EMSA 2021 Legislative Summary

Analyze

AB 7 **(Rodriguez D) Emergency ambulance employees: multithreat body protective gear.**
Current Text: Vetoed: 10/4/2021 html pdf
Introduced: 12/7/2020
Last Amend: 6/23/2021
Status: 10/4/2021-Vetoed by the Governor
Location: 10/4/2021-A. VETOED
Summary: Would, upon request by an emergency ambulance employee, require an emergency ambulance provider to provide that employee with multithreat body protective gear, defined as material or equipment that is worn by an employee and is bullet, strike, slash, and stab resistant, and, for these purposes only, to be considered as part of the above-described safety devices and safeguards. The bill would require the provider, once the provider has obtained the protective gear, to make the protective gear readily available for the requesting employee to use when responding to an emergency call, and to provide training to that employee on the proper fitting and use of the protective gear, as specified. The bill would require an emergency ambulance provider to inform each emergency ambulance employee, upon initial employment and subsequently on an annual basis, of the employee's right to request multithreat body protective gear.

AB 389 **(Grayson D) Ambulance services.**
Current Text: Chaptered: 10/5/2021 html pdf
Introduced: 2/2/2021
Last Amend: 9/3/2021
Status: 10/4/2021-Approved by the Governor. Chaptered by Secretary of State - Chapter 460, Statutes of 2021.
Location: 10/4/2021-A. CHAPTERED
Summary: The Prehospital Emergency Medical Care Personnel Act authorizes a local EMS agency to create one or more exclusive operating areas in the development of a local plan, if a competitive process is utilized to select the provider of the services pursuant to the plan, except as specified. This bill would specify that a county is authorized to contract for emergency ambulance services with a fire agency, as defined, that will provide those services, in whole or in part, through a written subcontract with a private ambulance service.

AB 450 **(Gonzalez, Lorena D) Paramedic Disciplinary Review Board.**
Current Text: Chaptered: 10/5/2021 html pdf
Introduced: 2/8/2021
Last Amend: 9/3/2021
Status: 10/4/2021-Approved by the Governor. Chaptered by Secretary of State - Chapter 463, Statutes of 2021.
Location: 10/4/2021-A. CHAPTERED

Summary: Would create the Paramedic Disciplinary Review Board to act on appeals regarding the Emergency Medical Services Authority's denial of licensure and decision to impose licensure action on and after January 1, 2023. The bill would specify the composition and appointment of the 7-member board. The bill would require the employer of a paramedic to report to the director of the authority and the board regarding the suspension or termination of a paramedic for cause within 72 hours of the event, and would require the board to consider employer-imposed discipline and other criteria to aid it in making a final determination regarding appeals of licensure action. The duties and activities of the board would be funded, upon appropriation by the Legislature, by the Emergency Medical Services Personnel Fund.

Total Measures: 3

Track

AB 6 **(Levine D) Health facilities: pandemics and emergencies: best practices.**
Current Text: Introduced: 12/7/2020 html pdf
Introduced: 12/7/2020
Status: 5/25/2021-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. SUSPENSE FILE on 4/21/2021)(May be acted upon Jan 2022)
Location: 5/25/2021-A. 2 YEAR
Summary: Would require, by July 1, 2022, the State Department of Public Health and the State Department of Social Services to collaborate to create health and safety guidelines and a description of best practices for use by skilled nursing facilities, intermediate care facilities, and congregate living health facilities that are providing post-acute care during a pandemic, public health crisis, or other emergency.

AB 225 **(Gray D) Department of Consumer Affairs: boards: veterans: military spouses: licenses.**
Current Text: Amended: 6/28/2021 html pdf
Introduced: 1/11/2021
Last Amend: 6/28/2021
Status: 7/14/2021-Failed Deadline pursuant to Rule 61(a)(11). (Last location was B., P. & E.D. on 6/9/2021)(May be acted upon Jan 2022)
Location: 7/14/2021-S. 2 YEAR
Summary: Current law requires specified boards within the Department of Consumer Affairs to issue, after appropriate investigation, certain types of temporary licenses to an applicant if the applicant meets specified requirements, including that the applicant supplies evidence satisfactory to the board that the applicant is married to, or in a domestic partnership or other legal union with, an active duty member of the Armed Forces of the United States who is assigned to a

