

CONCURRENCE IN SENATE AMENDMENTS

AB 843 (Garcia)

As Amended September 5, 2025

Majority vote

SUMMARY

Requires a health care service plan or health insurer to take reasonable steps to provide meaningful access to each individual with limited English proficiency (LEP), including companions with LEP, eligible to receive services or likely to be directly affected by the plan or insurer's programs and activities.

Senate Amendments

- 1) Require health plans and insurers to notify persons seeking coverage of its policy of nondiscrimination, including the existing law notification requirements that currently apply to enrollees of plans and insurers and members of the public regarding language assistance services (including oral interpretation and translated written materials), auxiliary aids and services (including qualified interpreters), the availability of grievance procedures, and how to file a discrimination complaint with the plan or insurer and federal Department of Health and Human Services Office for Civil Rights.
- 2) Require health plans and insurers to incorporate a notice that contains a statement indicating the health plan and health insurer provides language assistance services into specified written communications or forms, whether delivered by mail, electronically, or by other means when the plan or insurer provides these written communications for forms.
- 3) Allow health plan and health insurer communications related to a public health emergency that are delivered by text message, including short message service (SMS) or multimedia messaging service (MMS) to incorporate the notice of language assistance services (oral interpretation and translated written materials) by referencing a uniform resource locator (URL) linked to the information.
- 4) Delete provisions in the Assembly-approved version of this bill deeming a plan or insurer to be in compliance with the existing law requirements described in 1) above and the additional requirements of this bill if the plan or insurer provides the option to opt out and the enrollee elects that option.
- 5) Delete references to "civil penalty" and replace it with an "administrative penalty."

COMMENTS

California is home to 25% of people with LEP in the United States age five and older. According to California's Department of Health Care Access and Information (HCAI) out of the 16 million patient encounters statewide in 2021, patients in more than two million encounters preferred a language other than English. HCAI states that effective communication is critical for a successful relationship between patients and their providers, and communicating in the same language, even through an interpreter, is essential for reducing misdiagnoses and complications. Furthermore, patient safety and quality of care increase when patients and health care professionals speak the same language.

A 2024 California Health Care Foundation brief titled "*Language Barriers and Health Equity: The Challenges Faced by Californians with LEP*" analyzed the experiences of adults with LEP. They found that LEP is associated with significant health care challenges and disparities, including:

- 1) Economic and insurance disparities, as individuals with LEP are more likely to have lower incomes, be uninsured, or enrolled in public health insurance programs;
- 2) Health status and discrimination, with individuals with LEP often reporting fair or poor health status and experience with discrimination within the health care system;
- 3) Communication barriers, such as trouble understanding health care providers and limited access to telehealth services or a usual place to go for care; and,
- 4) Use of informal interpreters, with 29% of individuals with LEP relying on family members or friends for help understanding their doctors, and 23% unaware of their right to an interpreter.

Section 1557 of the Affordable Care Act (ACA) prevents covered entities from discriminating against certain protected groups when providing health care services, insurance coverage, and program participation. These protections took effect when the ACA was enacted in 2010, much of the law's reach has been determined by implementation guidance issued by different presidential administrations, reflecting different interpretations and priorities.

On April 27, 2024, President Biden's Department of Health and Human Services finalized their revised regulations implementing Section 1557. These regulations detail requirements for providing meaningful access to individuals with LEP, including but not limited to:

- 1) Requiring covered entities to take reasonable steps to provide meaningful access to each individual with LEP, including companions;
- 2) Requiring language assistance services to be free of charge, accurate and timely, and protect the privacy and independent decision-making of the individual with LEP;
- 3) Specifying requirements for interpreter and translation services, including video and audio remote services; and,
- 4) Prohibiting covered entities from requiring an individual with LEP from providing their own interpreter or relying on a non-qualified interpreter to facilitate communication.

Many of these federal regulations are reflected in the contents of this bill.

According to the Author

California's diversity is one of the state's greatest strengths, adding rich culture and economic prosperity to our communities. The author continues that a quarter of our State, over six and a half million individuals, have lived in the United States for less than five years and have LEP. Those with LEP struggle to understand our complex insurance system, causing them to disproportionately be uninsured and experience poorer health outcomes than those with English proficiency. The author states that in 2016 the Obama Administration adopted stronger federal language access requirements, only to be weakened by the Trump Administration in 2019. The

author argues that as a state we need to support Californians in overcoming barriers by aligning our state laws with existing federal language access protections.

