

AMENDED IN ASSEMBLY SEPTEMBER 10, 2015

AMENDED IN ASSEMBLY SEPTEMBER 4, 2015

AMENDED IN ASSEMBLY SEPTEMBER 1, 2015

AMENDED IN ASSEMBLY JULY 16, 2015

AMENDED IN ASSEMBLY JULY 7, 2015

AMENDED IN SENATE JUNE 1, 2015

AMENDED IN SENATE APRIL 28, 2015

AMENDED IN SENATE APRIL 6, 2015

SENATE BILL

No. 4

Introduced by Senator Lara

(Principal coauthor: Assembly Member Bonta)

**(Coauthors: Senators Hall, Hancock, Hernandez, Hill, Hueso,
Mitchell, Monning, Pan, and Wolk)**

(Coauthors: Assembly Members Alejo, Chiu, Gomez, Levine, Lopez,
and Thurmond)

December 1, 2014

An act to amend Section 14007.8 of the Welfare and Institutions Code, relating to health care coverage.

LEGISLATIVE COUNSEL'S DIGEST

SB 4, as amended, Lara. Health care coverage: immigration status.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal

Medicaid Program provisions. Existing law extends eligibility for full-scope Medi-Cal benefits to individuals under 19 years of age who do not have, or are unable to establish, satisfactory immigration status, commencing after the Director of Health Care Services determines that systems have been programmed for implementation of this extension, but in no case sooner than May 1, 2016. Existing law requires these individuals to enroll in a Medi-Cal managed care health plan in those counties in which a Medi-Cal managed care health plan is available.

This bill would require individuals under 19 years of age enrolled in restricted-scope Medi-Cal at the time the director makes the above-described determination to be enrolled in the full scope of Medi-Cal benefits, if otherwise eligible, pursuant to an eligibility and enrollment plan, as specified. *The bill would require the department, beginning January 31, 2016, and until the director makes the above-described determination, to provide monthly updates to the policy and fiscal committees of the Legislature, as specified.* The bill would also require that an individual who is eligible pursuant to these provisions enroll in a Medi-Cal managed care health plan. The bill would not preclude a beneficiary from being enrolled in any other children's Medi-Cal specialty program that he or she would otherwise be eligible for.

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

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

1 SECTION 1. The Legislature finds and declares all of the
2 following:
3 (a) No child in California should endure suffering and pain due
4 to a lack of access to health care services.
5 (b) Expanding access and increasing enrollment in
6 comprehensive health care coverage benefits the health and welfare
7 of all Californians.
8 (c) Through the enactment of Senate Bill 75, the California
9 Legislature has extended eligibility for full-scope Medi-Cal benefits
10 to all children in California, regardless of immigration status.
11 SEC. 2. Section 14007.8 of the Welfare and Institutions Code
12 is amended to read:
13 14007.8. (a) (1) After the director determines, and
14 communicates that determination in writing to the Department of

1 Finance, that systems have been programmed for implementation
2 of this section, but no sooner than May 1, 2016, an individual who
3 is under 19 years of age and who does not have satisfactory
4 immigration status or is unable to establish satisfactory immigration
5 status as required by Section 14011.2 shall be eligible for the full
6 scope of Medi-Cal benefits, if he or she is otherwise eligible for
7 benefits under this chapter.

8 (2) (A) Individuals under 19 years of age enrolled in Medi-Cal
9 pursuant to subdivision (d) of Section 14007.5 at the time the
10 director makes the determination described in paragraph (1) shall
11 be enrolled in the full scope of Medi-Cal benefits, if otherwise
12 eligible, pursuant to an eligibility and enrollment plan. This plan
13 shall include outreach strategies developed by the department in
14 consultation with interested stakeholders, including, but not limited
15 to, counties, health care service plans, consumer advocates, and
16 the Legislature. *Individuals subject to this subparagraph shall not*
17 *be required to file a new application for Medi-Cal.*

18 (B) *The effective date of enrollment into Medi-Cal for*
19 *individuals described in subparagraph (A) shall be on the same*
20 *day on which the systems are operational to begin processing new*
21 *applications pursuant to the director's determination described*
22 *in paragraph (1).*

23 (C) *Beginning January 31, 2016, and until the director makes*
24 *the determination described in paragraph (1), the department shall*
25 *provide monthly updates to the appropriate policy and fiscal*
26 *committees of the Legislature on the status of the implementation*
27 *of this section.*

28 (b) To the extent permitted by state and federal law, an
29 individual eligible under this section shall be required to enroll in
30 a Medi-Cal managed care health plan. Enrollment in a Medi-Cal
31 managed care health plan shall not preclude a beneficiary from
32 being enrolled in any other children's Medi-Cal specialty program
33 that he or she would otherwise be eligible for.

34 (c) The department shall seek any necessary federal approvals
35 to obtain federal financial participation in implementing this
36 section. Benefits for services under this section shall be provided
37 with state-only funds only if federal financial participation is not
38 available for those services.

39 (d) The department shall maximize federal financial participation
40 in implementing this section to the extent allowable.

1 (e) This section shall be implemented only to the extent it is in
2 compliance with Section 1621(d) of Title 8 of the United States
3 Code.

4 (f) (1) Notwithstanding Chapter 3.5 (commencing with Section
5 11340) of Part 1 of Division 3 of Title 2 of the Government Code,
6 the department, without taking any further regulatory action, shall
7 implement, interpret, or make specific this section by means of
8 all-county letters, plan letters, plan or provider bulletins, or similar
9 instructions until the time any necessary regulations are adopted.
10 Thereafter, the department shall adopt regulations in accordance
11 with the requirements of Chapter 3.5 (commencing with Section
12 11340) of Part 1 of Division 3 of Title 2 of the Government Code.

13 (2) Commencing six months after the effective date of this
14 section, and notwithstanding Section 10231.5 of the Government
15 Code, the department shall provide a status report to the Legislature
16 on a semiannual basis, in compliance with Section 9795 of the
17 Government Code, until regulations have been adopted.

18 (g) In implementing this section, the department may contract,
19 as necessary, on a bid or nonbid basis. This subdivision establishes
20 an accelerated process for issuing contracts pursuant to this section.
21 Those contracts, and any other contracts entered into pursuant to
22 this subdivision, may be on a noncompetitive bid basis and shall
23 be exempt from the following:

24 (1) Part 2 (commencing with Section 10100) of Division 2 of
25 the Public Contract Code and any policies, procedures, or
26 regulations authorized by that part.

27 (2) Article 4 (commencing with Section 19130) of Chapter 5
28 of Part 2 of Division 5 of Title 2 of the Government Code.

29 (3) Review or approval of contracts by the Department of
30 General Services.