duty station in this state under official active duty military orders and the applicant holds a current, active, and unrestricted license that confers upon the applicant the authority to practice, in another state, district, or territory of the United States, the profession or vocation for which the applicant seeks a temporary license from the board. This bill would expand the eligibility for a temporary license to an applicant who meets the specified criteria and who supplies evidence satisfactory to the board that the applicant is a veteran of the Armed Forces of the United States within 60 months of separation from active duty under other than dishonorable conditions, a veteran of the Armed Forces of the United States within 120 months of separation from active duty under other than dishonorable conditions and a resident of California prior to entering into military service, or an active duty member of the Armed Forces of the United States with official orders for separation within 90 days underother than dishonorable conditions.

AB 240 **(Rodriguez D) Local health department workforce assessment.**
Current Text: Amended: 6/21/2021 html pdf
Introduced: 1/13/2021
Last Amend: 6/21/2021
Status: 8/27/2021-Failed Deadline pursuant to Rule 61(a)(12). (Last location was APPR. SUSPENSE FILE on 7/5/2021)(May be acted upon Jan 2022)
Location: 8/27/2021-S. 2 YEAR
Summary: This bill would require the State Department of Public Health to contract with an appropriate and qualified entity to conduct an evaluation of the adequacy of the local health department infrastructure and to make recommendations for future staffing, workforce needs, and resources, in order to accurately and adequately fund local public health. The bill would exempt the department from specific provisions relating to public contracting with regard to this requirement. The bill would require the department to report the findings and recommendations of the evaluation to the appropriate policy and fiscal committees of the Legislature on or before July 1, 2024. The bill would also require the department to convene an advisory group, composed of representatives from public, private, and tribal entities, as specified, to provide input on the selection of the entity that would conduct the evaluation.

AB 370 **(Arambula D) Ambulatory surgical centers.**
Current Text: Amended: 4/15/2021 html pdf
Introduced: 2/1/2021
Last Amend: 4/15/2021
Status: 5/25/2021-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. SUSPENSE FILE on 4/28/2021)(May be acted upon Jan 2022)
Location: 5/25/2021-A. 2 YEAR
Summary: Would enact the California Outpatient Cardiology Patient Safety, Cost Reduction, and Quality Improvement Act. The bill would authorize the State Department of Public Health, within the PCI Program, to certify an ambulatory

surgical center to provide elective cardiac catheterization laboratory services that meet certain requirements to perform scheduled, elective percutaneous transluminal coronary angioplasty and stent placement for eligible patients. The bill would authorize the department to, among other things, charge a certified ambulatory surgical center a fee for the reasonable regulatory costs to the state incident to granting this certification and to retain experts or establish one or more committees to analyze reports and advise the department, as specified.

AB 489 **(Smith R) Medicine.**
Current Text: Introduced: 2/8/2021 html pdf
Introduced: 2/8/2021
Status: 5/7/2021-Failed Deadline pursuant to Rule 61(a)(3). (Last location was PRINT on 2/8/2021)(May be acted upon Jan 2021)
Location: 5/7/2021-A. 2 YEAR
Summary: Current law, the Medical Practice Act, provides for the regulation of the practice of medicine and defines the term "licensee" for these purposes.This bill would make nonsubstantive changes to that definition.

AB 536 **(Rodriguez D) Office of Emergency Services: mutual aid gap analysis.**
Current Text: Introduced: 2/10/2021 html pdf
Introduced: 2/10/2021
Status: 8/27/2021-Failed Deadline pursuant to Rule 61(a)(12). (Last location was APPR. SUSPENSE FILE on 7/15/2021)(May be acted upon Jan 2022)
Location: 8/27/2021-S. 2 YEAR
Summary: Would require the Office of Emergency Services to prepare a gap analysis of the state's mutual aid systems on a biennial basis, beginning on January 1, 2022. The bill would require the gap analysis to be prepared as specified and would require the gap analysis to be provided to specified committees of the Legislature no later than February 1, 2022, and by February 1 thereafter on a biennial basis.

