
SENATE COMMITTEE ON APPROPRIATIONS

Senator Anthony Portantino, Chair
2021 - 2022 Regular Session

AB 1585 (Committee on Health) - Health care

Version: April 5, 2021

Urgency: No

Hearing Date: June 21, 2021

Policy Vote: HEALTH 10 - 0

Mandate: Yes, nonreimbursable

Consultant: Karen French

Bill Summary: AB 1585 revises the requirement that skilled nursing facilities have a dedicated infection preventionist to allow a broader range of health care professionals to serve in this capacity provided they are qualified and have completed specialized training in infection prevention and control, and extends the deadline, to January 1, 2022, by which the Department of Health Care Services is required to adopt regulations governing California Children's Services Whole Child Model.

Fiscal Impact: According to the Assembly Appropriations Committee, cost pressure to the California Department of Public Health over three years, not likely to exceed \$100,000 per year, to issue regulations implementing education and training for IPs (Licensing and Certification Fund).

Background: According to the author, this bill is intended to clarify language from AB 2644 (Wood, Chapter 287, Statutes of 2020). The current definition of an IP only applies to those working in SNFs, however, the language would inadvertently prevent some IPs currently employed by hospitals or other health facilities from seeking employment in a SNF, for example a person with a Master's degree in Public Health who is also a trained IP. In addition, this bill contains a provision from the DHCS-proposed trailer bill language (TBL) extending a past due date by which regulations have to be adopted for the CCS WCM for the purpose of reducing the volume of proposed TBL that is part of DHCS' proposed California Advancing and Innovating Medi-Cal (CalAIM) initiative.

Proposed Law:

- 1) Deletes the requirement that the IP that a SNF is required to employ be a registered nurse or a licensed vocational nurse, and instead requires the IP to meet the following requirements:
 - a) Have a primary professional training as a licensed nurse, medical technologist, microbiologist, epidemiologist, public health professional, or other health care related field;
 - b) Be qualified by education, training, clinical or health care experience, or certification; and,
 - c) Have completed specialized training in infection prevention and control.
- 2) Extends the deadline, from July 1, 2020 to January 1, 2022, by which DHCS is required to adopt regulations governing CCS WCM.

Related Legislation: AB 2644 (Wood, Chapter 287, Statutes of 2020) requires a SNF, during a declared emergency related to a communicable disease, to report each disease-related death within 24 hours. Requires SNFs to have a full-time IP, and prohibits a long-term care facility from preventing a representative of the Long-Term

Care Ombudsman Program from entering the facility in the event of a declared emergency.

AB 1688 (Committee on Health, Chapter 511, Statutes of 2017) requires DHCS to provide a report on the CCS WCM by the later of January 1, 2021, or three years from the date when all counties in which DHCS is authorized to establish the WCM program are fully operational, instead of by January 1, 2021, under prior law.

SB 586 (Hernandez, Chapter 625, Statutes of 2015) authorized the WCM for children enrolled in both CCS and Medi-Cal in 21 counties where both Medi-Cal and most CCS services would be covered by the MCMC.

Staff Comments: The California Association for Professionals in Infection Control & Epidemiology (APIC) states in support that while California APIC supports the requirement of a dedicated IP for SNFs, the nursing-exclusive parameters defined in existing law do not align with the full range of backgrounds and training of IPs. California APIC states that this bill will bring the requirement for an UIP in line with APIC, the CDC, and the Certification Board for Infection Control & Epidemiology qualifications for IPs. This bill will expand access to a broader range of qualified IPs.

Proposed Author Amendments: None

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