



PUBLIC POLICY COMMITTEE Virtual Meeting

Monday, October 5, 2020

1:00PM-3:00PM (PST)

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<http://hiv.lacounty.gov/Public-Policy-Committee>

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AGENDA FOR THE VIRTUAL MEETING OF THE
LOS ANGELES COUNTY COMMISSION ON HIV
PUBLIC POLICY COMMITTEE

Monday, October 5, 2020 | 1:00 PM – 3:00 PM

To Join by Computer: <https://tinyurl.com/y2q6dbvf>

Password: PPC100520

Link is for committee members only

To Join by Phone: 1-415-655-0001

Access code: 145 686 9390

Public Policy Committee Members:			
Katja Nelson, MPP <i>Co-Chair</i>	Lee Kochems, MA <i>Co-Chair</i>	Pamela Coffey* <i>(Alasdair Burton, Alternate)</i>	Aaron Fox, MPM
Jerry D. Gates, PhD	Eduardo Martinez	Nestor Rogel	Ricky Rosales
Martin Sattah, MD	Tony Spears (Alternate)		
QUORUM: 6	*Leave of Absence (LoA)		

**Due to COVID-19, quorum requirements suspended for teleconference meetings per Governor Newsom's Executive Order N-25-20*

AGENDA POSTED: October 1, 2020

ATTENTION: Any person who seeks support or endorsement from the Commission on any official action may be subject to the provisions of Los Angeles County Code, Chapter 2.160 relating to lobbyists. Violation of the lobbyist ordinance may result in a fine and other penalties. For information, call (213) 974-1093.

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SUPPORTING DOCUMENTATION can be obtained at the Commission on HIV Website at: <http://hiv.lacounty.gov>. The Commission Offices are located in Metroplex Wilshire, one building west of the southwest corner of Wilshire and Normandie. Validated parking is available in the parking lot behind Metroplex, just south of Wilshire, on the west side of Normandie.

NOTES on AGENDA SCHEDULING, TIMING, POSTED and ACTUAL TIMES, TIME ALLOTMENTS, and AGENDA ORDER: Because time allotments for discussions and decision-making regarding business before the Commission's standing committees cannot always be predicted precisely, posted times for items on the meeting agenda may vary significantly from either the actual time devoted to the item or the actual, ultimate order in which it was addressed on the agenda. Likewise, stakeholders may propose adjusting the order of various items at the commencement of the committee meeting (Approval of the Agenda), or times may be adjusted and/or modified, at the co-chairs' discretion, during the meeting.

If a stakeholder is interested in joining the meeting to keep abreast of or participate in consideration of a specific agenda item, the Commission suggests that the stakeholder plan on attending the full meeting in case the agenda

order is modified or timing of the items is altered. All Commission committees make every effort to place items that they are aware involve external stakeholders at the top of the agenda in order to address and resolve those issues more quickly and release visiting participants from the obligation of staying for the full meeting.

External stakeholders who would like to participate in the deliberation of discussion of an a posted agenda item, but who may only be able to attend for a short time during a limited window of opportunity, may call the Commission’s Executive Director in advance of the meeting to see if the scheduled agenda order can be adjusted accordingly. Commission leadership and staff will make every effort to accommodate reasonable scheduling and timing requests - from members or other stakeholders - within the limitations and requirements of other possible constraints.

Call to Order, Introductions and Check-in, Conflict of Interest Statements 1:00 PM – 1:05 PM

I. ADMINISTRATIVE MATTERS 1:05 PM – 1:08 PM

- 1. Approval of Agenda **MOTION #1**
- 2. Approval of Meeting Minutes **MOTION #2**

II. PUBLIC COMMENT 1:08 PM – 1:10 PM

- 3. Opportunity for members of the public to address the Commission on items of interest that are within the jurisdiction of the Commission.

III. COMMITTEE NEW BUSINESS ITEMS 1:10 PM – 1:15 PM

- 4. Opportunity for Commission members to recommend new business items for the full body or a committee level discussion on non-agendized Matters not posted on the agenda, to be discussed and (if requested) placed on the agenda for action at a future meeting, or matters requiring immediate action because of an emergency situation, or where the need to take action arose subsequent to the posting of the agenda.