AB 662 **(Rodriguez D) Mental health: dispatch and response protocols: working group.**
Current Text: Amended: 4/28/2021 html pdf
Introduced: 2/12/2021
Last Amend: 4/28/2021
Status: 6/4/2021-Failed Deadline pursuant to Rule 61(a)(8). (Last location was INACTIVE FILE on 6/3/2021)(May be acted upon Jan 2022)
Location: 6/4/2021-A. 2 YEAR
Summary: Would require the California Health and Human Services Agency to convene a working group, as specified, no later than July 1, 2022, to examine the existing dispatch and response protocols when providing emergency medical services to an individual who may require evaluation and treatment for a mental health disorder. The bill would require the working group to develop

recommendations for improvements to those dispatch and response protocols and recommend amendments to existing law, including, but not limited to, the provisions governing involuntarily taking an individual into temporary custody for a mental health evaluation and treatment. The bill would require the working group to submit periodic reports to the Legislature every 6 months to update the Legislature on its progress, and to submit a final report of its recommendations to the Legislature on or before January 1, 2024.

AB 793 **(Nazarian D) Critical care facilities.**
Current Text: Introduced: 2/16/2021 html pdf
Introduced: 2/16/2021
Status: 5/7/2021-Failed Deadline pursuant to Rule 61(a)(3). (Last location was PRINT on 2/16/2021)(May be acted upon Jan 2021)
Location: 5/7/2021-A. 2 YEAR
Summary: Current law requires the Emergency Medical Services Authority to develop and implement guidelines that address designated components for emergency medical services systems. Current law allows the authority to establish guidelines for hospital facilities according to critical care capabilities in cooperation with affected medical organizations. This bill would make a technical, nonsubstantive change to this provision.

AB 805 **(Maienschein D) Personal protective equipment: distribution reports.**
Current Text: Introduced: 2/16/2021 html pdf
Introduced: 2/16/2021
Status: 5/25/2021-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. SUSPENSE FILE on 4/21/2021)(May be acted upon Jan 2022)
Location: 5/25/2021-A. 2 YEAR
Summary: Current law authorizes the county health officer and the local Emergency Medical Services (EMS) agency administrator in each operational area to act jointly as the medical health operational area coordinator (MHOAC) or to jointly appoint another person to fulfill those responsibilities. This bill would require, during a health-related state of emergency in California proclaimed by the President of the United States or by the Governor, the MHOAC to report specified information relating to the distribution of personal protective equipment, as defined, to the Office of Emergency Services on a weekly basis. The bill would require, at all other times, the MHOAC to report that information on a monthly basis. The bill would require the medical and health disaster plan to include this reporting, as specified.

AB 1026 **(Smith R) Business licenses: veterans.**
Current Text: Introduced: 2/18/2021 html pdf
Introduced: 2/18/2021
Status: 5/25/2021-Failed Deadline pursuant to Rule 61(a)(5). (Last location was

APPR. SUSPENSE FILE on 5/5/2021)(May be acted upon Jan 2022)
Location: 5/25/2021-A. 2 YEAR
Summary: Would require the Department of Consumer Affairs and any board within the department to grant a 50% fee reduction for an initial license to an applicant who provides satisfactory evidence, as defined, the applicant has served as an active duty member of the United States Armed Forces or the California National Guard and was honorably discharged. This bill would authorize a board to adopt regulations necessary to administer these provisions.

AB 1044 **(Rodriguez D) Office of Emergency Services: COVID-19 Pandemic after-action report.**
Current Text: Amended: 3/30/2021 html pdf
Introduced: 2/18/2021
Last Amend: 3/30/2021
Status: 9/10/2021-Failed Deadline pursuant to Rule 61(a)(15). (Last location was EMERGENCY MANAGEMENT on 3/4/2021)(May be acted upon Jan 2022)
Location: 9/10/2021-A. 2 YEAR
Summary: Would require the Office of Emergency Services, on or before September 30, 2021, to review, and make recommendations to the Legislature and the California congressional delegation on, how to enhance the effectiveness of the Strategic National Stockpile, the federal Defense Production Act of 1950, the California stockpile of personal protection equipment, and the procurement of personal protective equipment as part of its COVID-19 Pandemic after- action report.This bill would declare that it is to take effect immediately as an urgency statute.