Arguments in Support

Insurance Commissioner Ricardo Lara is the sponsor of this bill. Commissioner Lara states that this bill would ensure the continued application of current federal language access standards to California health insurers. These well-informed standards were developed under the nondiscrimination provisions of Section 1557 of the Affordable Care Act, with numerous stakeholders providing input through a national notice and comment process. Commissioner Lara continues that California has a significant interest in ensuring equitable access to health coverage and care for people with LEP. California's diverse communities include about 25% of the United States' LEP population. Commissioner Lara states that they may struggle to understand insurance options, compare plans, utilize coverage, or even enroll in coverage due to language barriers in the application process. By providing language assistance services, insurers can help people with LEP to understand, obtain, and use health insurance coverage appropriately. Commissioner Lara shares that growing up speaking Spanish, he was often the one translating for family at doctor's appointments and dealing with insurance paperwork—an enormous responsibility for a child, and an unfair burden for so many families across California. Commissioner Lara argues that no one should have to struggle to understand their health coverage or make critical medical decisions due to a language barrier. By modernizing our state's language access provisions and ensuring access to trained, qualified interpreters and accurate translated materials, we can break down communication barriers and improve health outcomes for millions of individuals.

Arguments in Opposition

While not in opposition, America's Health Insurance Plans, the Association of California Life and Health Insurance Companies, and the California Association of Health Plans write expressing concerns with this bill, arguing it imposes significant administrative burdens on health plans and insurers with no direct value to consumers. Under existing law, health plans and insurers provide enrollees and insureds with appropriate access to language assistance in obtaining health care services and covered benefits, including translation and interpretation for medical services. Unfortunately, this bill contains vague language, specifically as it pertains to employee training, and would be extremely burdensome and difficult to implement while also causing confusion for the people this bill seeks to assist.

FISCAL COMMENTS

According to the Senate Appropriations Committee, Department of Managed Health Care (DMHC) estimates costs of approximately \$282,000 in 2025-26, \$931,000 in 2026-27, \$890,000 in 2027-28, \$1,169,000 in 2028-29, and \$1,162,000 in 2029-30 and annually thereafter for state administration (Managed Care Fund). California Department of Insurance (CDI) estimates costs of \$15,000 in 2026-27 for state administration (Insurance Fund). Unknown potential revenues from administrative penalties.

VOTES:

ASM HEALTH: 13-0-2

YES: Bonta, Addis, Aguiar-Curry, Arambula, Carrillo, Flora, Mark González, Krell, Patel, Celeste Rodriguez, Schiavo, Sharp-Collins, Stefani

ABS, ABST OR NV: Chen, Sanchez

ASM APPROPRIATIONS: 12-0-3

YES: Wicks, Arambula, Calderon, Caloza, Elhawary, Fong, Mark González, Hart, Pacheco, Pellerin, Solache, Ta

ABS, ABST OR NV: Sanchez, Dixon, Tangipa

ASSEMBLY FLOOR: 66-1-12

YES: Addis, Aguiar-Curry, Ahrens, Alanis, Alvarez, Arambula, Ávila Farías, Bains, Bauer-Kahan, Bennett, Berman, Boerner, Bonta, Bryan, Calderon, Caloza, Carrillo, Connolly, Davies, Elhawary, Flora, Fong, Gabriel, Garcia, Gipson, Jeff Gonzalez, Mark González, Haney, Harabedian, Hart, Irwin, Jackson, Kalra, Krell, Lee, Lowenthal, McKinnor, Muratsuchi, Nguyen, Ortega, Pacheco, Papan, Patel, Pellerin, Petrie-Norris, Quirk-Silva, Ramos, Ransom, Celeste Rodriguez, Michelle Rodriguez, Rogers, Blanca Rubio, Schiavo, Schultz, Sharp-Collins, Solache, Soria, Stefani, Ta, Valencia, Wallis, Ward, Wicks, Wilson, Zbur, Rivas

NO: DeMaio

ABS, ABST OR NV: Castillo, Chen, Dixon, Ellis, Gallagher, Hadwick, Hoover, Lackey, Macedo, Patterson, Sanchez, Tangipa

UPDATED

VERSION: September 5, 2025

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FN: 0001811