



# **CFILC'S 2019 LEGISLATIVE AGENDA (Updated September 5, 2019)**

## **Active State Legislation**

### **CRIMINAL LAW**

#### **AB 392 (Weber) Peace Officers: Deadly Force**

#### **CFILC Position: Support**

**Description:** Existing law sets forth requirements under which peace officer may make arrests and the use of restraint against a suspect. The law does not require a peace officer to retreat or desist from an attempt to make an arrest because of resistance or threatened resistance of the person being arrested. It further specifies that a homicide by a peace officer is justifiable when necessarily committed in arresting a person who has committed a felony and the person is fleeing or resisting such an arrest.

AB 392 would redefine the circumstances under which a homicide by a peace officer is only deemed justifiable when the officer reasonably believes, based on the totality of the circumstances, that such force is necessary for either of the following reasons:

- a) To defend against an imminent threat of death or serious bodily injury to the officer or to another person;
- b) To apprehend a fleeing person for any felony that threatened or resulted in death or serious bodily injury and if the officer reasonably believes that the person will cause death or serious bodily injury to another unless immediately apprehended. Where feasible, the peace officer shall make

reasonable efforts to identify themselves as peace officer and to warn that deadly force may be used, or the officer has objectively reasonable grounds to believe that the person is aware of those facts.

The bill specifies that a peace officer shall not use deadly force against a person based on the danger that person poses to themselves, if the person does not pose an imminent threat of death or serious bodily injury to the peace officer or to another person.

Finally, the bill defines "deadly force" as "any use of force that creates a substantial risk of causing death or serious bodily injury, including, but not limited to, the discharge of a firearm.

Please note that the most recent compromise amendments removed the opposition of several law enforcement representatives.

**Status: 9/3/19.** The bill was signed into law by the Governor as Chapter 170 of the Statutes of 2019.

## **EDUCATION**

### **AB 947 (Quirk-Silva) Visually Impaired Pupils: Core Curriculum**

#### **CFILC Position: Support**

**Description:** AB 947 establishes an expanded core curriculum (ECC) for students who are blind, have low-vision, or are visually impaired and authorizes local educational agencies to consider the expanded core curriculum when developing a student's IEP. The ECC would be defined as including:

- a) Compensatory skills, such as braille and concept development and other skills needed to access the core curriculum.
- b) Orientation and mobility.
- c) Social interaction skills.
- d) Career technical education.

- e) Assistive technology, including optical devices.
- f) Independent living skills.
- g) Recreation and leisure.
- h) Self-determination.
- i) Sensory efficiency.

In addition, the bill requires that, if an orientation and mobility evaluation is determined to be needed for a pupil who is blind, has low vision, or is visually impaired, it shall be conducted by a person who is appropriately certified as an orientation and mobility specialist. It also requires the orientation and mobility evaluations described above to occur in familiar and unfamiliar environments, in varying lighting conditions, and in the home, school, and community, as appropriate.

**Status: 9/3/19.** AB 947 was voted off of the Senate Appropriations Committee Suspense File on August 30<sup>th</sup>. I been placed on the Senate 3<sup>rd</sup> Reading File.

## **HEALTH**

### **AB 1088 (Wood) Medi-Cal: Program for the Aged and Disabled**

#### **CFILC Position: Support**

**Description:** The bill would make the necessary changes in existing law governing the Medi-Cal Program to change the income eligibility in the Aged and Disabled Federal Poverty Level Program (A&D Program) from 100 percent of the federal poverty level (FPL), plus the individual or couple standard disregard to 138 percent of FPL. CFILC supports your legislation to address a major gap in coverage that needs to be remedied for California's aged and disabled populations.

**Status: 9/3/19.** Passed by the Senate Appropriations Committee 7-0 on August 30<sup>th</sup>. It was ordered to the Senate 2<sup>nd</sup> Reading File.

## **AB 1287 (Nazarian) Universal Assessments: No Wrong Door System**

### **CFILC Position: Support**

**Description:** AB 1287 would require the California Department of Aging. In partnership with other specified department and stakeholders, to develop a plan and a strategy for a phased-in statewide implementation of a No Wrong Door system on or before July 1, 2020. The system would be designed to assist older adults, people with disabilities, and caregivers in obtaining accurate information and timely referrals to appropriate community services and supports.

AB 1287 would also require the California Health and Human Services Agency, in consultation with specified departments and in consultation with stakeholders, to develop a universal tool to assess individual need and to determine initial eligibility for LTSS programs and supports delivery. The agency would be required to submit a report to the Legislature on or before July 1, 2021 regarding the universal tool and process. Finally, the bill would state the legislative intent to develop provisions in the Master Plan for Aging for this population.