AB 1071 **(Rodriguez D) Office of Emergency Services: tabletop exercises.**
Current Text: Amended: 6/28/2021 html pdf
Introduced: 2/18/2021
Last Amend: 6/28/2021
Status: 9/10/2021-Failed Deadline pursuant to Rule 61(a)(15). (Last location was APPR. SUSPENSE FILE on 7/15/2021)(May be acted upon Jan 2022)
Location: 9/10/2021-S. 2 YEAR
Summary: Current law establishes the Office of Emergency Services (OES) within the office of the Governor and sets forth its powers and duties relating to responsibility over the state's emergency and disaster response services for natural, technological, or manmade 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. This bill would require OES to biennially convene key personnel and agencies that have emergency management roles and responsibilities to participate in tabletop exercises in which the participant's emergency preparedness plans are discussed and evaluated under various simulated catastrophic disaster situations, as specified.

AB 1131 **(Wood D) Health information network.**
Current Text: Amended: 3/29/2021 html pdf
Introduced: 2/18/2021
Last Amend: 3/29/2021
Status: 5/25/2021-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. SUSPENSE FILE on 4/28/2021)(May be acted upon Jan 2022)
Location: 5/25/2021-A. 2 YEAR
Summary: Would establish the statewide health information network (statewide HIN) governing board, an independent public entity not affiliated with an agency or department with specified membership, to provide the data infrastructure needed to meet California's health care access, equity, affordability, public health, and quality goals, as specified. The bill would require the governing board to issue a request for proposals to select an operating entity with specified minimum capabilities to support the electronic exchange of health information between, and aggregate and integrate data from multiple sources within, the State of California, among other responsibilities. The bill would require the statewide HIN to take specified actions with respect to reporting on, and auditing the security and finances of, the health information network.

AB 1217 **(Rodriguez D) Personal protective equipment: stockpile.**
Current Text: Amended: 4/8/2021 html pdf
Introduced: 2/19/2021
Last Amend: 4/8/2021
Status: 5/25/2021-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. SUSPENSE FILE on 5/12/2021)(May be acted upon Jan 2022)
Location: 5/25/2021-A. 2 YEAR
Summary: Would authorize the State Department of Public Health to rotate PPE in the stockpile by selling the PPE to a nonprofit agency, local government, or provider, and by contracting to purchase PPE on behalf of a local government or provider. The bill would require a nonprofit agency, local government, or provider that obtains PPE pursuant to these provisions to reimburse the department for the costs of the PPE. The bill would also make a technical change to the date in these provisions.

AB 1229 **(Rodriguez D) Advisory task force: ambulance services.**
Current Text: Amended: 4/19/2021 html pdf
Introduced: 2/19/2021
Last Amend: 4/19/2021
Status: 9/10/2021-Failed Deadline pursuant to Rule 61(a)(15). (Last location was APPR. SUSPENSE FILE on 5/12/2021)(May be acted upon Jan 2022)
Location: 9/10/2021-A. 2 YEAR
Summary: Would require the Director of the Emergency Medical Services Authority to appoint and convene an advisory task force, and would further require the

director to recommend a project plan for the advisory task force that includes an evaluation relating to ambulance patient offload delays due to the COVID-19 pandemic, as specified, and an evaluation of adopting technologies to allow EMS systems to better manage resources and improve response times. The bill would require the director to transmit the evaluations conducted by the advisory task force to the authority, in a manner that allows for their timely inclusion in an existing reporting requirement from the authority to the Commission on Emergency Medical Services, and to specified legislative committees.

