

EMSAAC
Friday, March 01, 2024

[AB 296](#) (Rodriguez D) Office of Emergency Services: 9-1-1 Public Education Campaign.

Current Text: Amended: 6/29/2023 [html](#) [pdf](#)

Last Amend: 6/29/2023

Status: 9/1/2023-Failed Deadline pursuant to Rule 61(a)(11). (Last location was APPR. SUSPENSE FILE on 8/14/2023)(May be acted upon Jan 2024)

Location: 9/1/2023-S. 2 YEAR

Desk	Policy	Fiscal	Floor	Desk	Policy	2 year	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law establishes the Office of Emergency Services within the office of the Governor. Existing law makes the office responsible for the state’s emergency and disaster response services for natural, technological, or man-made disasters and emergencies, including responsibility for activities necessary to prevent, respond to, recover from, and mitigate the effects of emergencies and disasters to people and property. Existing law, the Warren-911-Emergency Assistance Act, requires every local public agency, as defined, to have an emergency communication system and requires the digits “911” to be the primary emergency telephone number within the system. Existing law requires the office, with the advice and assistance of the Attorney General, to coordinate the implementation of systems, to assist local public agencies and local public safety agencies in obtaining financial help to establish emergency telephone service, and to aid agencies in the formulation of concepts, methods, and procedures that will improve the operation of those systems and that will increase cooperation between public safety agencies. This bill would establish the 911 Public Education Campaign, to be administered by the office in collaboration with the State 911 Advisory Board, as specified, for the purpose of educating the public on when it is appropriate to call 911 for assistance. The bill would include in the goals of the campaign, among others, reducing the number of unnecessary calls to 911 call centers and reducing delays in the 911 system caused by nonemergency calls being placed. The bill would require the campaign to give local public agencies the ability to tailor the message of the campaign, focus on social media, and be distributed to the public via local public agency channels. This bill contains other existing laws.

Organization Position
EMSAAC Support

[AB 1168](#) (Bennett D) Emergency medical services (EMS): prehospital EMS.

Current Text: Amended: 7/13/2023 [html](#) [pdf](#)

Last Amend: 7/13/2023

Status: 9/14/2023-Failed Deadline pursuant to Rule 61(a)(14). (Last location was INACTIVE FILE on 9/12/2023)(May be acted upon Jan 2024)

Location: 9/14/2023-S. 2 YEAR

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	2 year	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law, the Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act, governs local emergency medical services (EMS) systems and authorizes each county to develop an EMS program and designate a local EMS agency. Existing law requires a county to enter into a written agreement with a city or fire district that contracted for or provided prehospital EMS as of June 1, 1980. Existing law requires, until that written agreement is reached, prehospital EMS to be continued at not less than the existing level and the administration of prehospital EMS by cities and fire districts contracting for or providing those services as of June 1, 1980, to be retained by those cities and fire districts. This bill would require a city to be treated as if it had retained its authorities regarding, and the administration of, prehospital EMS if specified requirements are met. If a joint powers agreement regarding prehospital EMS was initially executed on or after January 1, 2024, the bill would ensure a city or fire district retains its existing authorities regarding, and the administration of, prehospital EMS. This bill contains other related provisions and other existing laws.

Organization Position
EMSAAC Oppose

Notes: 3/17/23: O-1

5/24/23: EMSAAC-EMDAC Oppose FA submitted

[AB 1786](#) (Rodriguez D) Public safety: vehicles.

Current Text: Introduced: 1/3/2024 [html](#) [pdf](#)

Status: 1/4/2024-From printer. May be heard in committee February 3.

Location: 1/3/2024-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law authorizes the director of the Department of Motor Vehicles to adopt and enforce rules and regulations necessary to administer the provisions implemented by the department. This bill would state the intent of the Legislature to enact legislation to govern the interaction between first responders and autonomous vehicles.

Organization **Position**
EMSAAC Watch/Study

AB 1792 **(Rodriguez D) Emergency medical services: personal protective equipment.**

Current Text: Introduced: 1/4/2024 [html](#) [pdf](#)

Status: 1/16/2024-Referred to Com. on E.M.

Location: 1/16/2024-A. EMERGENCY MANAGEMENT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar: 4/8/2024 2:30 p.m. - State Capitol, Room 444 ASSEMBLY EMERGENCY MANAGEMENT, RODRIGUEZ, FREDDIE, Chair

Summary: Existing law requires the Emergency Medical Services Authority to develop planning and implementation guidelines that address designated components for emergency medical services systems. This bill would require the authority to develop standards, on or before January 1, 2027, for personal protective equipment for ambulance personnel and to update the standards on or before January 1, 2032, and every 5 years thereafter.

