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Assembly California Legislature

Committee on Rules

RICHARD S. GORDON CHAIR

Thursday, January 09, 2014 Upon adjournment of Session State Capitol, Room 3162

CONSENT AGENDA

VICE CHAIR SCOTT WILK MEMBERS FRANKLIN E. BIGELOW CHERYL R. BROWN TIM DONNELLY LORENA GONZALEZ CURT HAGMAN ADRIN NAZARIAN V. MANUEL PÉREZ BILL QUIRK SHIRLEY N. WEBER

KEN COOLEY (D-ALT.) MARIE WALDRON (R-ALT.)

Bill Referrals

1. Memo		Page 2
2. Bill Re-referral		Page 3
Requests to Add Urgency Clause		
3. AB 369 (Pan)	Relative to Continuity of care.	Page 4
4. SB 27 (Correa)	Relative to Political Reform Act of 1974.	Page 21
5. SB 445 (Hill)	Relative to Underground storage tanks: petroleum: charges.	Page 41
6. SB 611 (Hill)	Relative to Charter-party carriers of passengers: limousines: fire extinguishers	Page 45

California Legislature Assembly Rules Committee

ROOM 3016 — STATE CAPITOL P.O. BOX 942849 SACRAMENTO, CALIFORNIA 94249-0115 TELEPHONE: (916) 319-2800

Memo

To:	Rules Committee Members
From:	Mukhtar Ali, Bill Referral Consultant
Date:	1/8/14
Re:	Consent Bill Referrals

Since you received the preliminary list, AB 288 has been removed.

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RE-REFERRAL OF BILLS01/09/2014RE-REFERRAL OF BILLSAssembly Bill No.Committee:AB 129AB 1104NATURAL RESOURCES

AMENDED IN ASSEMBLY JANUARY 6, 2014

CALIFORNIA LEGISLATURE-2013-14 REGULAR SESSION

ASSEMBLY BILL

No. 369

Introduced by Assembly Member Pan

February 14, 2013

An act to amend Section 100503 of the Government Code, 1373.96 of the Health and Safety Code, and to amend Section 10133.56 of the Insurance Code, relating to health care coverage.

LEGISLATIVE COUNSEL'S DIGEST

AB 369, as amended, Pan. California Health Benefit Exchange: report. Continuity of care.

Existing 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 and makes a willful violation of the act a crime. Existing law also provides for the regulation of health insurers by the Department of Insurance. Existing law requires a health care service plan, with some exceptions, to provide for the completion of covered services by a terminated provider or a nonparticipating provider for enrollees who were receiving services from the provider for one of the specified conditions at the time of the contract termination or at the time a newly covered enrollee's coverage became effective. Existing law requires a health insurer, with some exceptions, to provide for the completion of covered services by a terminated provider for insureds who were receiving services from the provider for one of the specified conditions at the time of the provider for one of the specified negative services from the provider for insureds who were receiving services from the provider for one of the specified conditions at the time of the provider for one of the specified conditions at the time of the policy termination.

Under the federal Patient Protection and Affordable Care Act (PPACA), each state is required, by January 1, 2014, to establish an

American Health Benefit Exchange that makes available qualified health plans to qualified individuals and small employers. Existing state law establishes the California Health Benefit Exchange (Exchange) within state government, specifies the powers and duties of the board governing the Exchange, and requires the board to facilitate the purchase of qualified health plans through the Exchange by qualified individuals and small employers by January 1, 2014. Existing law requires the board to report, or contract with an independent entity to report, to the Legislature by December 1, 2018, on whether to adopt the option under the PPACA to merge the individual and small employer insurance markets.

This bill would instead require the board or the independent entity to make this report to the Legislature by March 1, 2019.

This bill would require a health insurer to arrange for the completion of covered services by a nonparticipating provider at the request of a newly covered insured under a group insurance policy. The bill would require a health care service plan and a health insurer to arrange for the completion of covered services by a nonparticipating provider for a newly covered enrollee and a newly covered insured under an individual health care service plan contract or insurance policy whose prior coverage was terminated between January 1, 2013, and March 31, 2014, inclusive.

Because a willful violation of these provisions by a health care service plan would, in part, be a crime, this bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: no-yes. State-mandated local program: no-yes.

The people of the State of California do enact as follows:

1 SECTION 1. Section 1373.96 of the Health and Safety Code 2 is amended to read:

3 1373.96. (a) A health care service plan shall at the request of

4 an enrollee, provide the completion of covered services as set forth

in this section by a terminated provider or by a nonparticipating
 provider.

3 (b) (1) The completion of covered services shall be provided 4 by a terminated provider to an enrollee who at the time of the 5 contract's termination, was receiving services from that provider 6 for one of the conditions described in subdivision (c).

(2) The completion of covered services shall be provided by a
nonparticipating provider to a newly covered enrollee who, at the
time his or her coverage became effective, was receiving services
from that provider for one of the conditions described in
subdivision (c).

12 (c) The health care service plan shall provide for the completion13 of covered services for the following conditions:

(1) An acute condition. An acute condition is a medical condition that involves a sudden onset of symptoms due to an illness, injury, or other medical problem that requires prompt medical attention and that has a limited duration. Completion of covered services shall be provided for the duration of the acute condition.

20 (2) A serious chronic condition. A serious chronic condition is 21 a medical condition due to a disease, illness, or other medical 22 problem or medical disorder that is serious in nature and that 23 persists without full cure or worsens over an extended period of 24 time or requires ongoing treatment to maintain remission or prevent 25 deterioration. Completion of covered services shall be provided 26 for a period of time necessary to complete a course of treatment 27 and to arrange for a safe transfer to another provider, as determined 28 by the health care service plan in consultation with the enrollee 29 and the terminated provider or nonparticipating provider and 30 consistent with good professional practice. Completion of covered 31 services under this paragraph shall not exceed 12 months from the 32 contract termination date or 12 months from the effective date of 33 coverage for a newly covered enrollee.

34 (3) A pregnancy. A pregnancy is the three trimesters of 35 pregnancy and the immediate postpartum period. Completion of

36 covered services shall be provided for the duration of the 37 pregnancy.

38 (4) A terminal illness. A terminal illness is an incurable or39 irreversible condition that has a high probability of causing death

40 within one year or less. Completion of covered services shall be

1 provided for the duration of a terminal illness, which may exceed

2 12 months from the contract termination date or 12 months from3 the effective date of coverage for a new enrollee.

(5) The care of a newborn child between birth and age 36
months. Completion of covered services under this paragraph shall
not exceed 12 months from the contract termination date or 12
months from the effective date of coverage for a newly covered
enrollee.

9 (6) Performance of a surgery or other procedure that is 10 authorized by the plan as part of a documented course of treatment 11 and has been recommended and documented by the provider to 12 occur within 180 days of the contract's termination date or within 13 180 days of the effective date of coverage for a newly covered 14 enrollee.

15 (d) (1) The plan may require the terminated provider whose services are continued beyond the contract termination date 16 17 pursuant to this section to agree in writing to be subject to the same 18 contractual terms and conditions that were imposed upon the 19 provider prior to termination, including, but not limited to, credentialing, hospital privileging, utilization review, peer review, 20 21 and quality assurance requirements. If the terminated provider 22 does not agree to comply or does not comply with these contractual 23 terms and conditions, the plan is not required to continue the 24 provider's services beyond the contract termination date.

25 (2) Unless otherwise agreed by the terminated provider and the 26 plan or by the individual provider and the provider group, the 27 services rendered pursuant to this section shall be compensated at 28 rates and methods of payment similar to those used by the plan or 29 the provider group for currently contracting providers providing 30 similar services who are not capitated and who are practicing in 31 the same or a similar geographic area as the terminated provider. 32 Neither the plan nor the provider group is required to continue the 33 services of a terminated provider if the provider does not accept 34 the payment rates provided for in this paragraph.

(e) (1) The plan may require a nonparticipating provider whose services are continued pursuant to this section for a newly covered enrollee to agree in writing to be subject to the same contractual terms and conditions that are imposed upon currently contracting providers providing similar services who are not capitated and who are practicing in the same or a similar geographic area as the

nonparticipating provider, including, but not limited to,
 credentialing, hospital privileging, utilization review, peer review,
 and quality assurance requirements. If the nonparticipating provider
 does not agree to comply or does not comply with these contractual
 terms and conditions, the plan is not required to continue the
 provider's services.
 (2) Unless otherwise agreed upon by the nonparticipating

8 provider and the plan or by the nonparticipating provider and the 9 provider group, the services rendered pursuant to this section shall 10 be compensated at rates and methods of payment similar to those 11 used by the plan or the provider group for currently contracting 12 providers providing similar services who are not capitated and 13 who are practicing in the same or a similar geographic area as the 14 nonparticipating provider. Neither the plan nor the provider group 15 is required to continue the services of a nonparticipating provider 16 if the provider does not accept the payment rates provided for in 17 this paragraph.

18 (f) The amount of, and the requirement for payment of, 19 copayments, deductibles, or other cost sharing components during 20 the period of completion of covered services with a terminated 21 provider or a nonparticipating provider are the same as would be 22 paid by the enrollee if receiving care from a provider currently 23 contracting with or employed by the plan.

(g) If a plan delegates the responsibility of complying with this
section to a provider group, the plan shall ensure that the
requirements of this section are met.

27 (h) This section shall not require a plan to provide for 28 completion of covered services by a provider whose contract with 29 the plan or provider group has been terminated or not renewed for 30 reasons relating to a medical disciplinary cause or reason, as 31 defined in paragraph (6) of subdivision (a) of Section 805 of the 32 Business and Profession Code, or fraud or other criminal activity. 33 (i) This section shall not require a plan to cover services or 34 provide benefits that are not otherwise covered under the terms and conditions of the plan contract. This Except as provided in 35 36 subdivision (k), this section shall not apply to a newly covered 37 enrollee covered under an individual subscriber agreement who is

38 undergoing a course of treatment on the effective date of his or

39 her coverage for a condition described in subdivision (c).

1 (j) This section shall not apply to a newly covered enrollee who

2 is offered an out-of-network option or to a newly covered enrollee

3 who had the option to continue with his or her previous health plan

4 or provider and instead voluntarily chose to change health plans.

5 (k)
6 (j) The provisions contained in this section are in addition to
7 any other responsibilities of a health care service plan to provide
8 continuity of care pursuant to this chapter. Nothing in this section
9 shall preclude a plan from providing continuity of care beyond the

10 requirements of this section.

11 (k) (1) A health care service plan shall, at the request of a newly 12 covered enrollee under an individual health care service plan 13 contract, arrange for the completion of covered services by a 14 nonparticipating provider for one of the conditions described in 15 subdivision (c) if the newly covered enrollee meets both of the 16 following:

17 (A) The newly covered enrollee's prior coverage was terminated 18 between January 1, 2013, and March 31, 2014, inclusive.

(B) At the time his or her coverage became effective, the newly
covered enrollee was receiving services from that provider for one

21 of the conditions described in subdivision (c).

(2) A violation of this subdivision does not constitute a crimeunder Section 1390.

24 (*l*) The following definitions apply for the purposes of this 25 section:

(1) "Individual provider" means a person who is a licentiate, as
defined in Section 805 of the Business and Professions Code, or
a person licensed under Chapter 2 (commencing with Section
1000) of Division 2 of the Business and Professions Code.

30 (2) "Nonparticipating provider" means a provider who is not 31 contracted with a health care service plan. A *nonparticipating* 32 *provider does not include a terminated provider.*

33 (3) "Provider" shall have the same meaning as set forth in34 subdivision (i) of Section 1345.