AB 1231 **(Levine D) Health information exchange: demonstration projects.**
Current Text: Introduced: 2/19/2021 html pdf
Introduced: 2/19/2021
Status: 5/7/2021-Failed Deadline pursuant to Rule 61(a)(3). (Last location was PRINT on 2/19/2021)(May be acted upon Jan 2021)
Location: 5/7/2021-A. 2 YEAR
Summary: Current law authorizes the California Health and Human Services Agency, through the Office of Health Information Integrity, to establish and administer demonstration projects to evaluate potential solutions to facilitate health information exchange that promote quality of care, respect the privacy and security of personal health information, and enhance the trust of the stakeholders. Current law specifies potential demonstration project subject areas and criteria for project selection. Current law requires demonstration project participants to submit reports to the office on the outcome of the demonstration projects, as prescribed. This bill would make technical, nonsubstantive changes to those provisions.

AB 1234 **(Arambula D) Physician Orders for Life Sustaining Treatment forms: registry.**
Current Text: Amended: 4/8/2021 html pdf
Introduced: 2/19/2021
Last Amend: 4/8/2021
Status: 4/30/2021-Failed Deadline pursuant to Rule 61(a)(2). (Last location was HEALTH on 3/4/2021)(May be acted upon Jan 2022)
Location: 4/30/2021-A. 2 YEAR
Summary: Current law defines a request regarding resuscitative measures as a written document, signed by an individual with capacity, or a legally recognized health care decisionmaker, and the individual's physician, directing a health care provider regarding resuscitative measures. Current law defines a Physician Orders for Life Sustaining Treatment form, which is commonly referred to as a POLST form, and provides that a request regarding resuscitative measures includes a POLST form. Current law requires that a POLST form and the medical intervention and procedures offered by the form be explained by a health care provider. Current law distinguishes a request regarding resuscitative measures from an advance health care directive. This bill would establish similar provisions relating to the validity and enforceability of POLST forms and would allow an electronic signature to be used for the purposes of an advance health care directive and POLST form.

AB 1254 **(Gipson D) Health care coverage: mobile stroke units.**
Current Text: Introduced: 2/19/2021 html pdf
Introduced: 2/19/2021
Status: 4/30/2021-Failed Deadline pursuant to Rule 61(a)(2). (Last location was HEALTH on 3/4/2021)(May be acted upon Jan 2022)
Location: 4/30/2021-A. 2 YEAR
Summary: Would require a health care service plan or a health insurance policy that is issued, amended, or renewed on or after January 1, 2022, that provides coverage for emergency health care services to include coverage for services performed by a mobile stroke unit, as defined by the bill.

AB 1441 **(Cervantes D) Emergency services: emergency plans: critically ill newborn infants.**
Current Text: Amended: 5/24/2021 html pdf
Introduced: 2/19/2021
Last Amend: 5/24/2021
Status: 8/27/2021-Failed Deadline pursuant to Rule 61(a)(12). (Last location was APPR. SUSPENSE FILE on 7/15/2021)(May be acted upon Jan 2022)
Location: 8/27/2021-S. 2 YEAR
Summary: Current law requires a county, upon the next update to its emergency plan, to integrate access and functional needs into its emergency plan, as specified. Current law provides a county with specified powers and duties for the purpose of enrolling residents from the access and functional needs population in a local public emergency warning system, as specified. Current law provides that "access and functional needs population" for purposes of these provisions consists of individuals who have developmental or intellectual disabilities, physical disabilities, chronic conditions, injuries, limited English proficiency or who are non-English speaking, older adults, children, people living in institutionalized settings, or those who are low income, homeless, or transportation disadvantaged, including, but not limited to, those who are dependent on public transit or those who are pregnant. This bill, additionally, would include critically ill newborn infants in the "access and functional needs population" for those purposes. .

AB 1488 **(Cervantes D) Emergency services: local government: access and functional needs: medical equipment.**
Current Text: Amended: 4/14/2021 html pdf
Introduced: 2/19/2021
Last Amend: 4/14/2021
Status: 5/25/2021-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. SUSPENSE FILE on 5/5/2021)(May be acted upon Jan 2022)
Location: 5/25/2021-A. 2 YEAR
Summary: Existing law requires a county, upon the next update to its emergency plan, to integrate access and functional needs into its emergency plan by

addressing, at a minimum, how the access and functional needs population is served by, among other things, emergency evacuation, including the identification of certain transportation resources and resources for individuals who are dependent on public transportation. Thisb bill would require the emergency plan to include a plan for the movement, storage, acquisition, and deployment of durable medical equipment, as defined, to address how the access and functional needs population is served by emergency evacuation.

