UNFINISHED BUSINESS

Bill No: SB 250
Author: Ochoa Bogh (R)
Amended: 6/17/25 in Assembly
Vote: 21

SENATE HEALTH COMMITTEE: 10-0, 3/26/25
AYES: Menjivar, Valladares, Durazo, Gonzalez, Limón, Padilla, Richardson,
   Rubio, Weber Pierson, Wiener
NO VOTE RECORDED: Grove

SENATE APPROPRIATIONS COMMITTEE: 6-0, 5/23/25
AYES: Caballero, Seyarto, Cabaldon, Grayson, Richardson, Wahab
NO VOTE RECORDED: Dahle

SENATE FLOOR: 38-0, 5/29/25
AYES: Allen, Alvarado-Gil, Archuleta, Arreguín, Ashby, Becker, Blakespear,
   Cabaldon, Caballero, Cervantes, Choi, Cortese, Dahle, Durazo, Gonzalez,
   Grayson, Grove, Hurtado, Jones, Laird, McGuire, McNerney, Menjivar, Niello,
   Ochoa Bogh, Padilla, Pérez, Richardson, Rubio, Seyarto, Smallwood-Cuevas,
   Stern, Strickland, Umberg, Valladares, Wahab, Weber Pierson, Wiener
NO VOTE RECORDED: Limón, Reyes

ASSEMBLY FLOOR: 77-0, 9/4/25 - See last page for vote

SUBJECT: Medi-Cal: provider directory: skilled nursing facilities

SOURCE: California Advocates for Nursing Home Reform

DIGEST: This bill requires the Department of Health Care Services to include
skilled nursing facilities as a searchable provider type in its Medi-Cal Managed
Care Health Care Options plan selection directory website.

Assembly Amendments of 6/17/25 require the Department of Health Care Services
(DHCS) to annually update the directory above to ensure that information is
accurate and readily accessible to the public.

ANALYSIS:

Existing law:

1) Establishes the Medi-Cal program, which is administered by the Department of Health Care Services (DHCS), and under which qualified low-income individuals receive health care services. (Welfare and Institutions Code (WIC) §14000, et seq.)

2) Authorizes the DHCS Director to contract, on a bid or nonbid basis, with any qualified individual, organization, or entity to provide services to, arrange for, or case manage the care of Medi-Cal beneficiaries and establishes managed care models that DHCS contracts with in each county. (WIC §14087.3, §14089, §14087.98, §14087.967, and §14087.5)

3) Defines a Medi-Cal managed care plan (Medi-Cal plan) as any individual, organization, or entity that enters into a comprehensive risk contract with DHCS to provide covered full-scope health care services to enrolled Medi-Cal beneficiaries. (WIC §14184.101)

4) Defines a skilled nursing facility (SNF) as a health facility that provides skilled nursing care and supportive care to patients whose primary need is for availability of skilled nursing care on an extended basis. (Health and Safety Code (HSC) §1250)

5) Requires Medi-Cal plans to cover SNF services for Medi-Cal recipients as part of its contracts with DHCS. (WIC §14184.201)

6) Requires health plans, including Medi-Cal plans, to publish and maintain a provider directory with information on contracting providers that deliver health care services to the plan's enrollees, including those that accept new patients and prohibits listing or including information on a provider that is not currently under contract. Specifies SNFs as included providers. (HSC §1367.27)

7) Allows Medi-Cal recipients in counties with more than one Medi-Cal plan to enroll in any Medi-Cal plan covering the geographic area in which they reside. (WIC §14016.5, §14087.305, and §14089)

This bill requires DHCS to include SNFs as a searchable provider type in its Medi-Cal Managed Care Health Care Options plan selection directory website and

annually update the directory to ensure that information is accurate and readily accessible to the public.

Comments

According to the author of this bill:

> Navigating long-term care options can feel overwhelming, particularly for individuals who require 24/7 skilled nursing. As of November 2024, there are almost 1,200 SNFs across California, but there is no single public source for recipients looking to choose a facility that accepts a specific Medi-Cal plan or choose a Medi-Cal plan that covers a specific facility. By ensuring that the facility information DHCS already collects is publically displayed, this bill will ease barriers to accessing information for older adults and people with disabilities in their (or their caregivers) search for a facility or plan that best fits their needs.

Background

Medi-Cal Managed Care Models and Health Care Options Process. In California, the plans that are available to a Medi-Cal recipient is dependent on which county the recipient lives in: 37 counties are organized either through a single County-Organized Health System or have just one plan; 21 counties have two or more choices for recipients to choose from. When an individual applies for and qualifies for Medi-Cal, they are initially covered under Medi-Cal fee-for-service. Individuals in single-plan counties are then directly enrolled into the only Medi-Cal plan. Individuals in a multi-plan county must choose and enroll in a Medi-Cal plan within 30 days. Medi-Cal recipients that do not choose a plan within 30 days are automatically assigned to a plan by DHCS. Recipients in the 21 multi-plan counties receive information on their plan choices through the Health Care Options process, which is administered by a vendor (Maximus) that contracts with DHCS. Health Care Options sends recipients a welcome packet with information and maintains a website with plan enrollment information, including an online provider directory that allows recipients to see which plans cover which providers in their area. The online provider directory currently allows searches by the following provider types: doctor, hospital, medical clinic, dental clinic, or dentist. In addition, Kaiser plans are an option in some of the single or multi-plan counties, but enrollment in Kaiser is limited to those with a previous Kaiser enrollment, other Kaiser-enrolled family members, or who are automatically assigned to Kaiser after failing to choose a plan. Kaiser providers are not part of the Health Care Options website as this was not included in the statute authorizing DHCS to contract with them.