IV. REPORTS

- 5. Executive Director/Staff Report 1:15 PM – 1:25 PM
 - a. Committee and Caucus Updates
 - b. Holiday Meeting Schedule
- 6. Co-Chair Report 1:25 PM – 2:00 PM
 - a. PPC Co-Chairs’ Efforts to Build Alliance with Black African American Community Task Force (BAAC/TF)
 - b. Methamphetamine Use and HIV
 - c. Transgender Meeting Update

V. DISCUSSION ITEMS

- 7. State Policy & Budget Update 2:00 PM – 3:15 PM
 - a. 2020-2021 Legislative Docket Update
 - i. SB 145 Sex Offenders: Registration
 - ii. SB 741 Change of Gender and Sex Identifier

- 8.** Federal Policy Update 3:15 PM – 3:30 PM
 - a. Budget
 - b. Executive Orders
 - c. Supreme Court

- 9.** County Policy Update 3:30 PM – 3:50 PM

VI. NEXT STEPS

3:50 PM – 3:55 PM

- 10.** Task/Assignments Recap
- 11.** Agenda development for the next meeting

VII. ANNOUNCEMENTS

3:55 PM – 4:00 PM

- 12.** Opportunity for members of the public and the committee to make announcements

VIII. ADJOURNMENT

4:00 PM

- 13.** Adjournment for the meeting of October 5, 2020

PROPOSED MOTIONS	
MOTION #1	Approve the Agenda Order as presented or revised.
MOTION #2	Approve the Public Policy Committee minutes, as presented or revised.



LOS ANGELES COUNTY
COMMISSION ON HIV



3530 Wilshire Boulevard, Suite 1140 • Los Angeles, CA 90010 • TEL (213) 738-2816 • FAX (213) 637-4748
HIVCOMM@LACHIV.ORG • <http://hiv.lacounty.gov> ORG • VIRTUAL WEBEX MEETING

Presence at virtual meetings is recorded based on the attendance roll call. Only members of the Commission on HIV are accorded voting privileges and must verbally acknowledge their attendance in order to vote. Approved meeting minutes are available on the Commission's website; meeting recordings are available upon request.



**PUBLIC POLICY COMMITTEE
MEETING MINUTES**

September 14, 2020

The Public Policy Committee acts in accordance with the role of the Commission on HIV, as dictated by Los Angeles County Code 3.29.090. Consistent with Commission Bylaws Article VI, Section 2, no Ryan White resources are used to support Public Policy Committee activities.

MEMBERS PRESENT	MEMBERS ABSENT	PUBLIC	COMM STAFF/ CONSULTANTS
Lee Kochems, MA, <i>Co-Chair</i>	Pamela Coffey (<i>Full to Burton</i>)	Geneviève Clavreul, RN, PhD	Cheryl Barrit, MPIA
Katja Nelson, MPP, <i>Co-Chair</i>	Aaron Fox, MPM	Jennifer DeMorin	Carolyn Echols-Watson, MPA
Alasdair Burton (<i>Alt. to Coffey</i>)	Jerry D. Gates, PhD	Kevin Donnelly	Jane Nachazel
Eduardo Martinez (<i>Alt.</i>)	Nestor Rogel (<i>Alt.</i>)	Joseph Green	
Ricky Rosales	Martin Sattah, MD	Jeffrey King	DPH/DHSP STAFF
	Tony Spears (<i>Alt.</i>)	LCDR Jose Antonio Ortiz, MPH	None
		Greg Wilson	

*Some participants may not have been captured electronically. Attendance can be corrected by emailing the Commission.

CONTENTS OF COMMITTEE PACKET

- 1) **Cover Page:** Public Policy Committee Virtual Meeting, 9/14/2020
- 2) **Agenda:** Public Policy Committee Agenda, 9/14/2020
- 3) **Minutes:** Public Policy Committee Meeting Minutes, 8/3/2020
- 4) **Priorities:** 2020 Policy Priorities, 6/11/2020
- 5) **Table:** 2020-2021 Legislative Docket, *Commission Approved 6/11/2020 - Updated for Meeting of 9/14/2020*
- 6) **Memorandum:** Overview of the November 3, 2020 General Election Ballot Measures, 8/24/2020
- 7) **Memorandum:** Motion to Support Proposition 15 Related to the California Schools and Local Communities Funding Act of 2020 (Item No. 25, Agenda of August 4, 2020), 7/31/2020
- 8) **Memorandum:** Washington - Administration Action in Response to COVID-19 Related to Evictions, 9/2/2020
- 9) **Letter:** Fiscal Year 2020-2021 Measure H and Homeless Housing, Assistance and Prevention (HHAP) Funding Recommendations (All Affected) (3 Votes), 9/15/2020
- 10) **Memorandum:** Los Angeles Homeless Services Authority - Homeless Initiative - Measure H Strategies - Performance Data Validation and Limited Internal Controls Review, 8/26/2020
- 11) **Comments:** Housing Saves Lives Coalition, HUD Rule Change to Remove Protections for Transgender Individuals, 2020