AB 1513 **(Wood D) Health facilities.**
Current Text: Introduced: 2/19/2021 html pdf
Introduced: 2/19/2021
Status: 5/7/2021-Failed Deadline pursuant to Rule 61(a)(3). (Last location was PRINT on 2/19/2021)(May be acted upon Jan 2021)
Location: 5/7/2021-A. 2 YEAR
Summary: Current law requires the State Department of Public Health to license and regulate each health facility, defined to mean a facility, place, or building that is organized, maintained, and operated for the diagnosis, care, prevention, and treatment of human illness, and includes, among others, a general acute care hospital, an acute psychiatric hospital, and a skilled nursing facility.This bill would make technical, nonsubstantive changes to the definition of "health facility" for these purposes.

AB 1518 **(Kiley R) Health care service plan licensing.**
Current Text: Introduced: 2/19/2021 html pdf
Introduced: 2/19/2021
Status: 5/7/2021-Failed Deadline pursuant to Rule 61(a)(3). (Last location was PRINT on 2/19/2021)(May be acted upon Jan 2021)
Location: 5/7/2021-A. 2 YEAR
Summary: Current 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. Current law exempts a health care service plan from required licensure if it provides only emergency ambulance services or advanced life support services, or both, and is operated by a state or local governmental entity.This bill would make a technical, nonsubstantive change to that provision.

AB 1571 **(Committee on Jobs, Economic Development, and the Economy) Administrative Procedure Act: small businesses.**
Current Text: Amended: 4/6/2021 html pdf
Introduced: 3/4/2021
Last Amend: 4/6/2021
Status: 9/10/2021-Failed Deadline pursuant to Rule 61(a)(15). (Last location was APPR. SUSPENSE FILE on 5/12/2021)(May be acted upon Jan 2022)

Location: 9/10/2021-A. 2 YEAR
Summary: Would require, in complying with specified requirements related to adverse economic impacts on California business enterprises and as related to the proposed adoption, amendment, or repeal of a regulation that applies to a small business, as defined, located within an area in which the Governor has declared a state of emergency, the regulation to include (1) a postponement in the application of the regulation on small businesses until the state of emergency is terminated; (2) findings that postponement is not appropriate, that the administrative regulation is necessary to address the state of emergency, as confirmed by the Office of Emergency Services, and that the regulation provides sufficient time to provide reasonable notice to affected small businesses as to the content of the regulation and the time to meet the new requirements; or (3) findings that postponement is not appropriate, that the administrative regulation is necessary to address a serious and immediate health and safety issue, as confirmed by the State Department of Public Health or the Labor and Workforce Development Agency, and that the regulation provides sufficient time to provide reasonable notice to affected small businesses as to the content of the regulation and the time to meet the new requirements.

SB 57 **(Wiener D) Controlled substances: overdose prevention program.**
Current Text: Amended: 7/5/2021 html pdf
Introduced: 12/7/2020
Last Amend: 7/5/2021
Status: 7/14/2021-Failed Deadline pursuant to Rule 61(a)(11). (Last location was HEALTH on 5/28/2021)(May be acted upon Jan 2022)
Location: 7/14/2021-A. 2 YEAR
Summary: Would, until January 1, 2027, authorize the City and County of San Francisco, the County of Los Angeles, the City of Los Angeles, and the City of Oakland to approve entities to operate overdose prevention programs for persons that satisfy specified requirements, including, among other things, providing a hygienic space supervised by trained staff where people who use drugs can consume preobtained drugs, providing sterile consumption supplies, providing access or referrals to substance use disorder treatment, and that program staff be authorized and trained to provide emergency administration of an opioid antagonist, as defined by existing law.