**Status: 9/3/19.** AB 1287 was voted off of the Senate Appropriations Committee Suspense File on August 30<sup>th</sup>. I has been ordered to the Senate 2<sup>nd</sup> Reading File.

## **SB 228 (Jackson) Master Plan on Aging**

### **CFILC Position: Support**

**Description:** SB 228 would require the Governor to appoint a Master Plan Director and 15-member Aging Task Force, consisting of 15 members, with the President pro Tempore of the Senate, the Speaker of the Assembly, and Governor each appointing 5 members to the task force. The bill would require the director, with the assistance of the task force, to work with representatives from impacted state departments, stakeholders, and other agencies to identify the policies and priorities that need to be implemented in California to prepare for the aging of its population.

SB 228 would require the task force, under the leadership of the director, to develop a master plan with specified components, including, among others,

a proposal, with a cost estimate and an identification of potential funding sources, for how the state should accomplish specified goals, including expanding access to coordinated, integrated systems of care. The bill would also require the task force to solicit input from stakeholders and gather information on the impact of California's aging population and develop a master plan implementation process.

Finally, the bill would also, as part of the master planning process, require the Office of the Chancellor of the Community Colleges and California State University to develop, and authorize the Office of the President of the University of California to develop, a strategy and fiscal plan to ensure the availability of a culturally competent workforce to meet the needs of an aging population by 2030.

CFILC had taken a SUPPORT, IF AMENDED position on the bill because the introduced version did not include disability within the jurisdiction of the Master Plan. However, the most recent version does encompass the needs of people with disabilities within the purview of the Master Plan. It also includes the Department of Rehabilitation among the participating state departments and agencies.

**Status: 9/319.** SB 228 was voted off of the Assembly Appropriations Committee Suspense File on August 30<sup>th</sup>.

### **SB 453 (Hurtado) Older Adults: ADRCs: No Wrong Door System**

#### **CFILC Position: Support**

**Description:** SB 453 would require the California Department of Aging, by July 1, 2021, to develop a core model of best practices, and would require ADRC programs operated by area agencies on aging or independent living centers to implement that core model by July 1, 2022. In developing those best practices, the bill would require the department to consider specified practices, including, among others, a person-centered counseling process. The bill would require the department to submit a report to the Legislature by July 1, 2021, regarding the core model of best practices.

In addition, it would require the California Department of Aging to take specified actions with regards to the implementation of a No Wrong Door System, including, among other things, developing a plan for, and

overseeing the implementation of, a No Wrong Door System and coordinating funding sources for the No Wrong Door System. The bill would require the State Department of Health Care Services to determine if the Medicaid administrative claiming process may be used to fund a No Wrong Door System, or activities associated with a No Wrong Door System, and, if so, to take necessary action to receive that funding. The bill would require the State Department of Health Care Services to report its findings regarding the availability of the Medicaid administrative claiming process to the Legislature by January 1, 2020 and every 3 years thereafter.

**Status: 9/3/19.** SB 453 was voted off of the Assembly Appropriations Committee Suspense File on August 30th.

## **SB 512 (Pan) Long-Term Services and Supports**

### **CFILC Position: Support**

**Description:** Sponsored by CADA, SB 512 would create a new LTSSA social insurance program for state residents to provide a man aged cash benefit for eligible residents that they can use to pay for LTSS, including: (1) help with personal care such as bathing, dressing, and toileting; (2) help with complex care for medications and wound care; (3) help with housekeeping, home modifications, transportation, bill paying, and meals; and (4) assisted living, nursing facility, and other supportive housing costs.

The bill would establish the California LTSS Benefits Board to provide that sustainable financing mechanism. The LTSS Board would be composed of 9 specified members that include, among others, the State Treasurer as the Board Chair, the Secretary of the Health and Human Services Agency as the Vice-Chair, and 3 members appointed by the Governor. The LTSS Board would be required to manage and invest revenue deposited in the California Long-Term Supports Benefits Trust Fund (LTSS Trust) that would be established in the State Treasury by this bill that would, upon appropriations, be used to finance LTSS for eligible individuals. Finally, SB 215 would create a 9-member Long-Term Services and Supports Advisory Committee comprised of members experienced in aging and disability services for the purpose of providing ongoing advice and recommendations to the LTSS Board.

**Status: 9/3/19.** The bill was passed by the Assembly Human Services Committee 8-0. It was referred to the Assembly Appropriations Committee and CADA announced that the Administration requested that the author take no further action this year to allow for the imminent planning and implementation of the Governor's Master Plan for Aging and its stakeholder advisory committee. It is possible that it will become a 2-year bill with amendments to reflect the work of the master plan and advisory committee.