Organization **Position**
EMSAAC Watch/Study

AB 1843 **(Rodriguez D) Emergency Ambulance Employee Safety and Preparedness Act.**

Current Text: Introduced: 1/16/2024 [html](#) [pdf](#)

Status: 1/29/2024-Referred to Com. on L. & E.

Location: 1/29/2024-A. L. & E.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar: 3/13/2024 1:30 p.m. - State Capitol, Room 447 ASSEMBLY LABOR AND EMPLOYMENT, ORTEGA, LIZ, Chair

Summary: Under the Emergency Ambulance Employee Safety and Preparedness Act, an initiative measure enacted by the voters as Proposition 11 at the November 6, 2018, statewide general election, every emergency ambulance employee is entitled to employer-paid mental health services through an employee assistance program (EAP), and requires the EAP coverage to provide up to 10 mental health treatments per issue per calendar year. The act defines "issue" for purposes of those provisions to mean mental health conditions such as, among other things, stress, depression, or substance abuse. This bill would instead require the EAP program to provide up to 20 mental health treatments per issue per calendar year, and would include post-traumatic stress disorder in the definition of "issue" for purposes of those provisions. This bill contains other related provisions and other existing laws.

Organization **Position**
EMSAAC Watch/Study

AB 1915 **(Arambula D) Pupil health: drug education: opioid overdose training program.**

Current Text: Introduced: 1/24/2024 [html](#) [pdf](#)

Status: 2/5/2024-Referred to Coms. on ED. and HEALTH.

Location: 2/5/2024-A. ED.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar: 3/20/2024 1:30 p.m. - 1021 O Street, Room 1100 ASSEMBLY EDUCATION, MURATSUCHI, AL, Chair

Summary: Existing law requires instruction to be given in the elementary and secondary schools by appropriately trained instructors on drug education and the effects of the use of tobacco, alcohol, narcotics, dangerous drugs, as defined, and other dangerous substances. Existing law authorizes a public or private elementary or secondary school to determine whether or not to make emergency naloxone hydrochloride or another opioid antagonist and trained personnel available at its school, and to designate one or more volunteers to receive related training to address an opioid overdose, as specified. Commencing with the 2023-24 fiscal year, and for each fiscal year thereafter, existing law appropriates \$3,500,000 from the General Fund to the State Department of Education for allocation to county offices of education for the purpose of purchasing and maintaining a sufficient stock of emergency opioid antagonists for school districts and charter schools within their jurisdiction to maintain a minimum of two units at each middle school, junior high school, high school, and adult school schoolsite, as provided. This bill would require school districts, county offices of education, and charter schools that voluntarily determine to make naloxone hydrochloride or another opioid

antagonist available on campus to ensure that the naloxone hydrochloride or another opioid antagonist is placed in an appropriate location that is widely known and easily accessible, during school hours and after school hours. The bill would require the naloxone hydrochloride or another opioid antagonist to be located on campus in at least one of several specified locations. This bill contains other related provisions and other existing laws.

Organization **Position**
 EMSAAC Watch/Study

AB 1987 **(Bennett D) Local government.**

Current Text: Introduced: 1/30/2024 [html](#) [pdf](#)

Status: 1/31/2024-From printer. May be heard in committee March 1.

Location: 1/30/2024-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law sets forth provisions for the formation, duties, and other authorizations, among other things, relating to cities, counties, cities and counties, and other local agencies. This bill would state the intent of the Legislature to enact legislation relating to local government.

Organization **Position**
 EMSAAC Watch/Study

Notes: Watch with concerns

AB 2225 **(Rodriguez D) Discovery: emergency medical services review committees.**

Current Text: Introduced: 2/7/2024 [html](#) [pdf](#)

Status: 2/26/2024-Referred to Com. on JUD.

Location: 2/26/2024-A. JUD.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law exempts from discovery as evidence the proceedings and records of specified organized committees of health care professionals and review committees having the responsibility of evaluation and improvement of the quality of care. This bill would extend this exemption, for purposes of civil proceedings only, to the proceedings and records of emergency medical services organized committees and review committees, as described above.

Organization **Position**
 EMSAAC Support

AB 2348 **(Rodriguez D) Emergency medical services.**

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

Status: 2/13/2024-From printer. May be heard in committee March 14.