35 (4) "Provider group" means a medical group, independent36 practice association, or any other similar organization.

37 (5) "Terminated provider" means a provider whose contract

38 to provide services to enrollees is terminated or not renewed by

39 the plan or one of the plan's contracting provider groups.

1 SEC. 2. Section 10133.56 of the Insurance Code is amended 2 to read:

3 10133.56. (a) A health insurer that enters into a contract with 4 a professional or institutional provider to provide services at 5 alternative rates of payment pursuant to Section 10133 shall, at 6 the request of an insured, arrange for the completion of covered 7 services by a terminated provider, if the insured is undergoing a 8 course of treatment for any of the following conditions:

9 (1) An acute condition. An acute condition is a medical 10 condition that involves a sudden onset of symptoms due to an 11 illness, injury, or other medical problem that requires prompt 12 medical attention and that has a limited duration. Completion of 13 covered services shall be provided for the duration of the acute 14 condition.

15 (2) A serious chronic condition. A serious chronic condition is 16 a medical condition due to a disease, illness, or other medical 17 problem or medical disorder that is serious in nature and that 18 persists without full cure or worsens over an extended period of 19 time or requires ongoing treatment to maintain remission or prevent 20 deterioration. Completion of covered services shall be provided 21 for a period of time necessary to complete a course of treatment 22 and to arrange for a safe transfer to another provider, as determined 23 by the health insurer in consultation with the insured and the 24 terminated provider and consistent with good professional practice. 25 Completion of covered services under this paragraph shall not 26 exceed 12 months from the contract termination date.

(3) A pregnancy. A pregnancy is the three trimesters of
pregnancy and the immediate postpartum period. Completion of
covered services shall be provided for the duration of the
pregnancy.

(4) A terminal illness. A terminal illness is an incurable or
irreversible condition that has a high probability of causing death
within one year or less. Completion of covered services shall be
provided for the duration of a terminal illness, which may exceed

- 35 12 months from the contract termination date.
- 36 (5) The care of a newborn child between birth and age 3637 months. Completion of covered services under this paragraph shall
- 38 not exceed 12 months from the contract termination date.

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1 (6) Performance of a surgery or other procedure that has been
2 recommended and documented by the provider to occur within
3 180 days of the contract's termination date.

4 (b) The insurer may require the terminated provider whose 5 services are continued beyond the contract termination date pursuant to this section, to agree in writing to be subject to the 6 7 same contractual terms and conditions that were imposed upon 8 the provider prior to termination, including, but not limited to, 9 credentialing, hospital privileging, utilization review, peer review, and quality assurance requirements. If the terminated provider 10 11 does not agree to comply or does not comply with these contractual 12 terms and conditions, the insurer is not required to continue the 13 provider's services beyond the contract termination date.

14 (c) Unless otherwise agreed upon between the terminated 15 provider and the insurer or between the terminated provider and the provider group, the agreement shall be construed to require a 16 17 rate and method of payment to the terminated provider, for the 18 services rendered pursuant to this section, that are the same as the 19 rate and method of payment for the same services while under contract with the insurer and at the time of termination. The 20 21 provider shall accept the reimbursement as payment in full and 22 shall not bill the insured for any amount in excess of the 23 reimbursement rate, with the exception of copayments and 24 deductibles pursuant to subdivision (e).

(d) Notice as to the process by which an insured may request
completion of covered services pursuant to this section shall be
provided in any insurer evidence of coverage and disclosure form
issued after March 31, 2004. An insurer shall provide a written
copy of this information to its contracting providers and provider
groups. An insurer shall also provide a copy to its insureds upon
request.

(e) The payment of copayments, deductibles, or other
cost-sharing components by the insured during the period of
completion of covered services with a terminated provider shall
be the same copayments, deductibles, or other cost-sharing
components that would be paid by the insured when receiving care
from a provider currently contracting with the insurer.

38 (f) If an insurer delegates the responsibility of complying with

this section to its contracting entities, the insurer shall ensure thatthe requirements of this section are met.

1 (g) For the purposes of this section, the following terms have 2 the following meanings:

3 (1) "Provider" means a person who is a licentiate as defined in
4 Section 805 of the Business and Professions Code or a person
5 licensed under Chapter 2 (commencing with Section 1000) of
6 Division 2 of the Business and Professions Code.

7 (2) "Provider group" includes a medical group, independent 8 practice association, or any other similar organization.

9 (3) "Nonparticipating provider" means a provider who does

10 not have a contract with an insurer to provide services to insureds.

11 A nonparticipating provider does not include a terminated 12 provider.

13 (2)

(4) "Terminated provider" means a provider whose contract to
provide services to insureds is terminated or not renewed by the
insurer or one of the insurer's contracting provider groups. A
terminated provider is not a provider who voluntarily leaves the
insurer or contracting provider group.

(3) "Provider group" includes a medical group, independent
 practice association, or any other similar organization.

(h) This section shall not require an insurer or provider group
to provide for the completion of covered services by a provider
whose contract with the insurer or provider group has been
terminated or not renewed for reasons relating to medical
disciplinary cause or reason, as defined in paragraph (6) of
subdivision (a) of Section 805 of the Business and Professions
Code, or fraud or other criminal activity.

(i) This section shall not require an insurer to cover services or
provide benefits that are not otherwise covered under the terms
and conditions of the insurer contract.

31 (j) The provisions contained in this section are in addition to 32 any other responsibilities of insurers to provide continuity of care

pursuant to this chapter. Nothing in this section shall preclude an

34 insurer from providing continuity of care beyond the requirements

35 of this section.

(k) (1) A health insurer shall, at the request of a newly covered
insured under a group insurance policy, arrange for the completion

38 of covered services by a nonparticipating provider for one of the

39 conditions described in subdivision (a).

(2) A health insurer shall, at the request of a newly covered
 insured under an individual insurance policy, arrange for the
 completion of covered services by a nonparticipating provider for
 one of the conditions described in subdivision (a) if the newly
 covered insured meets both of the following:
 (A) The newly covered insured's prior coverage was terminated

6 (A) The newly covered insured's prior coverage was terminated 7 between January 1, 2013, and March 31, 2014.

8 (B) At the time his or her coverage became effective, the newly 9 covered insured was receiving services from that provider for one 10 of the conditions described in subdivision (a).

(3) (A) The insurer may require a nonparticipating provider 11 12 whose services are continued pursuant to this section for a newly 13 covered insured to agree in writing to be subject to the same 14 contractual terms and conditions that are imposed upon currently 15 participating providers providing similar services who are practicing in the same or a similar geographic area as the 16 17 nonparticipating provider, including, but not limited to, 18 credentialing, hospital privileging, utilization review, peer review, 19 and quality assurance requirements. If the nonparticipating 20 provider does not agree to comply or does not comply with these 21 contractual terms and conditions, the insurer is not required to 22 continue the provider's services.

23 (B) Unless otherwise agreed upon by the nonparticipating 24 provider and the insurer or by the nonparticipating provider and 25 the provider group, the services rendered pursuant to this section 26 shall be compensated at rates and methods of payment similar to 27 those used by the insurer or the provider group for currently 28 participating providers providing similar services who are 29 practicing in the same or a similar geographic area as the 30 nonparticipating provider. Neither the insurer nor the provider 31 group is required to continue the services of a nonparticipating 32 provider if the provider does not accept the payment rates provided 33 for in this paragraph. The provider shall accept the reimbursement 34 as payment in full and shall not bill the insured for any amount in 35 excess of the reimbursement rate, with the exception of copayments 36 and deductibles pursuant to subdivision (e). 37 SEC. 3. No reimbursement is required by this act pursuant to

38 Section 6 of Article XIII B of the California Constitution because

39 the only costs that may be incurred by a local agency or school

40 district will be incurred because this act creates a new crime or

1 infraction, eliminates a crime or infraction, or changes the penalty

2 for a crime or infraction, within the meaning of Section 17556 of

3 the Government Code, or changes the definition of a crime within

4 the meaning of Section 6 of Article XIII B of the California

5 Constitution.

6 SECTION 1. Section 100503 of the Government Code is
7 amended to read:

8 100503. In addition to meeting the minimum requirements of

9 Section 1311 of the federal act, the board shall do all of the

10 following:

11 (a) Determine the criteria and process for eligibility, enrollment,

12 and disenrollment of enrollees and potential enrollees in the

13 Exchange and coordinate that process with the state and local

14 government entities administering other health care coverage

15 programs, including the State Department of Health Care Services,

16 the Managed Risk Medical Insurance Board, and California

17 counties, in order to ensure consistent eligibility and enrollment

18 processes and seamless transitions between coverage.

19 (b) Develop processes to coordinate with the county entities

20 that administer eligibility for the Medi-Cal program and the entity

21 that determines eligibility for the Healthy Families Program,

22 including, but not limited to, processes for case transfer, referral,

23 and enrollment in the Exchange of individuals applying for 24 assistance to those entities, if allowed or required by federal law.

25 (c) Determine the minimum requirements a carrier must meet

26 to be considered for participation in the Exchange, and the

27 standards and criteria for selecting qualified health plans to be 28 offered through the Exchange that are in the best interests of

29 qualified individuals and qualified small employers. The board

30 shall consistently and uniformly apply these requirements,

31 standards, and criteria to all carriers. In the course of selectively

32 contracting for health care coverage offered to qualified individuals

33 and qualified small employers through the Exchange, the board

34 shall seek to contract with carriers so as to provide health care

35 coverage choices that offer the optimal combination of choice,

36 value, quality, and service.

37 (d) Provide, in each region of the state, a choice of qualified

38 health plans at each of the five levels of coverage contained in

39 subdivisions (d) and (e) of Section 1302 of the federal act.

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(e) Require, as a condition of participation in the Exchange,

carriers to fairly and affirmatively offer, market, and sell in the

Exchange at least one product within each of the five levels of coverage contained in subdivisions (d) and (e) of Section 1302 of the federal act. The board may require carriers to offer additional products within each of those five levels of coverage. This subdivision shall not apply to a carrier that solely offers supplemental coverage in the Exchange under paragraph (10) of subdivision (a) of Section 100504. (f) (1) Require, as a condition of participation in the Exchange, carriers that sell any products outside the Exchange to do both of the following: (A) Fairly and affirmatively offer, market, and sell all products made available to individuals in the Exchange to individuals purchasing coverage outside the Exchange. (B) Fairly and affirmatively offer, market, and sell all products made available to small employers in the Exchange to small employers purchasing coverage outside the Exchange. (2) For purposes of this subdivision, "product" does not include contracts entered into pursuant to Part 6.2 (commencing with Section 12693) of Division 2 of the Insurance Code between the Managed Risk Medical Insurance Board and carriers for enrolled Healthy Families beneficiaries or contracts entered into pursuant to Chapter 7 (commencing with Section 14000) of, or Chapter 8 (commencing with Section 14200) of, Part 3 of Division 9 of the Welfare and Institutions Code between the State Department of Health Care Services and carriers for enrolled Medi-Cal beneficiaries. (g) Determine when an enrollee's coverage commences and the extent and scope of coverage. (h) Provide for the processing of applications and the enrollment and disenrollment of enrollees. (i) Determine and approve cost-sharing provisions for qualified health plans. (j) Establish uniform billing and payment policies for qualified health plans offered in the Exchange to ensure consistent enrollment and disenrollment activities for individuals enrolled in the Exchange.