SB 213 **(Cortese D) Workers' compensation: hospital employees.**
Current Text: Amended: 3/4/2021 html pdf
Introduced: 1/12/2021
Last Amend: 3/4/2021
Status: 6/4/2021-Failed Deadline pursuant to Rule 61(a)(8). (Last location was INACTIVE FILE on 6/3/2021)(May be acted upon Jan 2022)
Location: 6/4/2021-S. 2 YEAR
Summary: Current law, until January 1, 2023, creates a rebuttable presumption of

injury for various employees, including an employee who works at a health facility, as defined, to include an illness or death resulting from COVID-19, if specified circumstances apply. This bill would define "injury," for a hospital employee who provides direct patient care in an acute care hospital, to include infectious diseases, cancer, musculoskeletal injuries, post-traumatic stress disorder, and respiratory diseases. The bill would create rebuttable presumptions that these injuries that develop or manifest in a hospital employee who provides direct patient care in an acute care hospital arose out of and in the course of the employment. The bill would extend these presumptions for specified time periods after the hospital employee's termination of employment. Beginning January 1, 2023, the bill would include COVID-19 in the definitions of infectious and respiratory diseases.

SB 284 **(Stern D) Workers' compensation: firefighters and peace officers: post-traumatic stress.**
Current Text: Amended: 8/30/2021 html pdf
Introduced: 2/1/2021
Last Amend: 8/30/2021
Status: 9/10/2021-Failed Deadline pursuant to Rule 61(a)(15). (Last location was INACTIVE FILE on 8/30/2021)(May be acted upon Jan 2022)
Location: 9/10/2021-A. 2 YEAR
Summary: Current law, under the workers' compensation system, provides, only until January 1, 2025, that, for certain state and local firefighting personnel and peace officers, the term "injury" includes post-traumatic stress that develops or manifests during a period in which the injured person is in the service of the department or unit, but applies only to injuries occurring on or after January 1, 2020. Existing law requires the compensation awarded pursuant to this provision to include full hospital, surgical, medical treatment, disability indemnity, and death benefits. This bill would make that provision applicable to active firefighting members of the State Department of State Hospitals, the State Department of Developmental Services, the Military Department, and the Department of Veterans Affairs, and to additional peace officers, including security officers of the Department of Justice when performing assigned duties as security officers and the officers of a state hospital under the jurisdiction of the State Department of State Hospitals or the State Department of Developmental Services, among other officers.

SB 371 **(Caballero D) Health information technology.**
Current Text: Amended: 5/20/2021 html pdf
Introduced: 2/10/2021
Last Amend: 5/20/2021
Status: 7/14/2021-Failed Deadline pursuant to Rule 61(a)(11). (Last location was HEALTH on 6/3/2021)(May be acted upon Jan 2022)
Location: 7/14/2021-A. 2 YEAR
Summary: Would require any federal funds the California Health and Human

Services Agency receives for health information technology and exchange to be deposited in the California Health Information Technology and Exchange Fund. The bill would authorize CHHSA to use the fund to provide grants to health care providers to implement or expand health information technology and to contract for direct data exchange technical assistance for safety net providers. The bill would require a health information organization to be connected to the California Trusted Exchange Network and to a qualified national network. The bill would also require a health care provider, health system, health care service plan, or health insurer that engages in health information exchange to comply with specified federal standards.

SB 687 **(Hueso D) Emergency response: trauma kits.**
Current Text: Amended: 6/16/2021 html pdf
Introduced: 2/19/2021
Last Amend: 6/16/2021
Status: 8/27/2021-Failed Deadline pursuant to Rule 61(a)(12). (Last location was APPR. SUSPENSE FILE on 8/19/2021)(May be acted upon Jan 2022)
Location: 8/27/2021-A. 2 YEAR
Summary: Current law exempts from civil liability any person who, in good faith and not for compensation, renders emergency medical or nonmedical care or assistance at the scene of an emergency other than an act or omission constituting gross negligence or willful or wanton misconduct. Current law exempts public or private organizations that sponsor, authorize, support, finance, or supervise the training of people, or certifies those people in emergency medical services, from liability for civil damages alleged to result from those training programs. This bill would define "trauma kit" to mean a first aid response kit that contains specified items, including, among other things, a tourniquet. The bill would require a person or entity that supplies a trauma kit to provide the person or entity that acquires the trauma kit with all information governing the use, installation, operation, training, and maintenance of the trauma kit.

Total Measures: 28