Location: 2/12/2024-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law, the Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act, governs local emergency medical services (EMS) systems. The act establishes the Emergency Medical Services Authority (authority), which is responsible for the coordination and integration of all emergency medical services. Existing law authorizes each county to develop an emergency medical services program and requires a county that does so to designate a local EMS agency (LEMSA). Existing law makes a violation of the act or regulations adopted pursuant to the act punishable as a misdemeanor. Existing law requires the authority to develop planning and implementation guidelines for emergency medical services systems that address specified components, including the assessment of hospital and critical care centers and data collection and evaluation. This bill would require the authority to develop planning and implementation guidelines for response times. This bill would require the authority to develop a statewide standard methodology for calculation and reporting by a LEMSA of response time. The bill would require the authority to ensure the guidelines include a list of specified standardized terminology for a LEMSA to use when granting exemptions or when modifying original response time data for public and contractual reporting of 911 response time. The bill would require a LEMSA to report contracted provider response times to the authority in a data dispatch form, as specified. The bill would require a noncontracted ambulance provider to report response times to the LEMSA that has jurisdiction over the provider. The bill would require the LEMSA to post contracted and noncontracted provider response times monthly on the LEMSA's internet website in specified formats. This bill contains other related provisions and other existing laws.

Organization **Position**
 EMSAAC Watch/Study

Notes: Reintroduction of AB 379.
 Watch with concerns/engage with author's office.

[AB 2469](#)

(Committee on Emergency Management) Emergency Management Assistance Compact.

Current Text: Introduced: 2/13/2024 [html](#) [pdf](#)

Status: 2/26/2024-Referred to Com. on E.M.

Location: 2/26/2024-A. EMERGENCY MANAGEMENT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law ratifies, approves, and sets forth the provisions of the Emergency Management Assistance Compact, an interstate agreement that provides for mutual assistance between states responding to emergencies and disasters. Under existing law, the compact becomes inoperative on March 1, 2028, and is repealed as of January 1, 2029. This bill would delete the inoperative and repeal dates, thereby making the compact operative indefinitely.

Organization **Position**
EMSAAC Support

[AB 2742](#)

(Sanchez R) Emergency vehicles: penalties.

Current Text: Introduced: 2/15/2024 [html](#) [pdf](#)

Status: 2/16/2024-From printer. May be heard in committee March 17.

Location: 2/15/2024-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law requires, upon the immediate approach of an authorized emergency vehicle that is sounding a siren and has a lighted lamp exhibiting red light, that a driver of a vehicle yield the right-of-way to the emergency vehicle, that the operator of a street car immediately stop the street car, and that all pedestrians proceed to the nearest curb or place of safety and remain there until the authorized emergency vehicle has passed. This bill would prohibit a person driving a vehicle upon a highway or a pedestrian from willfully obstructing a highway, including in the course of a protest, in any manner that interferes with the ability of an authorized emergency vehicle to pass and would make a violation of this provision punishable by specified fines. By creating a new crime, this bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

Organization **Position**
EMSAAC Watch/Study

[AB 2775](#)

(Gipson D) Community paramedicine.

Current Text: Introduced: 2/15/2024 [html](#) [pdf](#)

Status: 2/16/2024-From printer. May be heard in committee March 17.

Location: 2/15/2024-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law establishes, until January 1, 2031, the Community Paramedicine or Triage to Alternate Destination Act of 2020. Existing law states that it is the intent of the Legislature, among other things, that local emergency medical services (EMS) agencies be authorized to develop a community paramedicine or triage to alternate destination program to improve patient care and community health. Existing law states that it is the intent of the Legislature to monitor and evaluate implementation of community paramedicine and triage to alternate destination programs by local EMS agencies in California and determine whether these programs should be modified or extended before the program ends. This bill would make a technical conforming change to these provisions.

Organization **Position**
EMSAAC Watch/Study

[AB 2858](#)

(Dahle, Megan R) California Emergency Services Act: State Emergency Plan: frequency of update.

Current Text: Introduced: 2/15/2024 [html](#) [pdf](#)

Status: 2/16/2024-From printer. May be heard in committee March 17.

Location: 2/15/2024-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Under existing law, the California Emergency Services Act, the State Emergency Plan is the official document approved by the Governor that describes the principles and methods to be applied in carrying out emergency operations or rendering mutual aid during emergencies, and includes elements addressing continuity of government, the emergency services of governmental agencies, mobilization of resources, mutual aid, and public information. Existing law makes the State Emergency Plan effective in each political subdivision of the state, and requires the governing body of each political subdivision to take necessary actions to carry out its provisions. Existing law requires the Governor to coordinate the State Emergency Plan and those programs necessary for the mitigation of the effects of an

emergency in this state and to coordinate the preparation of plans and programs for the mitigation of the effects of an emergency by the political subdivisions of this state, which are to be integrated into and coordinated with the State Emergency Plan and the plans and programs of the federal government and of other states to the fullest possible extent. This bill would require the Office of Emergency Services to update the State Emergency Plan every 4 years after the update required on or before January 1, 2024. This bill contains other existing laws.