Inclusion of SNF services in Medi-Cal plan contracts. The Medi-Cal program provides benefits through both a fee-for-service and managed care delivery system. In Medi-Cal fee-for-service, an individual may go to any provider that contracts with DHCS; in the managed care delivery system, an individual is limited to the providers that contract with the Medi-Cal plan, subject to certain exceptions. According to a 2024 DHCS All-Plan letter, prior to the California Advancing and Innovating Medi-Cal (CalAIM) initiative, Medi-Cal managed care services varied considerably among counties depending on the managed care plan model. CalAIM sought to move Medi-Cal to a more consistent and seamless system by reducing complexity and increasing flexibility through benefit standardization. Prior to the implementation of CalAIM, coverage for SNF services varied. Prior to January 1, 2023, Medi-Cal plans operating in 27 counties covered SNF services under the institutional long-term care services benefit. In the other 31 counties, Medi-Cal plan enrollees who were in a SNF longer than one month were disenrolled from managed care and transferred to fee-for-service. Now, Medi-Cal plans in all counties must authorize and cover medically necessary SNF services. Recipients enrolled in a Medi-Cal plan will no longer be disenrolled from the plan when they need SNF services.

Related/Prior Legislation

AB 280 (Aguiar-Curry) of the current legislative session requires a health plan or insurer to annually verify and delete inaccurate listings from its provider directories; imposes administrative penalties for inaccurate provider directory listings; and, requires out-of-network services to be covered as in-network in specified circumstances due to inaccurate provider directory listings. AB 280 is pending on the Senate Floor.

FISCAL EFFECT: Appropriation: No   Fiscal Com.: Yes   Local: No

According to the Assembly Appropriations Committee the fiscal effect of this bill is no costs to DHCS. DHCS anticipates the mandated changes to the Health Care Options directory will be absorbable within the existing contract and staff workload.

SUPPORT: (Verified 9/4/2025)

California Advocates for Nursing Home Reform (source)
AARP California
Alzheimer's Association

California Long-Term Care Ombudsman Association
California Senior Legislature
County of Los Angeles
Flagstone Health
Greater Coachella Valley Chamber of Commerce
Western Center on Law & Poverty

OPPOSITION: (Verified 9/4/2025)

None received

ARGUMENTS IN SUPPORT: Sponsors California Advocates for Nursing Home Reform write that Medi-Cal plans cover more than six in 10 nursing home residents in California, but each plan contracts with only a limited number of nursing homes. This means that Medi-Cal recipients must either contact the plan or call individual facilities to find out who contracts with their Medi-Cal plan. They state that they get thousands of calls from across California from individuals needing help to navigate the long-term care system. This will simply require public display of facility information that DHCS already collects. AARP California states that by 2030, one quarter of Californians will be 60 or older, and navigating complex programs and directories is already a challenge for many Californians. This bill would reduce obstacles to accessing information for older adults and individuals with disabilities who are searching for a facility or plan that best fits their needs.

ASSEMBLY FLOOR: 77-0, 9/4/25
AYES: Addis, Aguiar-Curry, Alanis, Alvarez, Arambula, Ávila Farías, Bains, Bauer-Kahan, Bennett, Berman, Boerner, Bonta, Bryan, Calderon, Caloza, Carrillo, Castillo, Chen, Connolly, Davies, DeMaio, Dixon, Elhawary, Ellis, Flora, Fong, Gabriel, Gallagher, Garcia, Gipson, Jeff Gonzalez, Mark González, Hadwick, Haney, Harabedian, Hart, Hoover, Irwin, Jackson, Kalra, Krell, Lackey, Lowenthal, Macedo, McKinnor, Muratsuchi, Nguyen, Ortega, Pacheco, Papan, Patel, Patterson, Pellerin, Petrie-Norris, Quirk-Silva, Ramos, Ransom, Celeste Rodriguez, Michelle Rodriguez, Rogers, Blanca Rubio, Sanchez, Schiavo, Schultz, Sharp-Collins, Solache, Soria, Stefani, Ta, Tangipa, Valencia, Wallis, Ward, Wicks, Wilson, Zbur, Rivas
NO VOTE RECORDED: Ahrens, Lee

Prepared by: Jen Flory / HEALTH / (916) 651-4111
9/6/25 10:40:13

**** **END** ****