CALL TO ORDER - INTRODUCTIONS AND CHECK-IN - CONFLICT OF INTEREST STATEMENTS: Ms. Nelson called the meeting to order at 1:08 pm. Roll call includes check-in which offers the opportunity to be more attentive to one other. Some topics noted:

- Learning to listen to each other better, e.g., by changing institutional structures and/or personal thinking.
- For consumers, learning to balance consumer versus population representation.
- Noting the complexity of representing consumers when not receiving services through Ryan White.
- These difficult political times make it hard to keep going, but we must. Some 9,000 children on the border were being deported, not always to their native countries due to COVID-19 restrictions. Four have died.

- The United States Public Health Services (USPHS) Commissioned Corps Prevention through Active Community Engagement (PACE) Team is learning from consumers and has a current focus on the monolingual community.
- Working to represent oneself as well as voices heard in other places. Addressing mental health stresses that have now become common to all from time to time.
- Although it is only Monday, all the troubles in the world make even the start of the week tiring.
- Technical difficulties with opening the video and opening links to the meeting packet were frustrating for some attendees.
- Two attendees chose to listen without adding their personal perspectives.

I. ADMINISTRATIVE MATTERS

1. APPROVAL OF AGENDA

MOTION #1: Approve the Agenda Order, as presented (***Passed by Consensus***).

2. APPROVAL OF MEETING MINUTES

MOTION #2: Approve the 8/3/2020 Public Policy Committee Meeting Minutes, as presented (***Passed by Consensus***).

II. PUBLIC COMMENT

- 3. OPPORTUNITY FOR PUBLIC TO ADDRESS COMMISSION ON ITEMS OF INTEREST WITHIN COMMISSION JURISDICTION:** There were no comments.

III. COMMITTEE NEW BUSINESS ITEMS

- 4. OPPORTUNITY FOR COMMISSIONERS TO RECOMMEND ITEMS FOR FUTURE AGENDAS, OR ITEMS REQUIRING IMMEDIATE ACTION DUE TO AN EMERGENCY, OR IF NEED FOR ACTION AROSE AFTER POSTING AGENDA:** There were no items.

IV. REPORTS

5. EXECUTIVE DIRECTOR/STAFF REPORT

- a. Approved Policy Priorities:** Ms. Barrit noted the 2020 Policy Priorities in the packet for reference in the day's deliberations. The Priorities focus on access to care for PLWH and those at risk; maintenance of funding for HIV prevention, care, and treatment; and Social Determinants of Health (SDH), e.g., mental health, housing, employment, education, poverty.
- b. Los Angeles Homeless Services Authority (LAHSA) - Presentation Questions**
- Ms. Barrit had forwarded questions from the Public Policy Committee on the Homeless Count to LAHSA in preparation for their 9/10/2020 Commission presentation, but they did not address the topic. After the meeting, Ms. Barrit contacted them regarding scheduling a presentation on the Homeless Count.
 - She also submitted questions from the Chat received during the meeting and requested additional information. Those questions were addressed during the meeting, but some answers were cut short.
 - The 9/10/2020 Commission presentation focused on Project Room Key. LAHSA was beginning to stand down that Project by identifying permanent or another form of temporary shelter for clients so they do not return to the streets.
 - A good conversation sparked by the presentation addressed the importance of knowing the HIV status of people experiencing homelessness. Currently, the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT) only asks if a person is interested in HIV housing or is immunocompromised. It is important to know a person's HIV status, however, in order to ensure appropriate services are offered. That was one of the key documented comments sent back to the LAHSA presenters to ensure they understood its importance in decision-making.
 - Mr. Martinez noted AIDS Healthcare Foundation owns hotels. It offered space for the homeless, but was not used.
 - ➡ Send additional questions to Ms. Barrit for submission to LAHSA in anticipation of the next presentation. Current requests include: Flowchart of how a person might move through LAHSA's system of options; and status on implementing recommendations from LAHSA's Ad Hoc Committee On Black People Experiencing Homelessness.
- c. Committee and Caucus Updates**
- Two Executive Committee At Large seats remain open. Felipe Gonzalez and Frankie Darling-Palacios were nominated in absentia at the last Executive Committee Meeting and Ms. Barrit conveyed the nominations to them.
 - Mr. Gonzalez graciously declined. Frankie Darling-Palacios asked for more information on the level of responsibility, e.g., if sitting on both the Executive and Operations Committees was necessary. A decision was hoped for this week.