39 (k) Undertake activities necessary to market and publicize the

40 availability of health care coverage and federal subsidies through

1 the Exchange. The board shall also undertake outreach and

2 enrollment activities that seek to assist enrollees and potential 3 enrollees with enrolling and reenrolling in the Exchange in the

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least burdensome manner, including populations that may 5 experience barriers to enrollment, such as the disabled and those

6 with limited English language proficiency.

7 (1) Select and set performance standards and compensation for

8 navigators selected under subdivision (1) of Section 100502.

9 (m) Employ necessary staff.

10 (1) The board shall hire a chief fiscal officer, a chief operations

11 officer, a director for the SHOP Exchange, a director of Health

Plan Contracting, a chief technology and information officer, a 12

13 general counsel, and other key executive positions, as determined

14 by the board, who shall be exempt from civil service.

15 (2) (A) The board shall set the salaries for the exempt positions

16 described in paragraph (1) and subdivision (i) of Section 100500

17 in amounts that are reasonably necessary to attract and retain

18 individuals of superior qualifications. The salaries shall be

19 published by the board in the board's annual budget. The board's

20 annual budget shall be posted on the Internet Web site of the

21 Exchange. To determine the compensation for these positions, the 22 board shall cause to be conducted, through the use of independent

23 outside advisors, salary surveys of both of the following:

24 (i) Other state and federal health insurance exchanges that are 25 most comparable to the Exchange.

26 (ii) Other relevant labor pools.

27 (B) The salaries established by the board under subparagraph

28 (A) shall not exceed the highest comparable salary for a position

29 of that type, as determined by the surveys conducted pursuant to 30 subparagraph (A).

31 (C) The Department of Human Resources shall review the 32 methodology used in the surveys conducted pursuant to 33 subparagraph (A).

34 (3) The positions described in paragraph (1) and subdivision (i) 35 of Section 100500 shall not be subject to otherwise applicable

36 provisions of the Government Code or the Public Contract Code

37 and, for those purposes, the Exchange shall not be considered a

38 state agency or public entity.

39 (n) Assess a charge on the qualified health plans offered by

40 carriers that is reasonable and necessary to support the

- 1 development, operations, and prudent cash management of the
- 2 Exchange. This charge shall not affect the requirement under
- 3 Section 1301 of the federal act that carriers charge the same
- 4 premium rate for each qualified health plan whether offered inside
- 5 or outside the Exchange.
- 6 (o) Authorize expenditures, as necessary, from the California
- 7 Health Trust Fund to pay program expenses to administer the
- 8 Exchange.
- 9 (p) Keep an accurate accounting of all activities, receipts, and
- 10 expenditures, and annually submit to the United States Secretary
- 11 of Health and Human Services a report concerning that accounting.
- 12 Commencing January 1, 2016, the board shall conduct an annual
- 13 audit.
- 14 (q) (1) Annually prepare a written report on the implementation
- 15 and performance of the Exchange functions during the preceding
- 16 fiscal year, including, at a minimum, the manner in which funds
- 17 were expended and the progress toward, and the achievement of,
- 18 the requirements of this title. This report shall be transmitted to
- 19 the Legislature and the Governor and shall be made available to
- 20 the public on the Internet Web site of the Exchange. A report made
- 21 to the Legislature pursuant to this subdivision shall be submitted
- 22 pursuant to Section 9795.
- 23 (2) In addition to the report described in paragraph (1), the board
- 24 shall be responsive to requests for additional information from the
- 25 Legislature, including providing testimony and commenting on
- 26 proposed state legislation or policy issues. The Legislature finds
- 27 and declares that activities including, but not limited to, responding
- 28 to legislative or executive inquiries, tracking and commenting on
- 29 legislation and regulatory activities, and preparing reports on the
- 30 implementation of this title and the performance of the Exchange,
- 31 are necessary state requirements and are distinct from the
- 32 promotion of legislative or regulatory modifications referred to in
- 33 subdivision (d) of Section 100520.
- 34 (r) Maintain enrollment and expenditures to ensure that
- 35 expenditures do not exceed the amount of revenue in the fund, and
- 36 if sufficient revenue is not available to pay estimated expenditures,
- 37 institute appropriate measures to ensure fiscal solvency.
- 38 (s) Exercise all powers reasonably necessary to carry out and
- 39 comply with the duties, responsibilities, and requirements of this
- 40 title and the federal act.

1 (t) Consult with stakeholders relevant to carrying out the 2 activities under this title, including, but not limited to, all of the 3 following:

4 (1) Health care consumers who are enrolled in health plans.

5 (2) Individuals and entities with experience in facilitating 6 enrollment in health plans.

- 7 (3) Representatives of small businesses and self-employed 8 individuals.
- 9 (4) The State Medi-Cal Director.
- 10 (5) Advocates for enrolling hard-to-reach populations.
- 11 (u) Facilitate the purchase of qualified health plans in the
- 12 Exchange by qualified individuals and qualified small employers
- 13 no later than January 1, 2014.
- 14 (v) Report, or contract with an independent entity to report, to
- 15 the Legislature by March 1, 2019, on whether to adopt the option
- 16 in paragraph (3) of subdivision (c) of Section 1312 of the federal
- 17 act to merge the individual and small employer markets. In its
- 18 report, the board shall provide information, based on at least two
- 19 years of data from the Exchange, on the potential impact on rates
- 20 paid by individuals and by small employers in a merged individual
- 21 and small employer market, as compared to the rates paid by
- 22 individuals and small employers if a separate individual and small
- 23 employer market is maintained. A report made pursuant to this
- 24 subdivision shall be submitted pursuant to Section 9795.
 25 (w) With respect to the SHOP Program. collect premiums
- (w) With respect to the SHOP Program, collect premiums and
 administer all other necessary and related tasks, including, but not
- 27 limited to, enrollment and plan payment, in order to make the
- 28 offering of employee plan choice as simple as possible for qualified
- 29 small employers.
- 30 (x) Require carriers participating in the Exchange to immediately
- 31 notify the Exchange, under the terms and conditions established
- 32 by the board, when an individual is or will be enrolled in or
- 33 disenrolled from any qualified health plan offered by the carrier.
- 34 (y) Ensure that the Exchange provides oral interpretation
- 35 services in any language for individuals seeking coverage through
 36 the Exchange and makes available a toll-free telephone number
- 37 for the hearing and speech impaired. The board shall ensure that
- 37 for the hearing and speech imparted. The board shart clistic that 38 written information made available by the Exchange is presented
- 39 in a plainly worded, easily understandable format and made
- 40 available in prevalent languages.

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CHIEF CONSULTANT TERI BOUGHTON

CONSULTANTS MARJORIE SWARTZ ROSIELYN PULMANO LARA FLYNN BENJAMIN RUSSELL

SECRETARIES PATTY RODGERS MARSHALL KIRKLAND Assembly California Legislature



ASSEMBLY COMMITTEE ON HEALTH DR. RICHARD PAN, CHAIR ASSEMBLYMEMBER, NINTH DISTRICT

January 6, 2014

MEMBERS DAN LOGUE, VICE CHAIR TOM AMMIANO TONI ATKINS SUSAN A. BONILLA **ROB BONTA** WESLEY CHESBRO JIMMY GOMEZ LORENA S. GONZALEZ ROGER HERNÁNDEZ BONNIE LOWENTHAL BRIAN MAIENSCHEIN ALLAN R. MANSOOR ADRIN NAZARIAN **BRIAN NESTANDE** V. MANUEL PÉREZ DONALD P. WAGNER **BOB WIECKOWSKI** SCOTT WILK

Honorable Richard Gordon, Chair Assembly Committee on Rules State Capitol, Room 3016 Sacramento, CA 95814

Dear Chairman Gordon,

I respectfully request approval to add an urgency clause to my bill AB 369 (Pan) which relates to continuity of care for patients with serious illnesses or conditions.

This bill requires a health plan or health insurer, at the request of a new enrollee or insured under an individual plan contract or policy, to arrange for the completion of covered services by a nonparticipating provider for those same conditions as in the case of a terminated provider if the newly covered enrollee's/insured's prior coverage was terminated between January 1, 2013 and March 31, 2014 and the newly covered enrollee/insured was receiving services from that provider for the specified conditions. This bill also makes it clear in the Insurance Code that a health insurer is required at the request of a newly covered insured under a group insurance policy to arrange for the completion of covered services by a nonparticipating provider for the specified conditions.

The urgency is necessary in order to implement the bill as soon as possible to ensure that people who are forced to change health insurance plans who are in the middle of treatment for serious conditions such as cancer can maintain their health care provider, even if the provider is not participating in the new health plan.

Sincerely,

Richard Pan, M.D., Chair Assembly Committee on Health

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AMENDED IN ASSEMBLY AUGUST 21, 2013 AMENDED IN ASSEMBLY AUGUST 7, 2013 AMENDED IN ASSEMBLY JULY 2, 2013 AMENDED IN SENATE MAY 6, 2013 AMENDED IN SENATE APRIL 9, 2013

SENATE BILL

No. 27

Introduced by Senator Correa

December 3, 2012

An act to amend Section 9084 of the Elections Code, and to amend Sections-81004, 82015, 82048.7, 84105, and 88001 of, and to add Sections 84222 and 84223 to, the Government Code, relating to the Political Reform Act of 1974.

LEGISLATIVE COUNSEL'S DIGEST

SB 27, as amended, Correa. Political Reform Act of 1974.

(1) Existing law, the Political Reform Act of 1974, provides for the comprehensive regulation of campaign financing, including requiring the reporting of campaign contributions and expenditures, as defined, and imposing other reporting and recordkeeping requirements on campaign committees, as defined. The Fair Political Practices Commission administers and enforces the act. A violation of the act's provisions is punishable as a misdemeanor.

This bill would revise the definition of "contribution" to include certain payments made by a person to a multipurpose organization, as specified.

This bill would require multipurpose organizations that meet specified criteria to comply with the registration and campaign reporting

requirements of the act, as specified, including the disclosure of information relating to the organization's donors.

This bill would require state ballot measure committees and state candidate committees that raise \$1,000,000 or more for an election to maintain an accurate list of the committee's top 10 contributors. This bill would require a committee to provide accurate lists of these contributors to the Commission, and would require the Commission to post the top 10 contributor lists on its Internet Web site, as specified, and to post updates to those lists when prescribed events occur. The bill would require the Commission to provide copies of the top 10 contributor lists to the Secretary of State, at the Secretary of State's request, for purposes of posting those lists on the Secretary of State's Internet Web site.

(2) The act requires a candidate or committee that receives contributions of \$5,000 or more from any person to inform the contributor within 2 weeks that he or she may be subject to the act's reporting requirements.

This bill would require that the candidate or committee inform the contributor within one week for a contribution of \$10,000 or more received during the period in which late contribution reports must be filed. The bill would also require the notifications to reference the reporting requirements for multipurpose organizations.

(3) Existing law requires the Secretary of State to prepare a ballot pamphlet that includes specified information with respect to an election.

This bill would require the Secretary of State to include in the ballot pamphlet a written explanation of the top 10 contributor lists required by the bill, including a description of the Internet Web sites where those lists would be available to the public.

(4) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

(5) The Political Reform Act of 1974, an initiative measure, provides that the Legislature may amend the act to further the act's purposes upon a $\frac{2}{3}$ vote of each house and compliance with specified procedural requirements.

This bill would declare that it furthers the purposes of the act.

Vote: $\frac{2}{3}$. Appropriation: no. Fiscal committee: yes. State-mandated local program: yes.

