if circumstances require the health facility to restrict visitor access to the facility due to health or safety concerns, that allow visitation to the greatest extent possible while maintaining patient, visitor, and staff health and

safety. Notwithstanding the requirement mentioned above, the bill would prohibit a health facility from prohibiting in-person visitation in end-of-life situations unless the patient has indicated to the health facility staff that the patient does not want this person to visit, as specified, and would authorize a health facility to require visitors to adhere to personal protective equipment and testing protocols not greater than those required of facility staff for the duration of their visit.

Client	Position	Priority	Assigned To
RPEA	S2	PM	AR, PM

AB 251 (Kalra D) Elders and dependent adults: abuse or neglect.

Current Text: Amended: 3/19/2025 [html](#) [pdf](#)

Introduced: 1/15/2025

Last Amend: 3/19/2025

Status: 5/7/2025-Referred to Coms. on JUD. and APPR.

Location: 5/7/2025-S. JUD.

Calendar: 6/17/2025 1:30 p.m. - 1021 O Street, Room 2100 SENATE JUDICIARY, UMBERG, THOMAS, Chair

Summary: The Elder Abuse and Dependent Adult Civil Protection Act provides for the award of attorney's fees and costs to, and the recovery of damages by, a plaintiff when it is proven by clear and convincing evidence that the defendant is liable for physical abuse or neglect, and the defendant has also been found guilty of recklessness, oppression, fraud, or malice in the commission of that abuse. This bill would authorize a court to apply a preponderance of the evidence standard to any claim brought against a residential care facility for the elderly or a skilled nursing facility, except as specified, for remedies sought pursuant to the above provisions, upon circumstances in which spoliation of evidence, as defined, has been committed by the defendant, as specified.

Client	Position	Priority	Assigned To
RPEA	S2	PM	AR, PM

AB 278 (Ransom D) Health care affordability.

Current Text: Introduced: 1/21/2025 [html](#) [pdf](#)

Introduced: 1/21/2025

Status: 5/1/2025-Failed Deadline pursuant to Rule 61(a)(2). (Last location was HEALTH on 2/10/2025)(May be acted upon Jan 2026)

Location: 5/1/2025-A. 2 YEAR

Summary: Current law establishes the Health Care Affordability Board to establish, among other things, a statewide health care cost target and the standards necessary to meet exemptions from health care cost targets or submitting data to the Office of Health Care Affordability. Current law authorizes the office to establish advisory or technical committees, as necessary, in order to support the board's decisionmaking. This bill would require the board, on or before June 1, 2026, to establish a Patient Advocate Advisory Standing Committee, as specified, that is required to publicly meet, and receive public comments, at least 4 times annually. The bill would require the committee to include specified data from the meetings to the board as part of its annual report.

Client	Position	Priority	Assigned To
RPEA	S2	PM	AR, PM

AB 280 (Aguiar-Curry D) Health care coverage: provider directories.

Current Text: Amended: 5/23/2025 [html](#) [pdf](#)

Introduced: 1/21/2025

Last Amend: 5/23/2025

Status: 6/3/2025-In Senate. Read first time. To Com. on RLS. for assignment.

Location: 6/3/2025-S. RLS.

Summary: 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. Current law provides for the regulation of health insurers by the Department of Insurance. Existing law requires a health care service plan and a health insurer that contracts with providers for alternative rates of payment to publish and maintain a provider directory or directories with information on contracting providers that deliver health care services enrollees or insureds, and requires a health care service plan and health insurer to regularly update its printed and online provider directory or directories, as specified. Current law authorizes the departments to require a plan or insurer to provide coverage for all covered health care services provided to an enrollee or insured who reasonably relied on materially inaccurate, incomplete, or

misleading information contained in a plan's or insurer's provider directory or directories. This bill would require a plan or insurer to annually verify and delete inaccurate listings from its provider directories, and would require a provider directory to be 60% accurate on July 1, 2026, with increasing required percentage accuracy benchmarks to be met each year until the directories are 95% accurate on or before July 1, 2029. The bill would subject a plan or insurer to administrative penalties for failure to meet the prescribed benchmarks. The bill would require a plan or insurer to provide coverage for all covered health care services provided to an enrollee or insured who reasonably relied on inaccurate, incomplete, or misleading information contained in a health plan or policy's provider directory or directories and to reimburse the provider the out-of-network amount for those services. The bill would prohibit a provider from collecting an additional amount from an enrollee or insured other than the applicable in-network cost sharing. The bill would require a plan or insurer to provide information about in-network providers to enrollees and insureds upon request, and would limit the cost-sharing amounts an enrollee or insured is required to pay for services from those providers under specified circumstances.

