Date of Hearing: May 17, 2023

ASSEMBLY COMMITTEE ON APPROPRIATIONS Chris Holden, Chair

AB 1005 (Alvarez) – As Amended April 18, 2023

Policy Committee: Human Services Vote: 7 - 0

Urgency: No State Mandated Local Program: Yes Reimbursable: Yes

SUMMARY:

This bill requires a patient diagnosed with a terminal illness to be provided with certain information about the in-home supportive services (IHSS) program prior to being discharged, requires a health care provider to provide and complete certain information for purposes of aiding the individual to apply to the IHSS program, and enumerates the process by which a terminally ill patient can elect to have the application expedited by a county human services department.

Specifically, this bill:

- 1) Requires, before the discharge of a patient diagnosed with a terminal illness, the diagnosing healthcare provider to ask the patient, or another person authorized to make health care decisions for the patient, if they are interested in receiving information about the IHSS program. If the patient or authorized person expresses interest, the diagnosing health care provider must provide the information, including the IHSS eligibility criteria and the option for a family member to provide care as an IHSS provider subject to the IHSS provider enrollment.
- 2) Requires, if a patient or authorized person expresses interest in receiving the IHSS information, the health care provider to provide the patient or authorized person with a physical application for the IHSS program, and to inform the patient or authorized person of the option for the health care provider to send a digital copy of the application if the patient or authorized person identifies a family member whom they would like to be the patient's IHSS provider.
- 3) Requires, if the patient seeks to apply for services under the IHSS program, the health care provider to provide a copy of the health care certification form and to complete the health care providers' portion of that form before the patient's discharge.
- 4) Permits, a patient who is diagnosed with a terminal illness and seeks to apply for services under the IHSS program and receive a healthcare certification form, to elect to have the application process expedited by the county according to all of the following requirements:
 - a) The IHSS application and the health care certification form must be submitted and processed before the patient is discharged by the health care provider who diagnosed the patient with a terminal illness.

- b) The health care certification must be either approved or denied within one business day after the county receives the form.
- c) If the patient is approved for IHSS services, the county welfare department or its designee must prioritize the patient with regard to assigning and providing an IHSS provider.
- d) If the patient becomes an IHSS recipient, they must be guaranteed a total number hours of IHSS, as a preliminary allotment, as deemed appropriate by the county welfare department until a final determination is made based on the needs assessment.
- e) In determining the total number of hours as a preliminary allotment, the country welfare department must consider the terminal illness diagnosis of the patient, any other relevant information available to the county at that point about the patient's individualized circumstances, and the county's available IHSS resources. The number of hours may not exceed the applicable maximum limit of hours under current law.
- 5) Requires the provisions of this bill pertaining to a streamlined IHSS application process be implemented only to the extent necessary federal approvals are obtained and federal financial participation is available for the purposes of providing IHSS.

FISCAL EFFECT:

Local costs to counties, one-time and ongoing, to establish and administer a process for prioritizing IHSS applications. These costs are unknown, but likely greater than \$150,000 statewide. These costs are potentially reimbursable by the state, subject to a determination by the Commission on State Mandates.

COMMENTS:

1) **Purpose.** The author seeks to ensure patients with a terminal illness have adequate access to the end-of-life care and services for which they may be eligible. According to the author:

Receiving a terminal diagnosis is a challenging moment for the patient and their friends and family. Recognizing this difficulty, the state offers resources and support to ensure that patients' end of life care makes them as comfortable as possible. One of these resources is the In-Home Supportive Services program, in which an eligible patient is assigned an IHSS provider who assists them with daily tasks. This important resource is offered to terminal and non-terminal patients. Despite having radically different timelines, terminal and non-terminal patients are put through the same process. [This bill] expedites the process for terminal patients so that we mitigate the possibility of the process outliving them.

2) **Background.** *In-Home Supportive Services Program.* Eligible low-income individuals in California who are at least 65 years old, living with disabilities, or blind, may access services through the IHSS program that enable them to remain in their own homes. IHSS program providers are paid to assist with personal care services (such as bathing, toileting, and grooming), domestic and related services (meal preparation, housecleaning, and the like), paramedical services, and protective supervision. There are currently over 593,000

Californians who receive IHSS; over 98% of these individuals receive IHSS services as a Medicaid benefit.

The California Department of Social Services (CDSS) oversees the IHSS program, but it is administered at the county level. Once individuals apply for IHSS, they are assessed by a county social worker for eligibility and need. If an individual is determined to be eligible for IHSS, they are authorized for certain services and for a specified number of hours of care per week. IHSS clients self-direct their care, which allows them to choose and hire their own provider, including friends and family.

When applying, IHSS applicants must submit a completed Health Care Certification Form with information provided by the individual's licensed healthcare professional. This bill requires, prior to the discharge of a patient diagnosed with a terminal illness, the healthcare provider to give the patient or other qualified individual an IHSS application if they are interested and, if the patient seeks to apply for the IHSS program, requires the health care provider to provide a copy of, and complete the necessary portion of the certification form.

Hospital discharge planning. State law requires every hospital to have a written discharge planning policy and process. Hospitals are required to make arrangements for post-hospital care which includes care at home, in a skilled nursing facility, or intermediate care facility, and made prior to discharge for patients who are likely to suffer adverse health consequences upon discharge if there is no adequate discharge planning. The discharge planner is typically someone who is knowledgeable about post-hospital care programs, such as IHSS. Among the discharge information required to be given is information regarding IHSS services. This bill requires the diagnosing physician, rather than a discharge planner, to provide IHSS information to the patient.

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