Organization **Position**
EMSAAC Watch/Study

AB 2859 **(Patterson, Jim R) Emergency medical technicians: peer support.**

Current Text: Introduced: 2/15/2024 [html](#) [pdf](#)

Status: 2/16/2024-From printer. May be heard in committee March 17.

Location: 2/15/2024-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law establishes a statewide system for emergency medical services and establishes the Emergency Medical Services Authority, which is responsible for establishing training, scope of practice, and continuing education for emergency medical technicians and other prehospital personnel. This bill would state the intent of the Legislature to enact legislation to provide peer-to-peer support for emergency medical technicians and other ambulance employees. This bill contains other existing laws.

Organization **Position**
EMSAAC Support

AB 2973 **(Hart D) Emergency services.**

Current Text: Introduced: 2/16/2024 [html](#) [pdf](#)

Status: 2/17/2024-From printer. May be heard in committee March 18.

Location: 2/16/2024-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law, the Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act, governs local emergency medical services (EMS) systems and authorizes each county to develop an EMS program and designate a local EMS agency. Existing law requires a county to enter into a written agreement with a city or fire district that contracted for or provided prehospital EMS as of June 1, 1980. Existing law requires, until that written agreement is reached, prehospital EMS to be continued at not less than the existing level and the administration of prehospital EMS by cities and fire districts contracting for or providing those services as of June 1, 1980, to be retained by those cities and fire districts, as specified. This bill would make technical, nonsubstantive changes to those provisions.

Organization **Position**
EMSAAC Watch/Study

Notes: Watch with concerns.

AB 3127 **(McKinnor D) Reporting of crimes: mandated reporters.**

Current Text: Introduced: 2/16/2024 [html](#) [pdf](#)

Status: 2/17/2024-From printer. May be heard in committee March 18.

Location: 2/16/2024-A. PRINT

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law requires a health practitioner, as defined, to make a report to law enforcement when they suspect a patient has suffered physical injury that is either self-inflicted, caused by a firearm, or caused by assaultive or abusive conduct, including elder abuse, sexual assault, or torture. A violation of these provisions is punishable as a misdemeanor. This bill would remove the requirement that a health practitioner make a report to law enforcement when they suspect a patient has suffered physical injury caused by assaultive or abusive conduct. The bill would instead require that a health practitioner make a report when the injury is life threatening or results in death, or is the result of child abuse or elder or dependent adult abuse. The bill would require the health practitioner to additionally make a report when a person is seeking care for injuries related to domestic, sexual, or any nonaccidental violent injury if the patient requests a report be sent, as specified. This bill contains other related provisions and other existing laws.

Organization **Position**
EMSAAC Watch/Study

SB 402 **(Wahab D) Involuntary commitment.**

Current Text: Amended: 1/12/2024 [html](#) [pdf](#)

Last Amend: 1/12/2024

Status: 1/29/2024-Read third time. Passed. (Ayes 37. Noes 1.) Ordered to the Assembly. In Assembly. Read first time. Held at Desk.

Location: 1/29/2024-A. DESK

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law, the Lanterman-Petris-Short Act, authorizes the involuntary commitment and treatment of persons with specified mental disorders. Under the act, when a person, as a result of a mental health disorder, is a danger to self or others, or gravely disabled, the person may, upon probable cause, be taken into custody by specified individuals, including, among others, by peace officers and designated members of a mobile crisis team, and placed in a facility designated by the county and approved by the State Department of Health Care Services for up to 72 hours for evaluation and treatment. This bill would additionally authorize a person to be taken into custody, pursuant to those provisions, by a licensed mental health professional, as defined.

Organization **Position**
EMSAAC Watch/Study

Notes: 2/10/23 - To LC
3/23/23: Watch w/ Concerns

SB 915

(Cortese D) Local government: autonomous vehicles.

Current Text: Introduced: 1/9/2024 [html](#) [pdf](#)

Status: 2/21/2024-Referred to Coms. on L. GOV. and TRANS.