Client	Position	Priority	Assigned To
RPEA	S2	PM	AR, PM

AB 508 **(Aguilar-Curry D) Residential care facilities for the elderly: direct care ratios.**

Current Text: Amended: 4/24/2025 [html](#) [pdf](#)

Introduced: 2/10/2025

Last Amend: 4/24/2025

Status: 5/23/2025-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. SUSPENSE FILE on 5/7/2025)(May be acted upon Jan 2026)

Location: 5/23/2025-A. 2 YEAR

Summary: The California Residential Care Facilities for the Elderly Act requires the State Department of Social Services to license, inspect, and regulate residential care facilities for the elderly (RCFEs), as defined, and imposes criminal penalties on a person who violates the act or who willfully or repeatedly violates any rule or regulation adopted under the act. This bill would require each RCFE to calculate a direct care ratio, as defined, and maintain records of its direct care ratios for a minimum of 12 months. The bill would require RCFEs to disclose its direct care ratios to residents or to the resident's representatives upon admission and any time there is a rate increase, as specified. The bill would require these disclosures to be provided in writing and signed by the resident, the resident's representative, or the licensee or an employee of the licensee, as specified, to confirm receipt. The bill would require copies of the signed disclosure to be provided to the resident or the resident's representative. The bill would require each RCFE to make its direct care ratios available to the public by specified means, including, among others, by posting the daily direct care ratio on the facility's internet website. The bill would require the RCFE's internet website and any literature or internet website used to advertise the RCFE and the level of care provided by that facility to include a statement that direct care ratios are calculated on a daily basis, that direct care ratios are available to the public upon request for any given day within the prior 12 months, and that direct care ratios are required to be disclosed to residents or their representatives at the points of time described above.

Client	Position	Priority	Assigned To
RPEA	S2	PM	AR, PM

AB 569 **(Stefani D) California Public Employees' Pension Reform Act of 2013: exceptions: supplemental defined benefit plans.**

Current Text: Amended: 4/24/2025 [html](#) [pdf](#)

Introduced: 2/12/2025

Last Amend: 4/24/2025

Status: 5/23/2025-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. SUSPENSE FILE on 5/21/2025)(May be acted upon Jan 2026)

Location: 5/23/2025-A. 2 YEAR

Summary: The California Public Employees' Pension Reform Act of 2013 (PEPRA) on and after January 1, 2013, requires a public retirement system, as defined, to modify its plan or plans to comply with PEPRA, as specified. PEPRA prohibits a public employer from offering a defined benefit pension plan exceeding specified retirement formulas, requires new members of public retirement systems to contribute at least a specified amount of the normal cost, as defined, for their defined benefit plans, and prohibits an enhancement of a public employee's retirement formula or benefit adopted after January 1, 2013, from applying to service performed prior to the operative date of the enhancement. PEPRA prohibits a public employer from offering a supplemental defined benefit plan if the public employer did not do so before January 1, 2013, or, if it did, from offering that plan to an additional employee group after that date. This bill would authorize a public employer,

as defined, to bargain over contributions for supplemental retirement benefits administered by, or on behalf of, an exclusive bargaining representative of one or more of the public employer's bargaining units, subject to the limitations specified above.

Client	Position	Priority	Assigned To
RPEA	W	PM	AR, PM

AB 909 (Schiavo D) Financial abuse of an elder or dependent adult: fraudulent transactions: liability.