## **MENTAL HEALTH**

### **SB 10 (Beall) Mental Health: Peer, Parent, Transition Age, and Family Support Specialist Certification**

#### **CFILC Position: Support**

**Description:** SB 10, the Peer Provider Certification Act of 2019 has two primary goals: (1) it requires the Department of Health Care Services (DHCS) to establish a certification program for peer providers with four distinct certification categories: peer, parent, transition-age, and family support specialist. Among other things, the program defines the range of responsibilities and practice guidelines for peer support specialists, specifies required training and continuing education requirements, determines clinical supervision requirements, and establishes a code of ethics and processes for revocation of certification; (2) expresses the intent of the Legislature that the program will provide increased family support, a fuller continuum of wraparound services, and an individualized focus on clients to promote recovery and self-sufficiency; and (3) requires the department to amend that Medicaid state plan to include certified peer, parent, transition-age, and family peer support specialist as a provider type for purposes of the Medi-Cal program and to include them as a distinct service type.

**Status: 9/3/19.** SB 10 was voted off of the Assembly Appropriations Committee Suspense File on August 30th.

### **SB 40 (Wiener) Homelessness Conservatorships: Serious Mental Illness and Substance Abuse Disorders**

#### **CFILC Position: OPPOSE**

**Description:** SB 1045 of 2018 and this bill were sponsored by the City and County of San Francisco. SB 1045 was signed into law last year.

According to the author, this bill is a critical follow-up to SB 1045. That bill created a 5-year pilot project for San Francisco, San Diego, and Los Angeles counties to create a conservatorship program focused on providing housing with wrap around service to the homeless who are dying on the streets who cannot be reached effectively with voluntary services. SB 40 is designed to make technical and clarifying changes to SB 1045.

However, the bill is opposed by DRC, the ACLU, and the Western Center on Law and Poverty. They are concerned that neither bill provided resources or assurances that adequate resources are available for those who may be conserved. They further argue that aggressive interventions won't work if there is no place to house and treat those who may need help. The opposition is concerned that this bill does nothing to expand services or create more housing or medical or mental health care, which they believe is a major contributor to homelessness.

**The PPC reviewed last year's SB 1045 but decided against recommending that CFILC take a formal position. Several members voiced similar concerns to those taken by the opponents last year. Upon discussion about this bill, the PPC indicated that they would support taking a formal OPPOSE position on this year's bill.**

Among other things, SB 40 requires the participating counties to establish working groups, comprised of representatives of local agencies and disability rights advocacy groups, among others, to conduct an evaluation of the effectiveness of the implementation of the conservatorship provisions in addressing the needs of persons with serious mental illness and substance use disorders. It requires each working group to prepare and submit a preliminary report to the Legislature on its findings and recommendations no later than January 1, 2021, and a final report no later than January 1, 2023.

SB 40 reduces the term of a housing conservatorship from one year to six months after the appointment of the conservator unless a shorter period is ordered by the court, but it allows the conservatorship for the succeeding six months upon a petition by the conservatorship and reappointment by the court. It provides that a person may be conserved under a housing

conservatorship only if the person is presently incapable of caring for the person's own health and well-being due to a serious mental illness and substance use disorder.

SB 40 declares that it is to take effect immediately as an urgency statute.

**Status: 9/3/19.** SB 40 was voted off of the Assembly Appropriations Committee Suspense File on August 30th.

## **SB 214 (Dodd) Medi-Cal: California Community Transitions Program**

### **CFILC Position: Support**

**Description:** SB 214 would require the State Department of Health Care Services to administer the CCT, as authorized under Federal law and pursuant to the terms of the Money Follows the Person (MFP) Rebalancing Demonstration. This enables the transitioning of eligible Medi-Cal beneficiaries into qualified residences after residing in an institutional health facility for a period of 90 days or longer.

In addition, the bill would specify the services to be offered under the program and the targeted populations for those services. SB 214 specifies that the CCT program is voluntary and that program eligibility would be determined by CCT lead organizations in accordance with prescribed requirements. Finally, the bill would require the department to use Federal funds made available through the demonstration program to implement the program and would further specify that, if sufficient Federal funds are made available, the department shall fund and administer the program in a manner that seeks to maximize Federal financial participation.

**Status: 9/3/19. INACTIVE.** The author cancelled its scheduled August 21<sup>st</sup> Assembly Appropriations Committee hearing.