The people of the State of California do enact as follows:

1 SECTION 1. The Legislature finds and declares all of the 2 following:

3 (a) Multipurpose organizations, including out-of-state
4 organizations, are increasing their political activities in California,
5 and it is important to clarify how disclosure requirements apply
6 to these organizations to ensure that the public receives the required
7 information in an accurate, timely, and transparent manner.

8 (b) The Ninth Circuit Court of Appeals, in California Pro-Life

9 Council, Inc. v. Randolph (9th Cir. 2007) 507 F.3d 1172, upheld

10 the disclosure of a multipurpose organization's political activities,

11 as required by regulations of the Fair Political Practices12 Commission.

(c) The disclosure of donors to multipurpose organizations that
make contributions or expenditures to support or oppose California
candidates and ballot measures serves the following important
purposes:

17 (1) It provides the electorate with information as to where 18 campaign money comes from, increasing its ability to identify the 19 supporters of a candidate or ballot measure.

20 (2) It deters actual corruption and avoids the appearance of 21 corruption by providing increased transparency of contributions 22 and expenditures.

(3) It is an important means of gathering the information
necessary to detect violations of the Political Reform Act of 1974.
(d) The people of California have a compelling interest in

receiving clear and easy to use information about who is financing
state ballot measures and candidate independent expenditure
committees.

29 (e) It is therefore the intent of the Legislature to strengthen the 30 laws requiring the disclosure of contributions and expenditures in 31 California elections by multipurpose organizations and to require 32 committees that raise or spend one million dollars (\$1,000,000) 33 or more to support or oppose state ballot measures or make 34 independent expenditures on behalf of a state candidate to disclose 35 a list of their top 10 contributors on the Internet Web site of the 36 Fair Political Practices Commission.

37 SEC. 2. Section 9084 of the Elections Code is amended to read:

38 9084. The ballot pamphlet shall contain all of the following:

1 (a) A complete copy of each state measure.

2 (b) A copy of the specific constitutional or statutory provision,

3 if any, that each state measure would repeal or revise.

4 (c) A copy of the arguments and rebuttals for and against each 5 state measure.

6 (d) A copy of the analysis of each state measure.

7 (e) Tables of contents, indexes, art work, graphics, and other

8 materials that the Secretary of State determines will make the ballot9 pamphlet easier to understand or more useful for the average voter.

10 (f) A notice, conspicuously printed on the cover of the ballot 11 pamphlet, indicating that additional copies of the ballot pamphlet

12 will be mailed by the county elections official upon request.

(g) A written explanation of the judicial retention procedure asrequired by Section 9083.

15 (h) The Voter Bill of Rights pursuant to Section 2300.

(i) If the ballot contains an election for the office of United 16 17 States Senator, information on candidates for United States Senator. 18 A candidate for United States Senator may purchase the space to 19 place a statement in the state ballot pamphlet that does not exceed 250 words. The statement may not make any reference to any 20 21 opponent of the candidate. The statement shall be submitted in 22 accordance with timeframes and procedures set forth by the 23 Secretary of State for the preparation of the state ballot pamphlet. 24 (j) If the ballot contains a question on the confirmation or 25 retention of a justice of the Supreme Court, information on justices

25 retention of a justice of the Supreme Court, information on justices
26 of the Supreme Court who are subject to confirmation or retention.
27 (k) If the ballot contains an election for the offices of President

and Vice President of the United States, a notice that refers votersto the Secretary of State's Internet Web site for information about

condidates for the offices of President and Vice President of the
 United States

31 United States.

32 (*l*) A written explanation of the appropriate election procedures

for party-nominated, voter-nominated, and nonpartisan offices asrequired by Section 9083.5.

(m) A written explanation of the top 10 contributor lists required
by Section 84223 of the Government Code, including a description
of the Internet Web sites where those lists are available to the
public.

39 SEC. 3. Section 81004 of the Government Code is amended 40 to read:

1 81004. (a) Each report or statement filed under this title shall

2 be signed under penalty of perjury and verified by the filer. The

3 verification shall state that the filer has used all reasonable

4 diligence in the preparation of the report or statement and that to

5 the best of his or her knowledge it is true and complete.

6 (b) A report or statement filed by a committee that qualifies

7 under subdivision (a) of Section 82013 shall be signed and verified

8 by the treasurer, and a report or statement filed by any other person

9 shall be signed and verified by the filer. If the filer is an entity 10 other than an individual, the report or statement shall be signed

10 other than an individual, the report or statement shall be signed 11 and verified by a responsible officer of the entity or by an attorney

12 or a certified public accountant acting as agent for the entity. A

13 report or statement filed by a committee that qualifies under

14 subdivision (b) or (c) of Section 82013 shall be signed and verified

15 by a responsible officer of the committee. Every person who signs

16 and verifies any report or statement required to be filed under this

17 title which contains material matter which he or she knows to be

18 false is guilty of perjury.

19 SEC. 3. Section 82015 of the Government Code is amended to20 read:

82015. (a) "Contribution" means a payment, a forgiveness of
a loan, a payment of a loan by a third party, or an enforceable
promise to make a payment except to the extent that full and
adequate consideration is received, unless it is clear from the
surrounding circumstances that it is not made for political purposes.

(b) (1) A payment made at the behest of a committee as defined
in subdivision (a) of Section 82013 is a contribution to the
committee unless full and adequate consideration is received from
the committee for making the payment.

30 (2) A payment made at the behest of a candidate is a contribution 31 to the candidate unless the criteria in either subparagraph (A) or 32 (B) are satisfied:

33 (A) Full and adequate consideration is received from the 34 candidate.

35 (B) It is clear from the surrounding circumstances that the 36 payment was made for purposes unrelated to his or her candidacy 37 for elective office. The following types of payments are presumed 38 to be for purposes unrelated to a condidate's condidacy for elective

to be for purposes unrelated to a candidate's candidacy for electiveoffice:

1 (i) A payment made principally for personal purposes, in which

2 case it may be considered a gift under the provisions of Section3 82028. Payments that are otherwise subject to the limits of Section

4 86203 are presumed to be principally for personal purposes.

5 (ii) A payment made by a state, local, or federal governmental 6 agency or by a nonprofit organization that is exempt from taxation 7 under Section 501(a)(2) of the Internal Devenue Code

7 under Section 501(c)(3) of the Internal Revenue Code.

8 (iii) A payment not covered by clause (i), made principally for 9 legislative, governmental, or charitable purposes, in which case it 10 is neither a gift nor a contribution. However, payments of this type 11 that are made at the behest of a candidate who is an elected officer 12 shall be reported within 30 days following the date on which the 13 payment or payments equal or exceed five thousand dollars 14 (\$5,000) in the aggregate from the same source in the same 15 calendar year in which they are made. The report shall be filed by 16 the elected officer with the elected officer's agency and shall be 17 a public record subject to inspection and copying pursuant to 18 subdivision (a) of Section 81008. The report shall contain the 19 following information: name of payor, address of payor, amount of the payment, date or dates the payment or payments were made, 20 21 the name and address of the payee, a brief description of the goods 22 or services provided or purchased, if any, and a description of the 23 specific purpose or event for which the payment or payments were 24 made. Once the five-thousand-dollar (\$5,000) aggregate threshold 25 from a single source has been reached for a calendar year, all 26 payments for the calendar year made by that source must be 27 disclosed within 30 days after the date the threshold was reached 28 or the payment was made, whichever occurs later. Within 30 days 29 after receipt of the report, state agencies shall forward a copy of 30 these reports to the Fair Political Practices Commission, and local 31 agencies shall forward a copy of these reports to the officer with 32 whom elected officers of that agency file their campaign 33 statements.

34 (C) For purposes of subparagraph (B), a payment is made for

35 purposes related to a candidate's candidacy for elective office if 36 all or a portion of the payment is used for election-related activities.

37 For purposes of this subparagraph, "election-related activities"

38 shall include, but are not limited to, the following:

1 (i) Communications that contain express advocacy of the 2 nomination or election of the candidate or the defeat of his or her 3 opponent.

4 (ii) Communications that contain reference to the candidate's
5 candidacy for elective office, the candidate's election campaign,
6 or the candidate's or his or her opponent's qualifications for
7 elective office.

8 (iii) Solicitation of contributions to the candidate or to third 9 persons for use in support of the candidate or in opposition to his 10 or her opponent.

(iv) Arranging, coordinating, developing, writing, distributing,
 preparing, or planning of any communication or activity described
 in clause (i), (ii), or (iii).

(v) Recruiting or coordinating campaign activities of campaignvolunteers on behalf of the candidate.

16 (vi) Preparing campaign budgets.

17 (vii) Preparing campaign finance disclosure statements.

(viii) Communications directed to voters or potential voters as
part of activities encouraging or assisting persons to vote if the
communication contains express advocacy of the nomination or
election of the candidate or the defeat of his or her opponent.

22 (D) A contribution made at the behest of a candidate for a 23 different candidate or to a committee not controlled by the 24 behesting candidate is not a contribution to the behesting candidate. 25 (3) A payment made at the behest of a member of the Public 26 Utilities Commission, made principally for legislative, 27 governmental, or charitable purposes, is not a contribution. 28 However, payments of this type shall be reported within 30 days following the date on which the payment or payments equal or 29 30 exceed five thousand dollars (\$5,000) in the aggregate from the

same source in the same calendar year in which they are made.The report shall be filed by the member with the Public Utilities

33 Commission and shall be a public record subject to inspection and 34 copying pursuant to subdivision (a) of Section 81008. The report

35 shall contain the following information: name of payor, address

36 of payor, amount of the payment, date or dates the payment or

37 payments were made, the name and address of the payee, a brief

38 description of the goods or services provided or purchased, if any,

39 and a description of the specific purpose or event for which the 40 payment or payments were made. Once the five-thousand-dollar

1 (\$5,000) aggregate threshold from a single source has been reached

2 for a calendar year, all payments for the calendar year made by

3 that source must be disclosed within 30 days after the date the

4 threshold was reached or the payment was made, whichever occurs

5 later. Within 30 days after receipt of the report, the Public Utilities

6 Commission shall forward a copy of these reports to the Fair

7 Political Practices Commission.

8 (c) "Contribution" includes the purchase of tickets for events 9 such as dinners, luncheons, rallies, and similar fundraising events; 10 the candidate's own money or property used on behalf of his or 11 her candidacy other than personal funds of the candidate used to 12 pay either a filing fee for a declaration of candidacy or a candidate 13 statement prepared pursuant to Section 13307 of the Elections 14 Code; the granting of discounts or rebates not extended to the 15 public generally or the granting of discounts or rebates by television 16 and radio stations and newspapers not extended on an equal basis 17 to all candidates for the same office; the payment of compensation 18 by any person for the personal services or expenses of any other 19 person if the services are rendered or expenses incurred on behalf of a candidate or committee without payment of full and adequate 20 21 consideration.

(d) "Contribution" further includes any transfer of anything of
value received by a committee from another committee, unless
full and adequate consideration is received.

(e) "Contribution" does not include amounts received pursuant
to an enforceable promise to the extent those amounts have been
previously reported as a contribution. However, the fact that those
amounts have been received shall be indicated in the appropriate
campaign statement.

30 (f) "Contribution" does not include a payment made by an
31 occupant of a home or office for costs related to any meeting or
32 fundraising event held in the occupant's home or office if the costs
33 for the meeting or fundraising event are five hundred dollars (\$500)
34 or less.

(g) Notwithstanding the foregoing definition of "contribution,"
the term does not include volunteer personal services or payments
made by any individual for his or her own travel expenses if the
payments are made voluntarily without any understanding or
agreement that they shall be, directly or indirectly, repaid to him
or her.