Current Text: Amended: 3/28/2025 [html](#) [pdf](#)

Introduced: 2/19/2025

Last Amend: 3/28/2025

Status: 5/1/2025-Failed Deadline pursuant to Rule 61(a)(2). (Last location was B. & F. on 3/28/2025)(May be acted upon Jan 2026)

Location: 5/1/2025-A. 2 YEAR

Summary: The Uniform Commercial Code (UCC) provides that, unless displaced by the particular provisions of the UCC, the principles of law and equity, including the law merchant and the law relative to capacity to contract, principal and agent, estoppel, fraud, misrepresentation, duress, coercion, mistake, bankruptcy, and other validating or invalidating cause supplement the UCC. Current law generally regulates fund transfers, including by prescribing rules applicable to a transfer pursuant to a security procedure for the detection of error to a beneficiary not intended by the sender. This bill would similarly specify that those fund transfer provisions do not displace those principles of law and equity.

Client	Position	Priority	Assigned To
RPEA	W	PM	AR, PM

AB 1054 (Gipson D) Public employees' retirement: deferred retirement option program.

Current Text: Amended: 3/24/2025 [html](#) [pdf](#)

Introduced: 2/20/2025

Last Amend: 3/24/2025

Status: 5/1/2025-Failed Deadline pursuant to Rule 61(a)(2). (Last location was P.E. & R. on 3/24/2025)(May be acted upon Jan 2026)

Location: 5/1/2025-A. 2 YEAR

Summary: The County Employees Retirement Law of 1937 prescribes retirement benefits for members of specified county and district retirement systems. Current law establishes the Deferred Retirement Option Program as an optional benefit program for specified safety members of those systems that, by ordinance or resolution by the county board of supervisors or the governing body, elect to adopt it. The program provides eligible members access, upon service retirement, to a lump sum or, in some cases, monthly payments in addition to a monthly retirement allowance, as specified. The Public Employees' Retirement Law (PERL) creates the Public Employees' Retirement System (PERS) for the purpose of providing pension benefits to state employees and employees of contracting agencies and prescribes the rights and duties of members of the system and their beneficiaries. Current law vests management and control of PERS in its board of administration. PERS provides a defined benefit to members of the program, based on final compensation, credited service, and age at retirement, subject to certain variations. This bill would establish the Deferred Retirement Option Program as a voluntary program within PERS for employees of State Bargaining Units 5 (Highway Patrol) and 8 (Firefighters).

Client	Position	Priority	Assigned To
RPEA	W	PM	AR, PM

AB 1067 (Quirk-Silva D) Public employees' retirement: felony convictions.

Current Text: Amended: 5/23/2025 [html](#) [pdf](#)

Introduced: 2/20/2025

Last Amend: 5/23/2025

Status: 6/4/2025-In Senate. Read first time. To Com. on RLS. for assignment.

Location: 6/4/2025-S. RLS.

Summary: The California Public Employees' Pension Reform Act of 2013 requires a public employee who is convicted of any state or federal felony for conduct arising out of, or in the performance of, the public employee's official duties in pursuit of the office or appointment, or in connection with obtaining salary, disability retirement, service retirement, or other benefits, to forfeit all accrued rights and benefits in any public retirement system from the earliest date of the commission of the felony to the date of conviction, and prohibits the public employee from accruing

further benefits in that public retirement system. Current law defines “public employee” for purposes of these provisions to mean an officer, including one who is elected or appointed, or an employee of a public employer. Current law also requires an elected public officer, who takes public office, or is reelected to public office, on or after January 1, 2006, and who is convicted during or after holding office of any felony involving accepting or giving, or offering to give, any bribe, the embezzlement of public money, extortion or theft of public money, perjury, or conspiracy to commit any of those crimes arising directly out of their official duties as an elected public officer, to forfeit all rights and benefits under, and membership in, any public retirement system in which they are a member, effective on the date of final conviction, as provided. This bill would require a public employer that is investigating a public employee for misconduct arising out of or in the performance of, the public employee’s official duties in pursuit of the office or appointment, or in connection with obtaining salary, disability retirement, service retirement, or other benefits, to continue the investigation even if the public employee retires while under investigation, if the investigation indicates that the public employee may have committed a crime. The bill would require a public employer, if the investigation indicates that the public employee may have committed a crime, to refer the matter to the appropriate law enforcement agency, and would then authorize the public employer to close the investigation.

Client	Position	Priority	Assigned To
RPEA	S3	PM	AR, PM

AB 1105 (Quirk-Silva D) Conservatorships.

Current Text: Amended: 5/20/2025 [html](#) [pdf](#)

Introduced: 2/20/2025

Last Amend: 5/20/2025

Status: 5/20/2025-From committee chair, with author’s amendments: Amend, and re-refer to committee. Read second time, amended, and re-referred to Com. on JUD.

