

Date of Hearing: April 19, 2017

ASSEMBLY COMMITTEE ON GOVERNMENTAL ORGANIZATION

Adam Gray, Chair

AB 1643 (Bonta) – As Amended March 28, 2017

SUBJECT: Health Care for All Commission

SUMMARY: Establishes the Health Care for All Commission (Commission) in the Department of Health Care Services (DHCS) to investigate issues related to improving health care access and affordability for all Californians. Specifically, **this bill:**

- 1) Requires the Commission to consist of nine members, who have expertise or work experience in the health care field.
- 2) Requires the Governor, the Senate Rules Committee, and the Speaker of the Assembly to each appoint three members to the Commission by February 1, 2018, and requires the Commission to elect a chair from among its members. Permits each Commissioner to serve until January 1, 2021.
- 3) Permits a Commissioner to be reimbursed his or her actual and necessary expenses incurred in connection with the performance of his or her duties as a member of the Commission, however, prohibits a member of the Commission from compensation.
- 4) Allows a Commissioner to be removed for cause by majority vote of the members of the Commission and requires the Chair to appoint a replacement.
- 5) Requires the Commission to meet quarterly from January 1, 2018 to January 1, 2020, and investigate issues related to improving health care access and affordability for all Californians. Requires the Commission to report its findings to the Legislature and make recommendations for improving health care access and affordability by July 1, 2020.
- 6) Requires DHCS to provide general support and staff assistance to the Commission.
- 7) Requires the commission shall comply with the Bagley-Keene Open Meeting Act (Bagley-Keene Act).
- 8) Sunsets the provisions of this bill on January 1, 2021.

EXISTING LAW:

- 1) Establishes the Bagley-Keene Act which requires state entities to conduct their meetings open to the public. These requirements include, but are not limited to:
 - a) Providing notice of a meeting to any person who requests notice in writing. Requires the notice to be given and be made available on the Internet at least 10 days in advance of the meeting. Requires the notice to include the name, address, and telephone number of any person who can provide further information prior to the meeting;

- b) The notice to include an agenda including a brief description of the items of business to be transacted or discussed in either open or closed session, as specified;
 - c) Upon request, a person be provided notice for all meetings of a state body or for a specific meeting or meetings; and,
 - d) The notice to be made available in appropriate alternative formats that comply with the Americans with Disabilities Act of 1990 (42 U.S.C. Sec. 12132) and the relevant related federal rules and regulations, as specified.
- 2) The Bagley-Keene Act defines “state body” to mean each of the following:
- (a) Every state board, or commission, or similar multimember body of the state that is created by statute or required by law to conduct official meetings and every commission created by executive order.
 - (b) A board, commission, committee, or similar multimember body that exercises any authority of a state body delegated to it by that state body.
 - (c) An advisory board, advisory commission, advisory committee, advisory subcommittee, or similar multimember advisory body of a state body, if created by formal action of the state body or of any member of the state body. Advisory bodies created to consist of fewer than three individuals are not a state body, except that standing-committees of a state body, irrespective of their composition, which have a continuing subject matter jurisdiction, or a meeting schedule fixed by resolution, policies, bylaws, or formal action of a state body are state-bodies for the purposes of this chapter.
 - (d) A board, commission, committee, or similar multimember body on which a member of a body that is a state body pursuant to this section serves in his or her official capacity as a representative of that state body and that is supported, in whole or in part, by funds provided by the state body, whether the multimember body is organized and operated by the state body or by a private corporation.

FISCAL EFFECT: Unknown

COMMENTS:

Purpose of the Bill: According to the author, “AB 1643 allows California to continue to investigate and analyze different proposals related to improving health care access and affordability. This bill will convene a group of experts that will help explore our options on an issue that impacts all Californians.”

Background: In signing the ACA’s comprehensive health reform legislation, President Obama adopted a dual mandate for the ACA: it needed not only to expand coverage but also to contain costs (despite the additional utilization associated with the increased coverage), and improve quality. In his August 2016 review and recommendations that could improve the health care system, the President found that the ACA has made significant progress toward solving long-standing challenges facing the US health care system related to access, affordability, and quality of care. The President also indicated that policymakers should build on progress made by the

ACA by continuing to implement state exchanges and delivery system reform, increasing federal financial assistance for state exchange enrollees, introducing a public plan option in areas lacking individual market competition, and taking actions to reduce prescription drug costs.

The ACA additionally established the Prevention and Public Health Fund (Fund) to provide expanded and sustained national investments in prevention and public health, to improve health outcomes, and to enhance health care quality. To date, the Fund has invested in a broad range of evidence-based activities including community and clinical prevention initiatives; research, surveillance, and tracking; public health infrastructure; immunizations and screenings; tobacco prevention; and, expanding public health workforce and training.

Bagley-Keene Act: When the Legislature enacted the Bagley-Keene Act of 1967, it essentially said that when a body sits down to develop its consensus, there needs to be a seat at the table reserved for the public. In doing so, the Legislature has provided the public with the ability to monitor and be part of the decision-making process. The Act explicitly mandates open meetings for California State agencies, boards, and commissions. It facilitates transparency of government activities and protects the rights of citizens to participate in state government deliberations. Therefore, absent a specific reason to keep the public out of meetings, the public is allowed to monitor and participate in the decision-making process. Similarly, the Ralph M. Brown Act of 1953 protects citizen's rights to open meetings at the local and county government levels.

Existing law defines an advisory board, commission, committee, and subcommittee of a state body that is comprised of three or more persons and created by a formal action of the body as a “state body” for purposes of the Act. This generally requires state agencies, boards, and commissions to publicly notice meetings, prepare formal agendas, accept public testimony, and conduct meetings in public, unless specifically authorized to meet in closed session.

AB 1643 would require the newly-formed Commission to comply with all provisions of the Bagley-Keene Act.

Similar State Commissions:

- a) **Colorado**: The Colorado Commission on Affordable Health Care has a three year mission to analyze health care costs and make policy recommendations to its Legislature and Governor for lowering health care costs in the state. The Colorado Commission is expected to complete its work and submit a report to the Colorado General Assembly and Governor’s Office in late 2017.
- b) **Massachusetts**: The Massachusetts Health Policy Commission (HPC) is an independent state agency that develops policy to reduce health care cost growth and improve the quality of patient care. The HPC’s mission is to advance a more transparent, accountable, and innovative health care system through its independent policy leadership and investment programs. The HPC’s goal is better health and better care at a lower cost across the Commonwealth. The HPC’s main responsibilities include monitoring the performance of the health care system; analyzing the impact of health care market transactions on cost, quality, and access; setting the health care cost growth benchmark; and, investing in community health care delivery and innovations.

- c) **Maryland:** The Health Services Cost Review Commission (MD Commission) is an independent state agency with seven Commissioners appointed by the Governor. The MD Commission was given broad responsibility regarding the public disclosure of hospital data and operating performance and was authorized to establish hospital rates to promote cost containment, access to care, equity, financial stability, and hospital accountability

Double Referral: AB 1643 was first heard in Assembly Committee on Health on April 4, 2017, and passed on a 10-0 vote (5 members abstaining).

Prior/Previous Legislation: AB 2345 (Ridley-Thomas) of 2015-2016 Session. Would have created the Commission on Health Care Cost Review to study and analyze public policies relating to health care costs and access to health care coverage. (Held in the Assembly Appropriations Committee).

REGISTERED SUPPORT / OPPOSITION:

Support

California Association of Physicians Groups
The National Association of Social Workers, California Chapter

Opposition

None on File

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