Location: 2/21/2024-S. L. GOV.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law authorizes an autonomous vehicle, as defined, to be operated on public roads for testing purposes by a driver who possesses the proper class of license for the type of vehicle being operated if certain requirements are met, including that the vehicle is being operated solely by employees, contractors, or other persons designated by the manufacturer. Existing law prohibits an autonomous vehicle from being operated on public roads until the manufacturer submits an application to the Department of Motor Vehicles containing certain certifications regarding safety and other technological requirements and the department approves that application pursuant to adopted regulations. Existing law, commencing January 1, 2030, and to the extent authorized by federal law, prohibits the operation of certain new autonomous vehicles that are not zero-emission vehicles, as defined. This bill would prohibit an autonomous vehicle service, which has received approval to conduct commercial passenger service or engage in commercial activity using driverless vehicles by the Department of Motor Vehicles, the Public Utilities Commission, or another state agency, from commencing operation within a local jurisdiction until authorized by a local ordinance enacted pursuant to the bill's provisions. The bill would authorize each city, county, or city and county in which an autonomous vehicle has received authorization to operate, to protect the public health, safety, and welfare by adopting an ordinance or resolution in regard to autonomous vehicle services within that jurisdiction. The bill would require each city, county, or city and county that adopts an ordinance or resolution to include certain provisions within that ordinance or resolution. These would include a policy for entry into the business of providing autonomous vehicle services including a permitting program, the establishment of reasonable vehicle caps and hours of service restrictions, and the establishment of an interoperability or override system accessible by first responders in case of an emergency. This bill contains other related provisions and other existing laws.

Organization **Position**
EMSAAC Watch/Study

SB 975

(Ashby D) Emergency medical services: community paramedicine.

Current Text: Introduced: 1/29/2024 [html](#) [pdf](#)

Status: 2/14/2024-Referred to Com. on RLS.

Location: 1/29/2024-S. RLS.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law, the Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act, governs local emergency medical services (EMS) systems. This bill would state the intent of the Legislature to enact legislation relating to the payment and reimbursement for mobile integrated health and community paramedicine programs.

Organization **Position**
EMSAAC Watch/Study

Notes: Watch/Study (possible future support).

SB 997

(Portantino D) Pupil health: naloxone hydrochloride nasal spray and fentanyl test strips.

Current Text: Introduced: 1/31/2024 [html](#) [pdf](#)

Status: 2/14/2024-Referred to Coms. on ED. and HEALTH.

Location: 2/14/2024-S. ED.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar: 3/20/2024 9 a.m. - 1021 O Street, Room 2100 SENATE EDUCATION, NEWMAN, JOSH, Chair

Summary: Existing law requires the governing board of any school district to give diligent care to the health and physical development of pupils. Existing law authorizes a school district, county office of education, and charter school to provide emergency naloxone hydrochloride or another opioid antagonist to school nurses or trained personnel who have volunteered, and authorizes school nurses or trained personnel to use naloxone hydrochloride or another opioid antagonist to provide emergency medical aid to persons suffering, or reasonably believed to be suffering, from an opioid overdose, as provided. This bill would authorize school districts, county offices of education, and charter schools to develop and adopt a policy that allows pupils in middle schools and high schools to carry a federally approved naloxone hydrochloride nasal spray, as provided, for the emergency treatment of persons suffering, or reasonably believed to be suffering, from an opioid overdose. The bill would require public middle schools and high schools that are operated by a local educational agency to stock and distribute fentanyl test strips, as provided, and to notify pupils about the presence and location of fentanyl test strips. To the extent the bill would impose additional duties on local educational agencies, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

Organization	Position
EMSAAC	Watch/Study

SB 1180 (Ashby D) Health care coverage: emergency medical services.

Current Text: Introduced: 2/14/2024 [html](#) [pdf](#)

Status: 2/21/2024-Referred to Com. on HEALTH.

Location: 2/21/2024-S. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care and makes a willful violation of the act a crime. Existing law also provides for the regulation of health insurers by the Department of Insurance. Existing law requires health care service plan contracts and health insurance policies to provide coverage for certain services and treatments, including medical transportation services. Existing law provides for the Medi-Cal program, administered by the State Department of Health Care Services and under which qualified low-income individuals receive health care services, including emergency medical transport. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. This bill would require a health care service plan contract or health insurance policy issued, amended, or renewed on or after January 1, 2025, to include coverage for services provided by a community paramedicine program, a triage to alternate destination program, and a mobile integrated health program. The bill would require those plans and policies to require an enrollee or insured who receives covered services from a noncontracting program to pay no more than the same cost-sharing amount they would pay for the same covered services received from a contracting program. The bill would specify the reimbursement process and amount for a noncontracting program. Because a willful violation of these provisions by a health care service plan would be a crime, the bill would impose a state-mandated local program. The bill would also make services provided by these programs covered benefits under the Medi-Cal program. This bill contains other related provisions and other existing laws.

Organization	Position
EMSAAC	Watch/Study

Notes: watch/study, engage with author's office specifically related to the added definition of 'Mobile integrated health program' - which as written applies only to "fire-department based team" program.

Total Measures: 21

Total Tracking Forms: 21