Location: 5/7/2025-S. JUD.

Summary: The Guardianship-Conservatorship Law generally establishes the standards and procedures for the appointment and termination of an appointment for a guardian or conservator of a person, an estate, or both. Current law authorizes a conservator to authorize the placement of a conservatee in a secured perimeter residential care facility for the elderly upon a court making specific findings. This bill would also authorize a conservator to authorize the placement of a conservatee in a residential facility, an intermediate care facility, or a skilled nursing facility, as defined, that has a secured perimeter, a delayed egress lock, or both a secured perimeter and a delayed egress lock, as specified. The bill would require court approval for a subsequent placement of a conservatee in a different type of facility except if the change occurs as a result of an emergency.

Client	Position	Priority	Assigned To
RPEA	S2	PM	AR, PM

AB 1131 (Ta R) General plan: annual report: congregate care for the elderly.

Current Text: Amended: 4/10/2025 [html](#) [pdf](#)

Introduced: 2/20/2025

Last Amend: 4/10/2025

Status: 6/4/2025-In Senate. Read first time. To Com. on RLS. for assignment.

Location: 6/4/2025-S. RLS.

Summary: The Planning and Zoning law requires each planning agency to prepare and the legislative body of each county and city to adopt a comprehensive, long-term general plan containing specified elements, including a housing element. After the legislative body has adopted all or part of a general plan, current law requires the planning agency to provide by April 1 of each year an annual report to various entities that includes specified information. Current law requires the Department of Housing and Community Development, in consultation with each council of governments, to determine each region’s existing and projected housing need, as provided. Current law requires each council of governments, or the department for cities and counties without a council of governments, to adopt a final regional housing need plan that allocates a share of the regional housing need to each city, county, or city and county and that furthers specified objectives. This bill would, for the 7th and each subsequent revision of the housing element, authorize a planning agency to include in that report the number of units approved for congregate care for the elderly, as defined, for up to 15% of a jurisdiction’s regional housing need allocation for any income category.

Client	Position	Priority	Assigned To
RPEA	W	PM	AR, PM

AB 1172 (Nguyen D) Adult day programs: administration of inhalable emergency antiseizure medications.

Current Text: Amended: 4/23/2025 [html](#) [pdf](#)

Introduced: 2/21/2025

Last Amend: 4/23/2025

Status: 6/5/2025-In Senate. Read first time. To Com. on RLS. for assignment.

Location: 6/5/2025-S. RLS.

Summary: The California Community Care Facilities Act provides for the licensing and regulation of community care facilities by the State Department of Social Services, including adult day programs and residential facilities. This bill would authorize a licensed facility, as defined, upon receipt of a request from an individual, or the authorized representative of an individual, who has been diagnosed with seizures, a seizure disorder, or epilepsy and who has been prescribed inhalable emergency antiseizure medication, to authorize any volunteer, as defined, to administer inhalable emergency antiseizure medication to the individual during a seizure emergency. The bill would require the department, on or before January 1, 2027, to establish minimum standards for this training, as specified. The bill would prohibit inhalable emergency antiseizure medication from being administered to an individual unless the licensed facility has a seizure action plan for the individual that contains specified information, including, among other things, a signed written authorization verifying that a seizure experienced by the individual may be responded to at the licensed facility by a nonmedical professional, including through the administration of emergency antiseizure medication, as specified. The bill would require licensed facilities to provide a specified notice to all volunteers that, among other things, informs them of their right to rescind an offer to volunteer at any time, as specified, and explains the liability protections and indemnification requirements described below. The bill would require any licensed facility that authorizes volunteers to ensure that each volunteer will be provided defense and indemnification for any and all civil liability, as specified. The bill would prohibit a volunteer who administers inhalable emergency antiseizure medication, any person who provides training to a volunteer, or any person who otherwise complies with the requirements of the above-described provisions, in good faith and not for compensation, from being subject to professional review, civil liability, or criminal prosecution for their actions or omissions, as specified.

Client	Position	Priority	Assigned To
RPEA	S3	PM	AR, PM

AB 1383 (McKinnor D) Public employees' retirement benefits.