1 (h) "Contribution" further includes the payment of public 2 moneys by a state or local governmental agency for a 3 communication to the public that satisfies both of the following: 4 (1) The communication expressly advocates the election or 5 defeat of a clearly identified candidate or the qualification, passage, 6 or defeat of a clearly identified measure, or, taken as a whole and 7 in context, unambiguously urges a particular result in an election. 8 (2) The communication is made at the behest of the affected 9 candidate or committee. 10 (i) "Contribution" further includes a payment made by a person 11 to a multipurpose organization as defined and described in Section 12 84222. 13 SEC. 4. Section 82048.7 of the Government Code is amended 14 to read: 15 82048.7. (a) "Sponsored committee" means a committee, other 16 than a candidate controlled committee, that has one or more 17 sponsors. Any person, except a candidate or other individual, may 18 sponsor a committee. 19 (b) A person sponsors a committee if any of the following apply: 20 (1) The committee receives 80 percent or more of its 21 contributions from the person or its members, officers, employees, 22 or shareholders. 23 (2) The person collects contributions for the committee by use 24 of payroll deductions or dues from its members, officers, or 25 employees. 26 (3) The person, alone or in combination with other organizations, 27 provides all or nearly all of the administrative services for the 28 committee. 29 (4) The person, alone or in combination with other organizations, 30 sets the policies for soliciting contributions or making expenditures 31 of committee funds. 32 (c) A sponsor that is subject to the reporting requirements of subdivision (f) of Section 84222 and makes contributions or 33 34 expenditures from the sponsor's treasury funds shall report those 35 contributions or expenditures either on the campaign statements 36 of the sponsored committee, pursuant to subdivision (f) of Section 37 84222, or on the sponsor's own campaign statements. 38 (c) A sponsor that is a multipurpose organization, as defined 39 in subdivision (a) of Section 84222, and that makes contributions

- or expenditures from its general treasury funds shall comply with
 Section 84222.
- 3 SEC. 5. Section 84105 of the Government Code is amended 4 to read:

5 84105. A candidate or committee that receives contributions 6 of five thousand dollars (\$5,000) or more from any person shall inform the contributor within two weeks of receipt of the 7 8 contributions that he or she may be required to file campaign 9 reports, and shall include a reference to the filing requirements for multipurpose organizations under Section 84222. However, a 10 candidate or committee that receives a contribution of ten thousand 11 12 dollars (\$10,000) or more from any person during any period in 13 which late contribution reports are required to be filed pursuant to 14 Section 84203 shall provide the information to the contributor within one week. The notification required by this section is not 15 required to be sent to any contributor who has an identification 16 17 number assigned by the Secretary of State issued pursuant to

- 18 Section 84101.
- SEC. 6. Section 84222 is added to the Government Code, toread:
- (a) For purposes of this title, "multipurpose 21 84222. 22 organization" means an organization described in Sections 23 501(c)(3) to 501(c)(10), inclusive, of the Internal Revenue Code and that is exempt from taxation under Section 501(a) of the 24 25 Internal Revenue Code, a federal or out-of-state political 26 organization, a trade association, a professional association, a civic 27 organization, a religious organization, a fraternal society, an 28 educational institution, or any other association or group of persons acting in concert, that is operating for purposes other than making 29 30 contributions or expenditures. "Multipurpose organization" does 31 not include a business entity, an individual, or a federal candidate's 32 authorized committee, as defined in Section 431 of Title 2 of the 33 United States Code, that is registered and filing reports pursuant
- to the Federal Election Campaign Act of 1971.

(b) A multipurpose organization that makes expenditures or
contributions and does not qualify as a committee pursuant to
subdivision (c) may qualify as an independent expenditure
committee or major donor committee if the multipurpose
organization satisfies subdivision (b) or (c) of Section 82013.

1 (c) (1) Except as provided in paragraph (2) subparagraph (A)
2 of paragraph (5), a multipurpose organization is a recipient
3 committee within the meaning of subdivision (a) of Section 82013
4 only under one or more of the following circumstances:
5 (A)
6 (1) The multipurpose organization is a political committee

(1) The multipulpose organization is a pointeal committee
registered with the Federal Election Commission, except as
provided in subdivision (a) of this section, or a political committee
registered with another state, and the multipulpose organization
makes contributions or expenditures in this state in an amount
equal to or greater than the amount identified in subdivision (a) of

12 Section 82013.

13 (B)

(2) The multipurpose organization solicits and receives payments
from donors in an amount equal to or greater than the amount
identified in subdivision (a) of Section 82013 for the purpose of
making contributions or expenditures.

 $17 \quad \text{maxim}$ $18 \quad (C)$

19 (3) The multipurpose organization accepts payments from 20 donors in an amount equal to or greater than the amount identified 21 in subdivision (a) of Section 82013 subject to a condition, 22 agreement, or understanding with the donor that all or a portion 23 of the payments may be used for making contributions or 24 expenditures.

(Đ)

25

(4) The multipurpose organization has existing funds from a
donor and a subsequent agreement or understanding is reached
with the donor that all or a portion of the funds may be used for
making contributions or expenditures in an amount equal to or
greater than the amount identified in subdivision (a) of Section
82013. The date of the subsequent agreement or understanding is
deemed to be the date of receipt of the payment.

33 (E)

34 (5) The multipurpose organization makes contributions or 35 expenditures totaling more than fifty thousand dollars (\$50,000) 36 in the preceding *a period of* 12 months or more than one hundred 37 thousand dollars (\$100,000) in any consecutive four calendar year 38 period a pariod of four consecutive calendar years

38 period a period of four consecutive calendar years.

39 (2)-(A) A multipurpose organization shall not qualify as a
 40 committee within the meaning of subdivision (a) of Section 82013

1 pursuant to this-subdivision paragraph if the multipurpose organization makes contributions or expenditures using only 2 3 available nondonor funds. A multipurpose organization that makes 4 contributions or expenditures with nondonor funds shall-identify 5 briefly describe the source or sources of the funds used for the 6 contribution or expenditure on its major donor or independent 7 expenditure report. 8 (B) For purposes of this subdivision paragraph, "nondonor 9 funds" means investment income, including capital gains, or 10 income earned from providing goods, services, or facilities,

whether related or unrelated to the multipurpose organization's
program, sale of assets, or other receipts that are not derived from
donations.

(d) A multipurpose organization that is a committee pursuant
to subparagraph (A) of paragraph (1) of subdivision (c) shall
comply with the registration and reporting requirements of this
chapter, subject to the following:

(1) The multipurpose organization is not required to comply
with subdivision (k) of Section 84211 for contributions and
expenditures made to influence federal or out-of-state elections,
which shall instead be reported as a single expenditure and be
described as such on the campaign statement.

23 (2) A multipurpose organization registered with the Federal Election Commission is not subject to subdivisions (d) and (f) of 24 25 Section 84211 but shall disclose the total amount of contributions 26 received pursuant to subdivision (c) (a) of Section 84211, and shall 27 disclose the multipurpose organization's name and identification 28 number registered with the Federal Election Commission on the 29 campaign statement. 30 (e) (1) A multipurpose organization that is a committee pursuant

to subparagraph (B), (C), (D), or (E) of paragraph (1) paragraph (2), (3), (4), or (5) of subdivision (c) shall comply with the registration and reporting requirements of this chapter, subject to the following, except that if the multipurpose organization is the sponsor of a committee as described in subdivision (f) it may report required information on its sponsored committee statement

37 pursuant to subdivision (f):

38 (A) The multipurpose organization shall register in the calendar 39 year in which it satisfies any of the criteria in paragraph (1) of

39 year in which it satisfies any of the criteria in paragraph (1) of40 subdivision (c). The statement of organization filed pursuant to

1 Section 84101 shall indicate that the organization is filing pursuant 2 to this section as a multipurpose organization and state the 3 organization's nonprofit tax exempt status, if any. The statement 4 of organization shall also describe the organization's mission or 5 most significant activities, and describe the organization's political 6 activities. A multipurpose organization may comply with the 7 requirement to describe the mission or significant activities and 8 political activities by referencing where the organization's Internal 9 Revenue Service Return of Organization Exempt From Income 10 Tax form may be accessed. 11 (B) Except as provided in this subparagraph, the registration of 12 a multipurpose organization that meets the criteria of subparagraph 13 (E) of paragraph (1) paragraph (5) of subdivision (c) shall 14 terminate automatically on December 31 of the calendar year in 15 which the multipurpose organization is registered. The 16 multipurpose organization shall not be required to file a semiannual 17 statement pursuant to subdivision (b) of Section 84200, unless the 18 multipurpose organization has undisclosed contributions or 19 expenditures to report, in which case termination shall occur 20 automatically upon filing the semiannual statement that is due no 21 later than January 31. After the multipurpose organization's 22 registration has terminated, the multipurpose organization's 23 reporting obligations are complete, unless the organization qualifies 24 as a committee for purposes of subdivision (a) of Section 82013 25 again in the following calendar year pursuant to subdivision (c)

of this section. Notwithstanding this subdivision, a multipurpose organization may elect to remain registered as a committee by submitting written notification to the Secretary of State prior to the end of the calendar year.

30 (C) A multipurpose organization shall report all contributions 31 received that satisfy the criteria of subparagraph (B), (C), or (D) 32 of paragraph (1) paragraph (2), (3), or (4) of subdivision (c) of 33 this section in the manner required by subdivision (f) of Section 34 84211, and for the balance of its contributions or expenditures 35 shall further report contributors based on a last in, first out 36 accounting method.

A multipurpose organization reporting pursuant to this
 subdivision shall disclose total contributions received in an amount
 equal to the multipurpose organization's total contributions and
 expenditures made in the reporting period. When a multipurpose

- 1 organization reports donors based on the last in, first out accounting
- 2 method, it shall attribute to and include the information required

3 by subdivision (f) of Section 84211 for any donor who donates

- 4 one thousand dollars (\$1,000) or more in a calendar year, except
- 5 for the following:
- 6 (A) A donor who conditions the donation in a manner that
- prohibits the multipurpose organization from using the donation 7
- 8 for contributions and expenditures.
- 9 (A) A donor who designates or restricts the donation for 10 purposes other than contributions or expenditures.
- 11 (B) A donor who prohibits the multipurpose organization's use
- 12 of its donation for contributions or expenditures.
- 13 (\mathbf{B})
- (C) A private foundation, as defined by subdivision (a) of 14 15 Section 509 of the Internal Revenue Code, that provides a grant that does not constitute a taxable expenditure for purposes of 16 17 paragraph (1) or (2) of subdivision (d) of Section 4945 of the
- 18 Internal Revenue Code.
- 19 (3) A multipurpose organization that is a committee pursuant
- to subparagraph (E) of paragraph (1) of subdivision (c) shall not 20
- 21 be required to report contributions or expenditures received, or
- 22 disclose the donors for those contributions or expenditures, if the 23
- contributions or expenditures were made in any prior calendar year
- in which the multipurpose organization did not qualify as a 24 25 committee pursuant to subparagraph (E) of paragraph (1) of
- 26 subdivision (c).
- 27 (3) A multipurpose organization that qualifies as a committee
- 28 pursuant to paragraph (5) of subdivision (c) shall not be required
- 29 to include contributions or expenditures made in a prior calendar
- 30 year on the reports filed for the calendar year in which the
- 31 multipurpose organization qualifies as a committee.
- 32 (4) A contributor identified and reported in the manner provided in subparagraph (C) of paragraph (1) that is a multipurpose 33 34 organization and receives contributions that satisfy the criteria in 35 subdivision (c) shall be subject to the requirements of this 36 subdivision.
- 37 (5) The commission shall adopt regulations establishing notice
- 38 requirements and reasonable filing deadlines for donors reported 39 as contributors based on the last in, first out accounting method.

