

AB 32 (AGUIAR-CURRY): TELEHEALTH – EXPANDING HEALTHCARE ACCESSIBILITY

POSITION: The Chamber’s Health Committee voted to SUPPORT the bill on April 14, 2021. The Chamber’s Public Policy Committee voted to SUPPORT this item on May 11, 2021. The Board of Directors voted to SUPPORT this item on May 27, 2021.

RATIONALE: Telehealth is a vital tool in ensuring access to care for all Californians and must continue beyond the pandemic. AB 32 ensures telehealth can continue, particularly for our Medi-Cal beneficiaries and most vulnerable communities.

STATUS: AB 32 was introduced by Assemblymember Cecilia Aguiar-Curry on December 7, 2020. The bill has since reached the Senate and has been referred to the Committee on Health on June 9, 2021.

SUMMARY

During the COVID-19 pandemic, DHCS implemented various telehealth flexibilities, such as requiring reimbursement parity for all telehealth modalities, including telephone, and allowing Federally Qualified Health Centers (FQHCs) and Rural Health Centers (RHCs) to bill for telehealth and telephonic encounters.

AB 32 would require the State Department of Health Care Services (DHCS) to extend the telehealth flexibilities in place during the pandemic. This bill ensures all patients continue to have access to care moving forward by maintaining parity in reimbursement for telehealth services for Medi-Cal managed care plans.

INDUSTRY/IES IMPACTED

This bill would affect health care systems, community health centers, public hospitals, Medi-Cal managed care plans, labor organizations, behavioral health providers, counties, and all Californians particularly Medi-Cal beneficiaries and our most vulnerable communities.

ADDITIONAL INFORMATION

This bill would also require DHCS to convene an advisory group of healthcare representatives by January 2022 to provide input on the development of a revised Medi-Cal telehealth policy. DHCS must report their findings to the state legislature no later than July 1, 2025.

SUPPORTERS

- California Association of Public Hospitals and Health Systems
- (CAPH) (Co-Sponsors)
- California Health+ Advocates/California Primary Care Association (CPCA) (Co-Sponsors)
- California Medical Association (CMA) (Co-Sponsors)
- Essential Access Health (EAH) (Co-Sponsors)
- Planned Parenthood Affiliates of California (PPAC) (Co-Sponsors)

OPPONENTS

- None official at this time.

OPPOSE UNLESS AMENDED

- California Chamber of Commerce

- AltaMed (Co-Sponsors)
- AARP California
- Association of Healthcare Districts
- Borrego Health
- California Association of Social Rehabilitation Agencies
- California Association of Health Facilities
- California Association of Local Behavioral Health Boards and Commissions
- California Association of Social Rehabilitation Agencies
- California Hospital Association/California Association of Hospitals and Health Systems
- California Telehealth Policy Coalition
- County of San Diego
- Father Joe's Villages
- Health Center Partners of Southern California
- Plus 97 more supporters as of April 22, 2021.

ARGUMENTS IN FAVOR

- According to the CDC, the ongoing COVID-19 pandemic has only increased barriers to healthcare for racial and ethnic minority groups, representing the majority of California's essential workforce.
- Telephonic (audio only) care has become a reliable modality of care. Many California households still rely on basic cell phones or do not have video streaming capability.
- Ensuring the flexibilities of all telehealth modalities will increase access to care for patients and will reduce no-show rates significantly.

ARGUMENTS IN OPPOSITION

- Cal Chamber is currently in an oppose-unless-amended position, arguing that a more clear definition of telehealth is needed since it places no parameters on the telephone-only parity provision. Otherwise there could be unmanageable costs for struggling businesses and consumers.
- The California Association of Health Plans (CAHP) and the Association of California Life and Health Insurance Companies (ACLHIC) express concern that this bill includes a mandate on health plans and insurers to reimburse all types of synchronous telehealth interactions at parity.