Current Text: Amended: 4/11/2025 [html](#) [pdf](#)

Introduced: 2/21/2025

Last Amend: 4/11/2025

Status: 5/23/2025-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. SUSPENSE FILE on 5/14/2025)(May be acted upon Jan 2026)

Location: 5/23/2025-A. 2 YEAR

Summary: Current law creates the Public Employees' Retirement Fund, which is continuously appropriated for purposes of the Public Employees' Retirement System (PERS), including depositing employer and employee contributions. Under the California Constitution, assets of a public pension or retirement system are trust funds. The California Public Employees' Pension Reform Act of 2013 (PEPRA) establishes a variety of requirements and restrictions on public employers offering defined benefit pension plans. In this regard, PEPRA restricts the amount of compensation that may be applied for purposes of calculating a defined pension benefit for a new member, as defined, by restricting it to specified percentages of the contribution and benefit base under a specified federal law with respect to old age, survivors, and disability insurance benefits. This bill, on and after January 1, 2026, would require a retirement system to adjust pensionable compensation limits to be consistent with a defined benefit limitation established and annually adjusted under federal law with respect to tax exempt qualified trusts.

Client	Position	Priority	Assigned To
RPEA	W	PM	AR, PM

AB 1476 (Wallis R) Meal program: senior citizens.

Current Text: Introduced: 2/21/2025 [html](#) [pdf](#)

Introduced: 2/21/2025

Status: 6/3/2025-In Senate. Read first time. To Com. on RLS. for assignment.

Location: 6/3/2025-S. RLS.

Summary: Current law authorizes the California Department of Aging to make specified funds available for nutrition projects serving the needs of individuals 60 years of age or older and their spouses, as specified. The McCarthy-Kennick Nutrition Program for the Elderly Act of 1972 among other things, establishes the Nutrition Reserve Fund for the purpose of maintaining existing nutrition services and lending moneys to senior nutrition projects, as specified. Current law requires the California Commission on Aging, with the approval of the Secretary of the California Health and Human Services Agency, to develop and submit to the federal government a state plan for implementing the federal Older Americans Act of 1965, as amended, by May 1 of each year. Current law requires the state plan to include the establishment of projects that provide at least one hot meal per day for 5 or more days per week, as specified. This bill would instead require that the projects provide those meals either served hot or made available for to-go pickup for reheating at home by eligible individuals.

Client	Position	Priority	Assigned To
RPEA	S3	PM	AR, PM

SB 85

(Umburg D) Civil actions: service of summons.

Current Text: Amended: 4/8/2025 [html](#) [pdf](#)

Introduced: 1/21/2025

Last Amend: 4/8/2025

Status: 5/29/2025-Referred to Com. on JUD.

Location: 5/29/2025-A. JUD.

Summary: Current law prescribes specified methods for the service of a summons in a civil action. Under existing law, if no provision is made in statute for the service of summons, a court may direct a summons to be served in a manner that is reasonably calculated to give actual notice to the party to be served. This bill would also authorize a court to direct a summons to be served in a manner that is reasonably calculated to give actual notice to the party to be served if a plaintiff, using due diligence, has been unable to serve the summons using methods prescribed by statute. The bill would authorize a court to direct service of the summons by electronic means, if such service is reasonably calculated to give actual notice.

Client	Position	Priority	Assigned To
RPEA	W	PM	AR, PM

SB 242

(Blakespear D) Medicare supplement coverage: open enrollment periods.

Current Text: Amended: 5/5/2025 [html](#) [pdf](#)

Introduced: 1/30/2025

Last Amend: 5/5/2025

Status: 5/23/2025-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. SUSPENSE FILE on 5/19/2025)(May be acted upon Jan 2026)