1 (f) A multipurpose organization that is the sponsor of a 2 committee as defined in Section 82048.7, that is a membership 3 organization, and that makes all of its contributions and 4 expenditures from funds derived from dues, assessments, fees, and 5 similar payments that do not exceed ten thousand dollars (\$10,000) 6 per calendar year from a single source-shall, and that elects to 7 report its contributions and expenditures on its sponsored 8 committee's campaign statement pursuant to paragraph (1) of 9 subdivision (e) shall report as follows:

10 (1) The sponsored committee shall report all contributions and 11 expenditures made from the sponsor's treasury funds on statements 12 and reports filed by the committee. The sponsor shall use a last in, 13 first out accounting method and disclose the information required 14 by subdivision (f) of Section 84211 for any person who pays dues, 15 assessments, fees, or similar payments of one thousand dollars 16 (\$1,000) or more to the sponsor's treasury funds in a calendar year 17 and shall disclose all contributions and expenditures made, as 18 required by subdivision (k) of Section 84211, on the sponsored 19 committee's campaign statements. 20 (2) The sponsored committee shall report all other contributions

21 and expenditures in support of the committee by the sponsor, its 22 intermediate units, and the members of those intermediate units 23 entities. A sponsoring organization makes contributions and 24 expenditures in support of its sponsored committee when it 25 provides the committee with money from its treasury funds, with 26 the exception of establishment or administrative costs. With respect 27 to dues, assessments, fees, and similar payments channeled through 28 the sponsor or an intermediate unit to a sponsored committee, the 29 original source of the dues, assessments, fees, and similar payments 30 is the contributor.

(3) A responsible officer of the sponsor, as well as the treasurer
of the sponsored committee, shall verify the committee's campaign
statement pursuant to section Section 81004.

(g) For purposes of this section, "last in, first out accounting method" means an accounting method by which contributions and expenditures are attributed to the multipurpose organization's contributors in reverse chronological order beginning with the most recent of its contributors or, if there are any prior contributions or expenditures, beginning with the most recent contributor for which unattributed contributions remain.

1	SEC. 7. Section 84223 is added to the Government Code, to
2	read:
3	84223. (a) A committee primarily formed to support or oppose
4	a state ballot measure or state candidate that raises one million
5	dollars (\$1,000,000) or more for an election shall maintain an
6	accurate list of the committee's top 10 contributors, as specified
7	by Commission regulations. A current list of the top 10 contributors
8	shall be provided to the Commission for disclosure on the
9	Commission's Internet Web site, as provided in subdivision (c).
10	(b) (1) Except as provided in paragraph (4), the list of top 10
11	contributors shall identify the names of the 10 persons who have
12	made the largest cumulative contributions to the committee, the
13	total amount of each person's contributions, the city and state of
14	the person, the person's committee identification number, if any,
15	and any other information deemed necessary by the Commission.

16 If any of the top 10 contributors identified on the list are 17 committees pursuant to subdivision (a) of Section 82013, the 18 Commission may require, by regulation, that the list also identify 19 the top 10 contributors to the contribution committees

19 the top 10 contributors to those contributing committees.

20 (2) (A) A committee primarily formed to support or oppose a 21 state ballot measure shall count the cumulative amount of 22 contributions received by the committee from a person for the 23 period beginning 12 months prior to the date the committee made 24 its first expenditure to qualify, support, or oppose the measure and 25 ending with the current date.

(B) A committee primarily formed to support or oppose a state
candidate shall count the cumulative amount of contributions
received by the committee from a person for the primary and
general elections combined.

30 (3) The aggregation rules of Section 85311 and any
31 implementing regulations adopted by the Commission shall apply
32 in identifying the persons who have made the top 10 cumulative
33 contributions to a committee.

(4) A person who makes contributions to a committee in a
cumulative amount of less than ten thousand dollars (\$10,000)
shall not be identified or disclosed as a top 10 contributor to a
committee pursuant to this section.

(c) (1) The Commission shall adopt regulations to govern the
 manner in which the Commission shall display top 10 contributor
 lists provided by a committee that is subject to this section, and
1 the Commission shall post the top 10 contributor lists on its Internet

2 Web site in the manner prescribed by those regulations. The

3 Commission shall provide the top 10 contributor lists to the 4 Secretary of State, upon the request of the Secretary of State, for

4 Secretary of State, upon the request of the Secretary of State, for 5 the number of additionally posting the contributor lists on the

5 the purpose of additionally posting the contributor lists on the

6 Secretary of State's Internet Web site.

7 (2) A committee shall provide an updated top 10 contributor8 list to the Commission when any of the following occurs:

9 (A) A new person qualifies as a top 10 contributor to the 10 committee.

11 (B) A person who is an existing top 10 contributor makes 12 additional contributions to the committee.

13 (C) A change occurs that alters the relative ranking order of thetop 10 contributors.

15 (3) The 10 persons who have made the largest cumulative 16 contributions to a committee shall be listed in order from largest 17 contribution amount to smallest amount. If two or more 18 contributors of identical amounts meet the threshold for inclusion 19 in the list of top 10 contributors, the order of disclosure shall be 20 made beginning with the most recent contributor of that amount.

(4) The Commission shall post or update a top 10 contributor
list within five business days or, during the 16 days before the
election, within 48 hours of a contributor qualifying for the list or

24 of any change to the list.

(d) In listing the top 10 contributors, a committee shall use
reasonable efforts to identify and state the actual individuals or
corporations that are the true sources of the contributions made to
the committee from other persons or committees.

29 (e) In addition to any other lists that the Commission is required

30 to post on its Internet Web site, the Commission shall compile, 31 maintain, and display on its Internet Web site a current list of the

32 top 10 contributors supporting and opposing each state ballot

33 measure, as prescribed by Commission regulations.

34 SEC. 8. Section 88001 of the Government Code is amended 35 to read:

36 88001. The ballot pamphlet shall contain all of the following:37 (a) A complete copy of each state measure.

38 (b) A copy of the specific constitutional or statutory provision,

39 if any, that would be repealed or revised by each state measure.

1	(c) A copy of the arguments and rebuttals for and against each
2	state measure.
3	(d) A copy of the analysis of each state measure.
4	(e) Tables of contents, indexes, art work, graphics, and other
5	materials that the Secretary of State determines will make the ballot
6	pamphlet easier to understand or more useful for the average voter.
7	(f) A notice, conspicuously printed on the cover of the ballot
8	pamphlet, indicating that additional copies of the ballot pamphlet
9	will be mailed by the county elections official upon request.
10	(g) A written explanation of the judicial retention procedure as
11	required by Section 9083 of the Elections Code.
12	(h) The Voter Bill of Rights pursuant to Section 2300 of the
13	Elections Code.
14	(i) If the ballot contains an election for the office of United
15	States Senator, information on candidates for United States Senator.
16	A candidate for United States Senator may purchase the space to
17	place a statement in the state ballot pamphlet that does not exceed
18	250 words. The statement may not make any reference to any
19	opponent of the candidate. The statement shall be submitted in
20	accordance with timeframes and procedures set forth by the
21	Secretary of State for the preparation of the state ballot pamphlet.
22	(j) If the ballot contains a question as to the confirmation or
23	retention of a justice of the Supreme Court, information on justices
24	of the Supreme Court who are subject to confirmation or retention.
25	(k) If the ballot contains an election for the offices of President
26	and Vice President of the United States, a notice that refers voters
27	to the Secretary of State's Internet Web site for information about
28	candidates for the offices of President and Vice President of the
29	United States.
30	(<i>l</i>) A written explanation of the appropriate election procedures
31	for party-nominated, voter-nominated, and nonpartisan offices as
32	required by Section 9083.5 of the Elections Code.
33	(m) A written explanation of the top 10 contributor lists required
34	by Section 84223, including a description of the Internet Web sites
35	where those lists are available to the public.
36	SEC. 9. No reimbursement is required by this act pursuant to
37	Section 6 of Article XIIIB of the California Constitution because
38	the only costs that may be incurred by a local agency or school
39	district will be incurred because this act creates a new crime or

40 infraction, eliminates a crime or infraction, or changes the penalty

1 for a crime or infraction, within the meaning of Section 17556 of

2 the Government Code, or changes the definition of a crime within

3 the meaning of Section 6 of Article XIII B of the California4 Constitution.

- 5 SEC. 10. The Legislature finds and declares that this bill
- 6 furthers the purposes of the Political Reform Act of 1974 within
- 7 the meaning of subdivision (a) of Section 81012 of the Government
- 8 Code.

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California State Senate

SENATOR LOU CORREA THIRTY-FOURTH SENATE DISTRICT



Honorable Richard Gordon Assembly Rules Committee, Chair State Capitol, Room 3016 Sacramento, CA 95814

RE: SB 27 (Correa) Urgency clause

Dear Chairman Gordon:

The purpose of this letter is to seek approval from the Assembly Committee on Rules to add an urgency clause to Senate Bill 27 (Correa).

SB 27, which is currently pending on the Assembly inactive file, would amend the Political Reform Act of 1974 to require non-profit corporations and other multipurpose organizations that make campaign contributions or expenditures to publicly disclose their donors. The bill also requires the Fair Political Practices Commission's web site to include a list of the largest contributors to committees that support or oppose state ballot measures or candidates, as specified.

The urgency clause, which has an effective date of July 1, 2014, is necessary so that the disclosures required by the bill will be available to the public in time for any state ballot measures appearing on the November 4, 2014 General Election ballot.

Thank you very much for your consideration of this request.

Sincerely,

Senator Lou Correa

34th Senate District

COMMITTEES

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SELECT COMMITTEE ON ECONOMIC DEVELOPMENT & THE STATE PERMITTING PROCESS SELECT COMMITTEE ON HIGH SPEED RAIL

Back to Agenda

PLEASE VISIT MY HOMEPAGE AT WWW SENATE CA.GOV/CORREA



AMENDED IN ASSEMBLY JANUARY 8, 2014 AMENDED IN ASSEMBLY AUGUST 26, 2013 AMENDED IN ASSEMBLY AUGUST 12, 2013 AMENDED IN ASSEMBLY AUGUST 5, 2013

SENATE BILL

No. 445

Introduced by Senator Hill (Principal coauthor: Assembly Member Mullin)

February 21, 2013

An act to add Section 15820.927 to the Government Code, relating to prisons amend Section 25299.43 of the Health and Safety Code, relating to underground storage tanks.

LEGISLATIVE COUNSEL'S DIGEST

SB 445, as amended, Hill. Revenue bond financing of prison construction. Underground storage tanks: petroleum: charges.

Under existing law, the Barry Keene Underground Storage Tank Cleanup Trust Fund Act of 1989, every owner of an underground storage tank is required to pay a storage fee for each gallon of petroleum placed in the tank. The fees are required to be deposited in the Underground Storage Tank Cleanup Fund and the State Water Resources Control Board is authorized to expend the moneys in the fund, upon appropriation by the Legislature, for various purposes, including the payment of claims to aid owners and operators of petroleum underground storage tanks who take corrective action to clean up unauthorized releases from those tanks, corrective actions undertaken by the board, a California regional water quality board, or a local agency, the cleanup and oversight of unauthorized releases at abandoned tank sites, and grants to small businesses to retrofit certain

hazardous substance underground storage tanks. Existing law imposes a \$0.001 charge per gallon of a petroleum placed in an underground storage tank until January 1, 2016, and repeals the act on that date. Existing law also specifies that certain associated rights, obligations, and authorities that apply prior to the January 1, 2016, repeal date do not terminate until the moneys in the fund are exhausted.