- In Standards and Best Practices (SBP) Committee updates, the Psychosocial Support Standards of Care (SOC) was approved at the 9/10/2020 Commission Meeting. Ms. Barrit was writing a cover letter for its transmittal to DHSP.
- SBP also released the Childcare SOC at the Commission Meeting for a 9/11-23/2020 public comment period. This iteration includes comments from the Women's Caucus, East Los Angeles Women's Center, and others. As part of its release, it was also sent to additional colleagues and comments were invited from the Los Angeles County (LAC) Department of Public Health (DPH), Office of Childhood Education, and First Five LA.
- SBP was also updating the Universal SOC. In particular, revisions will address telehealth expectations and enhance language regarding positive consumer experiences in diverse settings like those for clinical or for supportive services.
- The Operations Committee was focusing on recruitment, in particular of Youth/Young Adults. Targeted outreach to individuals under 30 years of age has garnered some applications. Candidate interviews were being scheduled.
- The Committee directed staff to implement the Mentorship Program. It depends on Commissioner participation, but just three Commissioners responded to Dawn McClendon's initial email. She was sending a reminder.
- The Consumer Caucus sought to ensure parity and understanding of the Commission's decision-making process, especially regarding Priority Setting and Resource Allocation (PSRA). Upcoming meetings will feature mini-trainings starting with a flow chart of the process. Ms. Barrit was drafting it for Co-Chair review before the next meeting.
- The Caucus will also use some time at the October meeting to assess the need for linguistic services. Paulina Zamudio and perhaps other DHSP staff will attend to hear input to inform Request For Proposals (RFP) development.
- The Women's Caucus was sponsoring and leading a four-part Lunch and Learn series focused on women. The next segment will be 9/16/2020 on essential health access and reproductive rights.
- The Transgender Caucus has a standing agenda item to track how COVID-19 is affecting the transgender community to help highlight the under-reported issue. It also plans to work with the Public Policy Committee on policy issues, e.g., the recent proposed Housing and Urban Development (HUD) rule that would allow single sex or sex-segregated shelters to set their own admission policies regardless of an individual's gender identity within the parameters of state and local law. The Caucus was appreciative of the Committee's support of the Transgender Wellness Fund bill.
- The Aging Task Force will meet 9/28/2020 at 9:00 am to develop recommendations for the Commission similar to those from the Black African American Community (BAAC) Task Force. Ms. Barrit will review data at the meeting previously provided to the Task Force and from the Planning, Priorities and Allocations (PP&A) Committee to inform the work.
- ➡ Mr. Kochems noted the statewide Conference on HIV and Aging will be on 9/23/2020, 9/25/2020, and 9/29/2020. Ms. Nelson added AIDS Project Los Angeles (APLA) was a sponsoring body and she could answer questions on the event.
- ➡ Life Group LA was hosting Living and Aging with HIV, 9/18/2020, 12:00 to 2:00. Contact Mr. Donnelly for information.

6. CO-CHAIR REPORT

- ➡ Add to agenda: Direction on not holding substantive conversations during meetings in private Chat.
- a. **Public Policy Committee Co-Chairs' Efforts to Build Alliance with Black African American Community (BAAC) Task Force**
 - Ms. Nelson said she and Mr. Kochems had a 9/3/2020 call with a BAAC Task Force Co-Chair and staff to hear an update on development of their process, hear input on Public Policy Committee implementation of BAAC recommendations, and discuss empowering everyone at the table, especially those who are under-represented. She and Mr. Kochems will present on the Committee's role at BAAC's October 2020 meeting to better identify specific Public Policy activities.
 - Mr. Kochems felt he and Ms. Nelson had challenges as the BAAC Task Force was not at the point to flesh out recommendations as yet. Meanwhile, while discussing how the Committee and Task Force could work together better, they realized that people often do not know the identities, racial/ethnic or otherwise, of all those at the table despite all being Commissioners. Consequently, we cannot know what everyone brings to the table until we can all comfortably talk about who we are, where we are from, what racial/ethnic and other identities are involved in our conversations.
 - One thing to consider was whether the Commission's structure allowed those vulnerable conversations. *Robert's Rules of Order* theoretically give everyone a voice, but those with the most votes have the power. Instead, e.g., we might restructure Committee work by going around the room to encourage participation rather than deferring to volunteers.
 - The BAAC Task Force appreciates that the Public Policy Committee has begun to address their recommendations. At its next meeting, the Task Force will discuss Ms. Nelson's draft delineation of recommendation aspects that might be addressed by various Committees as well as the 2020 Policy Priorities and return input to Public Policy for discussion.
- i. **Racial Justice Policies and Procedures, and Empowerment Activity Recommendation**