Location: 5/23/2025-S. 2 YEAR

Summary: Current federal law additionally provides for the issuance of Medicare supplement policies or certificates, also known as Medigap coverage, which are advertised, marketed, or designed primarily as a supplement to reimbursements under the Medicare Program for the hospital, medical, or surgical expenses of persons eligible for the Medicare Program, including coverage of Medicare deductible, copayment, or coinsurance amounts, as specified. Current law, among other provisions, requires supplement benefit plans to be uniform in structure, language, designation, and format with the standard benefit plans, as prescribed. Current law prohibits an issuer from denying or conditioning the offering or effectiveness of any Medicare supplement contract, policy, or certificate available for sale in this state, or discriminating in the pricing of a contract, policy, or certificate because of the health status, claims experience, receipt of health care, or medical condition of an applicant in the case of an application that is submitted prior to or during the 6-month period beginning with the first day of the first month in which an individual is both 65 years of age or older and is enrolled for benefits under Medicare Part B. Current law requires an issuer to make available specified Medicare supplement benefit plans to a qualifying applicant under those circumstances who is 64 years of age or younger who does not have end stage renal disease. This bill would delete the exclusion of otherwise qualified applicants who have end stage renal disease, thereby making the specified Medicare supplement benefit plans available to those individuals. The bill, on and after January 1, 2026, 2027, would prohibit an issuer of Medicare supplement coverage in this state from denying or conditioning the issuance or effectiveness of any Medicare supplement coverage available for sale in the state, or discriminate in the pricing of that coverage because of the health status, claims experience, receipt of health care, medical condition, or age of an applicant, except as specified, if an application for coverage is submitted during an open enrollment period, as specified in the bill. The bill would entitle an individual enrolled in Medicare Part B to a 90-day annual open enrollment period beginning on

January 1 of each year, as specified, during which period the bill would require applications to be accepted for any Medicare supplement coverage available from an issuer, as specified. The bill would require the open enrollment period to be a guaranteed issue period. The bill would authorize premium rates offered to applicants during the open enrollment period to vary based on the applicants' age at the time of issue, as specified, but would prohibit the premiums from varying based on age after the contract is issued.

Client	Position	Priority	Assigned To
RPEA	S1	PM	AR, PM

SB 351 **(Cabaldon D) Health facilities.**

Current Text: Introduced: 2/12/2025 [html](#) [pdf](#)

Introduced: 2/12/2025

Status: 6/5/2025-Referred to Coms. on B. & P. and JUD.

Location: 6/5/2025-A. B.&P.

Summary: Current law generally regulates the licensing and operation of health facilities and other facilities providing health care in this state. Existing law, the Medical Practice Act, creates the Medical Board of California to license and regulate physicians and surgeons. Under current law, the Dental Practice Act, the Dental Board of California licenses and regulates dentists. Current law, the Nonprofit Public Benefit Corporation Law, generally requires a nonprofit public benefit corporation to give written notice to the Attorney General before it sells, leases, conveys, exchanges, transfers, or disposes of its assets, except as specified. Current law provides specific procedures for health facilities and additionally requires these facilities to obtain the consent of the Attorney General prior to entering into a specified agreement or transaction. This bill would prohibit a private equity group or hedge fund, as defined, involved in any manner with a physician or dental practice doing business in this state from interfering with the professional judgment of physicians or dentists in making health care decisions and exercising power over specified actions, including, among other things, making decisions regarding coding and billing procedures for patient care services. The bill would prohibit a private equity group or hedge fund from entering into an agreement or arrangement with a physician or dental practice if the agreement or arrangement would enable the person or entity to engage in the prohibited actions described above.

Client	Position	Priority	Assigned To
RPEA	S2	PM	AR, PM

SB 433 **(Wahab D) Residential care facilities for the elderly: assisted living waiver rental rate protection.**

Current Text: Amended: 4/1/2025 [html](#) [pdf](#)

Introduced: 2/18/2025

Last Amend: 4/1/2025

Status: 6/5/2025-In Assembly. Read first time. Held at Desk.

Location: 6/4/2025-A. DESK

Summary: Current law requires the State Department of Health Care Services to develop a program that requires a waiver of federal law to test the efficacy of providing an assisted living benefit to beneficiaries under the Medi-Cal program. The waiver requires that eligible participants are those who require a nursing facility level of care and wish to live in a residential care setting, such as a residential care facility for the elderly. Under current law, the State Department of Health Care Services and the State Department of Social Services may waive provisions of the California Residential Care Facilities for the Elderly Act applicable to residential care facilities participating in the program, as necessary and appropriate, including provisions that state that residential care facilities for the elderly are not subject to controls on rent. Current law authorizes a Medi-Cal managed care plan to cover those community supports, as defined, approved by the department as cost effective and medically appropriate in a comprehensive risk contract that are in lieu of applicable Medi-Cal state plan services, including, among others, nursing facility transition or diversion to assisted living facilities, such as residential care facilities for the elderly. This bill would authorize the State Department of Health Care Services and the State Department of Social Services to waive compliance with the prohibition on rent controls when determined necessary and appropriate in the context of the above-described program to test the efficacy of providing an assisted living benefit.