This bill would require payment of an additional \$0.006 per gallon of petroleum until January 1, 2016. This bill would constitute a change in state statute that would result in a taxpayer paying a higher tax within the meaning of Section 3 of Article XIII A of the California Constitution, and thus would require for passage the approval of 2 /3 of the membership of each house of the Legislature.

Existing law authorizes the Board of State and Community Corrections, the State Public Works Board, and a participating county to acquire, design, and construct an adult local criminal justice facility approved by the Board of State and Community Corrections, or to acquire a site or sites owned by, or subject to a lease option to purchase held by, a participating county. Existing law authorizes the State Public Works Board to issue up to \$500,000,000 in revenue bonds, notes, or bond anticipation notes to finance the acquisition, design, and construction of approved adult local criminal justice facilities, and continuously appropriates the funds for those purposes.

This bill would authorize the State Public Works Board to approve a project under either of the above programs after commencement of working drawings or construction phase activities and would authorize reimbursement of expenses incurred after the board approves the project.

Vote: majority $\frac{2}{3}$. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 25299.43 of the Health and Safety Code 2 is amended to read:

25299.43. (a) To implement the changes to this chapter made
by Chapter 1191 of the Statutes of 1994, and consistent with
Section 25299.40, effective January 1, 1995, every owner subject
to Section 25299.41 shall pay a storage fee of one mill (\$0.001)
for each gallon of petroleum placed in an underground storage
tank that the person owns, in addition to the fee required by Section
25299.41.

(b) On and after January 1, 1996, the storage fee imposed under
subdivision (a) shall be increased by two mills (\$0.002) for each
gallon of petroleum placed in an underground storage tank.

4 (c) On and after January 1, 1997, the storage fee increased under 5 subdivision (b) shall be increased by an additional three mills 6 (\$0.003) for each gallon of petroleum placed in an underground 7 storage tank.

8 (d) On and after January 1, 2005, the storage fee increased under
9 subdivision (c) shall be increased by an additional one mill (\$0.001)
10 for each gallon of petroleum placed in an underground storage
11 tank.

(e) On and after January 1, 2006, the storage fee increased under
subdivision (d) shall be increased by an additional one mill
(\$0.001) for each gallon of petroleum placed in an underground
storage tank.

16 (f) On and after January 1, 2010, the storage fee increased under 17 subdivision (e) shall be increased by an additional six mills 18 (\$0.006) for each gallon of petroleum placed in an underground 19 storage tank. The increase provided for in this subdivision shall 20 be effective until January 1, 2014 *2016*, at which time, the fee shall 21 revert back to the fee pursuant to subdivision (e).

(g) The fee imposed under this section shall be paid to the State
Board of Equalization under Part 26 (commencing with Section
50101) of Division 2 of the Revenue and Taxation Code in the
same manner as, and consistent with, the fees imposed under
Section 25299.41.

(h) The State Board of Equalization shall amend the regulationsadopted under Section 25299.41 to carry out this section.

SECTION 1. Section 15820.927 is added to the Government
 Code, immediately after Section 15820.926, to read:

31 15820.927. Notwithstanding Section 13332.11 and 13332.19,

32 the State Public Works Board may approve a project to be funded

33 pursuant to this chapter after commencement of working drawings

34 or construction phase activities. Funds may be allocated to

35 reimburse expenses that are incurred after the board approves the

36 project pursuant to this section.

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SENATOR JERRY HILL THIRTEENTH SENATE DISTRICT DEMOCRATIC CAUCUS CHAIR



COMMITTEES ENVIRONMENTAL QUALITY CHAIR APPROPRIATIONS BANKING & FINANCIAL INSTITUTIONS BUSINESS, PROFESSIONS & ECONOMIC DEVELOPMENT ENERGY, UTILITIES & COMMUNICATIONS SUBCOMMITTEE ON GAS & ELECTRIC INFRASTRUCTURE SAFETY CHAIR



Honorable Richard Gordon Assembly Committee on Rules, Chair State Capitol, Room 3016 Sacramento, CA 95814

RE: Urgency Clause Request - SB 445 - Underground Storage Tank Cleanup Fund

Dear Chair Gordon,

I am respectfully requesting that the Assembly Committee on Rules approve an urgency clause for SB 445. The bill continues a \$0.006 fee for each gallon of petroleum placed in an underground storage tank for a total of \$0.02 per gallon in order to aid operators of petroleum underground storage tanks who take corrective action to clean up unauthorized releases from those tanks, and grants to small businesses to retrofit certain hazardous substance underground storage tanks.

Urgency is requested because the existing fee sunset on January 1, 2014 threatening the solvency of the fund. There are hundreds of outstanding claims on the fund that need to be paid and the most efficient way to fund these obligations is to continue the fee for two more years. The fee needs to be reinstated as soon as possible so the State Water Resources Control Board can continue to make critical improvements for public health and the environment.

SB 611 is awaiting a hearing in the Assembly Committee on Environmental Safety and Toxic Materials.

Thank you for your consideration of this request.

Sincerely. 13th Senator. District

Back to Agenda

AMENDED IN ASSEMBLY JANUARY 7, 2014 AMENDED IN ASSEMBLY SEPTEMBER 9, 2013 AMENDED IN ASSEMBLY SEPTEMBER 6, 2013 AMENDED IN ASSEMBLY SEPTEMBER 3, 2013 AMENDED IN ASSEMBLY AUGUST 6, 2013 AMENDED IN ASSEMBLY JUNE 14, 2013 AMENDED IN SENATE MAY 28, 2013 AMENDED IN SENATE MAY 8, 2013 AMENDED IN SENATE APRIL 15, 2013

SENATE BILL

No. 611

Introduced by Senator Hill (Principal coauthor: Senator Wolk)

February 22, 2013

An act to amend Sections 15820.903 and 15820.913 of, and to add Section 15820.927 to, the Government Code, and to add Section 1978 to the Welfare and Institutions Code, relating to correctional facilities. An act to add Sections 28062 and 34500.4 to the Vehicle Code, relating to charter-party carriers of passengers.

LEGISLATIVE COUNSEL'S DIGEST

SB 611, as amended, Hill. Correctional facilities: bond financing. Charter-party carriers of passengers: limousines: fire extinguishers. (1) The Passenger Charter-party Carriers' Act places charter-party carriers of passengers, as defined, under the jurisdiction and control of the Public Utilities Commission. The act defines a charter-party

carrier of passengers, subject to certain exceptions, to mean every person that is engaged in the transportation of persons by motor vehicle for compensation, whether in common or contract carriage, over any public highway. Existing law requires the Department of the California Highway Patrol to regulate the safe operation of motor vehicles engaged in transportation for hire or compensation and to inspect those vehicles to ensure that they have the required safety equipment. A violation of these provisions is a crime.

This bill would require a limousine, as defined, that has been modified or extended by an original or final-stage manufacturer for purposes of increasing vehicle length and passenger capacity to be equipped with 2 readily accessible and fully charged fire extinguishers, as specified, and would require one fire extinguisher to be securely mounted in the driver's compartment and at least one to be accessible to the passengers. The bill would require the driver or operator of the limousine to notify the passengers of the location of each fire extinguisher prior to the commencement of any trip.

The bill would require the department, not later than July 1, 2015, to implement a safety inspection program, as specified, of charter-party carriers of passengers that operate limousines that have been modified or extended by an original or final-stage manufacturer for purposes of increasing vehicle length and passenger capacity. The bill would require the department to adopt emergency regulations for this purpose. The bill would require the department to transmit to the Public Utilities Commission inspection data of limousines inspected pursuant to this program and would require the original manufacturer or final-stage manufacturer of a manufactured or aftermarket limousine, as described, to certify to the department that the vehicle meets all applicable federal and state motor vehicle safety standards. The bill would also require the department to adopt regulations to establish an inspection fee to be paid by a single charter-party carrier, as specified. The bill would require the inspection fee to be collected by the Public Utilities Commission and deposited into the Motor Vehicle Account in the State Transportation Fund.

Because a violation of these provisions would be a crime, this bill would impose a state-mandated local program.

(2) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

(1) Existing law authorizes the Department of Corrections and Rehabilitation, participating counties, and the State Public Works Board to acquire, design, and construct local jail facilities approved by the Board of State and Community Corrections (BSCC). Existing law authorizes the State Public Works Board to issue revenue bonds, notes, or bond anticipation notes in the amounts of \$445,771,000 and \$774,229,000, in 2 phases, to finance the acquisition, design, and construction, and a reasonable construction reserve, of approved local jail facilities, as specified. The funds derived from those revenue bonds, notes, or bond anticipation notes are continuously appropriated for the purposes described above.

This bill would decrease the authorization for revenue bonds, notes, or bond anticipation notes in the first phase from \$445,771,000 to \$365,771,000 and increase the authorization of the 2nd phase from \$774,229,000 to \$854,229,000.

(2) Existing law authorizes the Board of State and Community Corrections, the State Public Works Board, and a participating county to acquire, design, and construct an adult local criminal justice facility approved by the Board of State and Community Corrections, or to acquire a site or sites owned by, or subject to a lease option to purchase held by, a participating county. Existing law authorizes the State Public Works Board to issue up to \$500,000,000 in revenue bonds, notes, or bond anticipation notes to finance the acquisition, design, and construction of approved adult local criminal justice facilities, and continuously appropriates the funds for those purposes.

This bill would authorize the Board of State and Community Corrections to select the County of San Mateo for the grant of a conditional award, on the same basis as other counties under this program, even if the county has started working drawings, started construction phase activities, put the project out to bid, adopted performance criteria, created concept drawings, completed the design-build package, or put the project out for design-build solicitation. The bill would authorize the necessary approvals by the State Public Works Board and the Department of Finance to be given to the County of San Mateo project, if selected, even after specified phases of the project are complete.

This bill would make legislative findings and declarations as to the necessity of a special statute for the County of San Mateo.

(3) Existing law authorizes the Department of Corrections and Rehabilitation, a participating county, and the board to acquire, design, renovate, or construct a local youthful offender rehabilitative facility, approved by the BSCC, or a site or sites owned by, or subject to a lease or option to purchase held by, a participating county. Existing law authorizes the issuance of up to \$300,000,000 in revenue bonds, notes, or bond anticipation notes to finance the acquisition, design, renovation, or construction, and a reasonable construction reserve, of approved local youthful offender rehabilitative facilities.

This bill would, in the event that a county that has been conditionally awarded financing later determines that participating with other counties in a shared regional facility would provide an improved solution to the county's needs and the needs of other counties, authorize the county to apply to the BSCC for redirection of the conditional award to another county that will be the lead county for the regional facility, in conjunction with the original county and, potentially, other counties. The bill would authorize the board to redirect the conditional award, prior to any approval and establishment of the project, if certain determinations are made by the BSCC.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no-yes.