## **INACTIVE STATE LEGISLATION**

### **HOUSING**

#### **SB 50 (Wiener) Planning and Zoning: Housing Development:**

## **Equitable Communities Incentives**

### **CFILC Position: Support**

**Description:** SB 50 would have required a local government to grant an Equitable Communities Incentive (ECI) to developments that meet specified conditions. It would require a project to be either a “jobs-rich housing project” or a “transit-rich housing project.” A jobs-rich housing project must be a residential development located in a jobs rich area.

Among other things, SB 50 would have required the Department of Housing and Community Development, in consultation with the Office of Planning and Research, to designate and produce maps of jobs-rich areas based on a specified methodology by January 1, 2020, and to update the maps every five years thereafter. That designation must be based on indicators such as proximity to jobs, high area median income relative to the relevant region, and high-quality public schools, as an area of high opportunity close to jobs, and it must include tracts that are both high opportunity and jobs rich, based on specified factors that ensure that residents are proximate to their jobs and reduce commute times.

**Status: 5/13/19. INACTIVE.** SB 50 was not passed off of the Suspense File 6-0 and it has been held in the committee.

## **HUMAN SERVICES**

### **AB 1136 (Nazarian) California Department of Community Living**

#### **CFILC Position: Support**

**Description:** AB 1136 would have established the California Department of Community Living within the California Health and Human Services Agency to consolidate leadership on issues and programs serving California’s older adults, people with disabilities, and caregivers. The bill would have prescribed the duties of the department, including assisting older adults and people with disabilities in connecting to specified services including care coordination, health insurance counseling, peer-based programs, and community transition services.

In addition, the bill would have required the department to establish a statewide No Wrong Door system to assist older adults, people with disabilities, and caregivers in obtaining accurate information and timely referrals to appropriate community services and supports, using specified means.

**Status: 5/16/19. INACTIVE.** AB 1136 failed to be voted off the Assembly Appropriations Committee Suspense File and has been held in committee.

## **OLMSTEAD**

### **AB 536 (Frazier) Developmental Services**

**CFILC Position:** Support

**Description:** AB 536 would have expanded the age for a person to be eligible for services provided by the Departmental of Developmental Services to include persons whose developmental disability originates before age 22. The bill would have brought California law into conformity with applicable Federal definitions governing the provision of developmental services.

**Status: 5/16/19. INACTIVE.** The bill was held in the Assembly Appropriations Committee after it failed to be voted off the Suspense File.

## **CFILC SUPPORT POSITIONS ON FEDERAL LEGISLATION**

### **H.R. 3208---THE FEDERAL “REAL EMERGENCY ACCESS FOR AGING AND DISABILITY INCLUSION (REAADI) IN DISASTERS ACT”**

**Description:** REAADI is written to ensure there is a strong disability and older adult voice in the preparation, response, recovery and mitigation of disasters. It will:

□ Establish a National Commission on Disability Rights and Disasters to study the needs of individuals with disabilities, older adults and others with access and functional needs and make recommendations for best practices at the local, state, and federal levels for ensuring older adults and people with disabilities are included in all aspects of disaster preparedness, including in the areas of:

- accessible communication,
- protection of civil rights,
- accessible transportation and evacuation, and
- accessible health and medical services;

- Create a network of centers focused on training and technical assistance, as well as research, to assist states and localities to better involve and support people with disabilities and older adults during times of disasters;
  
- Direct the Department of Justice to review the spending of disaster funds by federal agencies and states to ensure funds have been spent in accordance with the Americans with Disabilities Act and its amendments, including the use of emergency shelters and services that are accessible and reconstructed buildings that meet ADA requirements;
  
- Create a competitive grant program to pilot strategies for greater inclusion of people with disabilities and older adults in disaster preparation, response, recovery, and mitigation; and
  
- Require the Department of Justice to examine how the civil rights of people with disabilities and older adults are or are not upheld during and following disasters.

## **HR 3216; S. 1754 The “Disaster Relief Medicaid (DRMA) Act”**

**Description:** The Disaster Relief Medicaid Act would ensure that individuals eligible for Medicaid who are forced to relocate due to

a disaster are able to continue to access their Medicaid supported services. The bill would provide states with resources to support the Medicaid needs of individuals forced to relocate following a disaster. This legislation would designate an individual who resides in an area covered under a presidential disaster declaration as a Relief-Eligible Survivor, and allow them to continue to access their Medicaid services if they are forced to relocate to another state as a result of the disaster.

The Disaster Relief Medicaid Act helps states meet the needs of Relief-Eligible Survivors through a limited time one hundred percent federal match for displaced individuals, technical assistance and support to develop innovative state strategies to respond to an influx of out-of-state individuals.

The bill also creates a grant to help states develop an emergency response corps to provide home and community-based services. The legislation also guarantees that a 100 percent federal matching payment for medical assistance is provided to states in disaster areas.