Client	Position	Priority	Assigned To
RPEA	S3	PM	AR, PM

SB 434 **(Wahab D) Residential care facilities for the elderly: housing protections.**

Current Text: Amended: 4/1/2025 [html](#) [pdf](#)

Introduced: 2/18/2025

Last Amend: 4/1/2025

Status: 5/23/2025-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. SUSPENSE FILE on 5/5/2025)(May be acted upon Jan 2026)

Location: 5/23/2025-S. 2 YEAR

Summary: Current law provides for the licensure and regulation of residential care facilities for the elderly (RCFEs) by the State Department of Social Services. Under current law, a licensee of an RCFE that sends a notice of eviction to a resident is required to include in that notice specified information, including the effective date of the eviction and resources available to assist the resident in identifying alternative housing. Under current law, the RCFE is also required to notify, or mail a copy of the notice to quit to, the resident's responsible person. Current law requires that a licensee of an RCFE provide a resident with a 30-day notice of eviction, except where the department has approved the RCFE to provide a 3-day notice. This bill would extend the length of notice that a licensee is required to provide to a resident to 30, 60, or 90 days, depending on the length of the resident's residency in the RCFE, among other factors relating to nonpayment of the rate for basic services within 10 days of the due date. The bill would additionally require a licensee of an RCFE to include in a notice of eviction documentation of the licensee's reasonable efforts to create a safe discharge plan, and would require the plan to include a list of the resident's posteviction needs, goals, and preferences, and a list of discharge locations that meet specified criteria, such as being financially practicable for the resident.

Client	Position	Priority	Assigned To
RPEA	S3	PM	AR, PM

SB 435 (Wahab D) Residential care facilities for the elderly: emergency backup power source.

Current Text: Amended: 4/23/2025 [html](#) [pdf](#)

Introduced: 2/18/2025

Last Amend: 4/23/2025

Status: 6/5/2025-In Assembly. Read first time. Held at Desk.

Location: 6/4/2025-A. DESK

Summary: Would, commencing January 1, 2028, require a residential care facility for the elderly licensed for 16 or more residents to have an alternative source of power, as defined, to protect residents' health and safety for no fewer than 72 hours during any type of power outage. The bill would impose specific compliance requirements based on whether the facility uses a generator as its alternative source of power, or batteries or a combination of batteries in tandem with a renewable electrical generation facility. The bill would require a facility licensed for 16 or more residents to comply with these requirements and include information regarding the alternative source of power within the emergency and disaster plan beginning January 1, 2028. By expanding the scope of an existing crime, the bill would impose a state-mandated local program.

Client	Position	Priority	Assigned To
RPEA	S1	PM	AR, PM

SB 582 (Stern D) Health and care facilities: licensing during emergencies or disasters.

Current Text: Amended: 5/5/2025 [html](#) [pdf](#)

Introduced: 2/20/2025

Last Amend: 5/5/2025

Status: 6/4/2025-In Assembly. Read first time. Held at Desk.

Location: 6/3/2025-A. DESK

Summary: The Long-Term Care, Health, Safety, and Security Act of 1973 generally requires the department to license, inspect, and regulate long-term health care facilities, including skilled nursing facilities. Current law makes it a misdemeanor for any person to willfully or repeatedly violate the act, as specified. Current regulations require skilled nursing facilities to adopt and follow a written external disaster and mass casualty program plan developed with the advice and assistance of county or regional and local planning offices. This bill would require skilled nursing facilities to update the external disaster and mass casualty program plan at least once per year. The bill would require, in adopting and updating the plan, skilled nursing facilities to, among other things, seek input from county or regional and local planning offices, including the medical health operational area coordinator (MHOAC). By expanding the scope of an existing crime, the bill would impose a state-mandated local program.

Client	Position	Priority	Assigned To
RPEA	W	PM	AR, PM

Total Measures: 23

Total Tracking Forms: 23