The people of the State of California do enact as follows:

1 SECTION 1. Section 28062 is added to the Vehicle Code, to 2 read:

3 28062. (a) A limousine, as defined in subdivision (i) of Section 4 5371.4 of the Public Utilities Code, that has been modified or 5 extended by an original or final-stage manufacturer for purposes 6 of increasing vehicle length and passenger capacity shall be 7 equipped with two readily accessible and fully charged fire 8 extinguishers having at least 2A10BC 5lb rating and maintained 9 in efficient operating condition. One fire extinguisher shall be 10 securely mounted in the driver's compartment and at least one 11 shall be accessible to the passengers. 12 (b) The driver or operator of a limousine that has been modified 13 or extended by an original or final-stage manufacturer for purposes

of increasing vehicle length and passenger capacity shall notify

15 the passengers of the location of each fire extinguisher prior to

16 *the commencement of any trip.*

1 SEC. 2. Section 34500.4 is added to the Vehicle Code. to read: 2 34500.4. (a) The Department of the California Highway Patrol 3 shall have the authority to conduct safety inspections of all 4 limousines that have been modified or extended by an original or 5 final-stage manufacturer for purposes of increasing vehicle length 6 and passenger capacity and that are operated pursuant to the 7 Passenger Charter-party Carriers' Act (Chapter 8 (commencing 8 with Section 5351) of Division 2 of the Public Utilities Code). 9

(b) (1) Not later than July 1, 2015, the Department of the California Highway Patrol shall implement a safety inspection 10 11 program of charter-party carriers of passengers who operate 12 limousines as described in subdivision (a). The program shall 13 include an inspection of these carriers regarding, but not limited 14 to, the safe operation of the vehicle, the installation of safety 15 equipment, the retention of maintenance logs, accident reports, and records of driver discipline, compliance with federal and state 16 17 motor vehicle safety standards, the examination of a preventative 18 maintenance program, and, if ownership of the limousine has been 19 transferred, the transmission of relevant safety and maintenance 20 information of the limousine. (2) Pursuant to the safety inspection program, the department

(2) Pursuant to the safety inspection program, the department
 shall conduct an inspection of each charter-party carrier of
 passengers at least once every 13 months.

(3) The department shall adopt emergency regulations for 24 25 purposes of this subdivision. The adoption by the department of 26 regulations implementing this section shall be deemed to be an 27 emergency and necessary to avoid serious harm to the public 28 peace, health, safety, or general welfare for purposes of Sections 11346.1 and 11349.6 of the Government Code, and the department 29 30 is hereby exempted from the requirement that it describe facts 31 showing the need for immediate action to the Office of 32 Administrative Law. The emergency regulations shall remain in 33 effect for no more than one year, by which time final regulations 34 shall be adopted.

(4) (A) The department shall adopt regulations to establish an
inspection fee applied to each limousine that has been modified
or extended by an original or final-stage manufacturer for purposes
of increasing vehicle length and passenger capacity, to be collected
every 13 months, based on the number of vehicles described in

subdivision (a) operated by a single charter-party carrier that
 shall cover the actual cost to perform the inspections.

3 (B) The fee structure established pursuant to this subdivision

4 shall apply to limousines that have been modified or extended by

5 an original or final-stage manufacturer for purposes of increasing
6 vehicle length and passenger capacity that are required to undergo

7 a safety inspection pursuant to this section.

8 (C) The fee established pursuant to this subdivision shall be 9 collected by the California Public Utilities Commission and 10 deposited into the Motor Vehicle Account in the State 11 Transportation Fund.

12 (5) The Department of the California Highway Patrol shall 13 transmit to the Public Utilities Commission inspection data of 14 limousines inspected pursuant to this program, as specified in the 15 program regulations.

(c) Regulations adopted pursuant to this section shall be
consistent with the established inspection program administered
by the department for buses pursuant to Division 14.8 (commencing
with Section 34500), and shall require the original manufacturer

20 or the final-stage manufacturer of a manufactured or aftermarket

21 limousine that has been modified or extended for purposes of

22 increasing vehicle length and passenger capacity to certify to the

23 department that the vehicle meets all applicable federal and state
24 motor vehicle safety standards.

25 SEC. 3. No reimbursement is required by this act pursuant to 26 Section 6 of Article XIII B of the California Constitution because 27 the only costs that may be incurred by a local agency or school 28 district will be incurred because this act creates a new crime or 29 infraction, eliminates a crime or infraction, or changes the penalty 30 for a crime or infraction, within the meaning of Section 17556 of 31 the Government Code, or changes the definition of a crime within 32 the context of the

32 the meaning of Section 6 of Article XIII B of the California33 Constitution.

34 SECTION 1. Section 15820.903 of the Government Code is
 35 amended to read:

36 15820.903. (a) The SPWB may issue up to three hundred

37 sixty-five million seven hundred seventy-one thousand dollars

38 (\$365,771,000) in revenue bonds, notes, or bond anticipation notes,

39 pursuant to Chapter 5 of Part 10b of Division 3 of Title 2

40 (commencing with Section 15830) to finance the acquisition,

1 design, or construction, and a reasonable construction reserve, of

2 approved local jail facilities described in Section 15820.901, and

3 any additional amount authorized under Section 15849.6 to pay

4 for the cost of financing.

5 (b) Proceeds from the revenue bonds, notes, or bond anticipation

- 6 notes may be utilized to reimburse a participating county for the
- 7 costs of acquisition, preliminary plans, working drawings, and
- 8 construction for approved projects.

9 (c) Notwithstanding Section 13340, funds derived pursuant to

this section and Section 15820.902 are continuously appropriated
 for purposes of this chapter.

12 (d) This section shall become inoperative on June 30, 2017, and

13 no project may be commenced after that date; however, projects

14 that have already commenced by that date may be completed and

- 15 financed with bonds issued pursuant to this chapter.
- SEC. 2. Section 15820.913 of the Government Code is amended
 to read:
- 18 15820.913. (a) The SPWB may issue up to eight hundred

19 fifty-four million two hundred twenty-nine thousand dollars

20 (\$854,229,000) in revenue bonds, notes, or bond anticipation notes,

21 pursuant to Chapter 5 of Part 10b of Division 3 of Title 2

22 (commencing with Section 15830) to finance the acquisition,

23 design, or construction, and a reasonable construction reserve, of

- 24 approved local jail facilities described in Section 15820.911, and
- 25 any additional amount authorized under Section 15849.6 to pay

26 for the cost of financing.

27 (b) Proceeds from the revenue bonds, notes, or bond anticipation

28 notes may be used to reimburse a participating county for the costs

of acquisition, preliminary plans, working drawings, and
 construction for approved projects.

31 (c) Notwithstanding Section 13340, funds derived pursuant to
 32 this section and Section 15820.912 are continuously appropriated

33 for purposes of this chapter.

34 SEC. 3. Section 15820.927 is added to the Government Code, 35 to read:

36 15820.927. (a) Notwithstanding any other law, regulation, or
 37 a request-for-proposal issued pursuant to this chapter, the Board

38 of State and Community Corrections may select the County of San

39 Mateo for the grant of a conditional award, on the same basis as

40 any other county selected for a conditional award under this

1 chapter, even if the county has started working drawings, started

2 construction phase activities, put the project out to bid, adopted

3 performance criteria, created concept drawings, completed the

4 design-build package, or put the project out for design-build

5 solicitation. The commencement of any of these activities shall

6 not disqualify the County of San Mateo from eligibility for

7 selection for a conditional award pursuant to this chapter.

8 (b) (1) Notwithstanding Section 13332.11 or any other law, 9 regulation, or request for proposal issued pursuant to this chapter,

the approvals by the State Public Works Board and the Department

11 of Finance required for the funding of a project in the County of

12 San Mateo, if that project is selected for a conditional award

13 pursuant to this section, including, but not limited to, approval of

14 the plans and working drawings, may be given after the start of

15 working drawings, after the start of construction phase activities,

16 or after the project is put out for bid.

17 (2) Notwithstanding Section 13332.19 or any other law,
 18 regulation, or request for proposal issued pursuant to this chapter,
 19 the approvals by the State Public Works Board and the Department

19 the approvals by the State Fublic works board and the Department

20 of Finance required for the funding of a project in the County of

21 San Mateo, if that project is selected for a conditional award 22 pursuant to this section, including, but not limited to, approval of

22 pursuant to this section, including, out not initial to, approval of 23 performance criteria, concept drawings, and the design-build bid

24 package, may be given after the start of construction phase

25 activities or after the project has been put out for design-build

26 solicitation.

27 (c) Other than as set forth in subdivision (d), a project that is

28 approved under this section shall remain subject to the oversight

29 of the State Public Works Board and Department of Finance to

30 the same extent as any other project that receives funding under 31 this chapter. A project that is approved under this section may be

31 allocated funds for expenditures made after the State Public Works

Board and the Department of Finance approve the project.

34 SEC. 4. Section 1978 is added to the Welfare and Institutions
 35 Code, immediately following Section 1977, to read:

36 1978. In the event that a county that has been conditionally

37 awarded financing, pursuant to this article, later determines that

38 participating with other counties in a shared regional facility would

39 provide an improved solution to the county's needs and the needs

40 of other counties, the original county may apply to the Board of

- 1 State and Community Corrections (BSCC) for redirection of the
- 2 conditional award to another county that will be the lead county
- 3 for the regional facility, in conjunction with the original county
- 4 and, potentially, other counties. If the BSCC determines, based on
- 5 findings submitted by the regional consortium of counties, that the
 6 redirection will result in cost savings, regional efficiencies,
- 6 redirection will result in cost savings, regional efficiencies,
 7 increased services, and improved outcomes, and that the design
- 7 increased services, and improved outcomes, and that the design 8 of the joint facility will enhance program delivery, health and
- 8 of the joint facility will enhance program delivery, health and
 9 mental health services, and the safety and security of minors, the
- 10 BSCC may authorize the redirection of the conditional award.
- 11 Redirection may only be considered prior to any approval or
- 12 establishment of the project by the board.
- 13 SEC. 5. The Legislature finds and declares that a special law
- 14 is necessary and that a general law cannot be made applicable
- 15 within the meaning of Section 16 of Article IV of the California
- 16 Constitution because of the unique position of the County of San
- 17 Mateo to begin construction on a jail facility to help reduce the
- 18 eritical level of prison overcrowding.

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SENATOR JERRY HILL THIRTEENTH SENATE DISTRICT DEMOCRATIC CAUCUS CHAIR COMMITTEES ENVIRONMENTAL QUALITY CHAIR APPROPRIATIONS BANKING & FINANCIAL INSTITUTIONS BUSINESS, PROFESSIONS & ECONOMIC DEVELOPMENT ENERGY, UTILITIES & COMMUNICATIONS SUBCOMMITTEE ON GAS & ELECTRIC INFRASTRUCTURE SAFETY CHAIR



January 8, 2014

Honorable Richard Gordon Assembly Committee on Rules, Chair State Capitol, Room 3016 Sacramento, CA 95814

RE: Urgency Clause Request - SB 611 - Limousine Safety

Dear Chair Gordon,

I am respectfully requesting that the Assembly Committee on Rules approve an urgency clause for SB 611. The bill requires limousines to be equipped with fire extinguishers and also creates a safety inspection program for stretch limousines. Without the bill, thousands of limousines will continue to operate without fire extinguishers on board and will continue to go uninspected. Last year five limousine passengers died after a limousine caught on fire in my district.

The bill is nearly identical to SB 338 of last year, which the Governor vetoed. In his veto message, the Governor asked that the Legislature send him an urgency bill in January with the same provisions except authorizing the CHP to charge a fee for the actual cost to perform the inspections.

SB 611 is awaiting a hearing in the Assembly Committee on Transportation.

Thank you for your consideration of this request.

Sincerely,

Jerry Hill Senator, 13th District