- Mr. Kochems said this was placed on the agenda to ensure space to talk about the hard issues or, if people feel they cannot do that, why they cannot - from whatever perspective.
- Mr. Burton noted sometimes people prefer just to listen at a given meeting. Body language often reflects intent.
- Mr. Kochems added people may not want to speak because they need more information. It is important for the Co-Chairs to be able to identify that as well so that the information can be provided to empower the person.
- Mr. Martinez has often felt reluctant to offer his opinion elsewhere, but does not feel restricted in Public Policy. Mr. Donnelly especially values those comments for the elements of Mr. Martinez's experience that differ from his.
- Mr. Burton added the many opinionated men in groups he attended early on served as role models that gave him the impetus to express his own opinions. He also found open-ended questions helpful.
- Mr. Kochems noted what brought us to these conversations was institutional racism so he asked if there was something about what we do or how we do it that can address that. For example, votes are now by majority rule, but we do not yet reflect the Latinx population adequately and the Black population will never be a majority. Should we, therefore, focus on consensus or function more like 12-step programs which aim to empower all.
- Mr. Donnelly noted one feature of the technology we are using is that people can engage in side conversations, but Dr. Clavreul noted the technology does not always work so people may be unable to communicate at all.
- Mr. Kochems suggested going around the room for input. In his case, as an anthropologist, one of his career perspectives comes from his responsibility to live among people who he is not. They did not always welcome him. At a Native American reservation, he might be asked to sit outside the reservation until they are ready. How long he is willing to sit there to understand their lives may be the measure by which he is allowed to enter in.
- What will make conversation easier for your difference, sameness, or relation to power; or could empower others:
 - ☞ Not always calling on people from the beginning of the alphabet rather than the end. (Burton)
 - ☞ Even in families, there can be quick accusations of racism in discussions of racial equity. Often people are unwilling to listen to another person's perspectives unless they are credentialed or a member of a specific community visually or demographically even though there are many subcultures. For example, states, cities, and even areas of cities can have very different cultures. Listening to one another helps growth. (Burton)
 - ☞ There are too few Black/African American people from all subpopulations to represent their needs at the table. Consequently, discussions should become more community-centered. (Wilson)
 - ☞ This is an important conversation yet, after doing this 30 years, he always asks, "How will my showing up in a room benefit the community that I serve and for whom I advocate." It is traumatic to step into a room sometimes as the sole person highlighting, e.g., gross disparity and intentional or unintentional disrespect that can make people feel uncomfortable. He also has had offensive responses, e.g.: "Those people are emotional," even Black DPH staff have suggested tempering speech to make others comfortable; "I think what Jeffrey's trying to say..." implying poor skills; and people responding to his points rephrased by someone else. (King)
 - ☞ About a dozen years ago, the Prevention Planning Committee (PPC) discussed a focus on community and some specific-issue meetings, e.g., on systemic racism. That is still a good idea. He added that he felt systemic racism is often co-facilitated by Black people who, in many cases, work within institutions to get a paycheck. That is not meant to call out anyone we know in public health, but to reflect his experience of 30 years. (King)
 - ☞ It is important to hear and learn from input on our failures and any areas in which we've done well. (Nelson)
 - ☞ The Commission has tried many different ways to do things better for all the Commissioners. Rather than jumping out to react to comments right away, it is most important to let people talk without interruption, absorb the information, and then decide what to do in partnership. (Kochems, Rosales)
 - ☞ Allocation of Ryan White funds for services is complicated, especially in light of the COVID-19 pandemic. Development of telehealth services is also very challenging because not everyone has access. (Ortiz)
 - ☞ This conversation is on vulnerabilities and identities, but most Commission meetings are political spaces where people compete for resources. A couple of years ago he took a community college composition class. He was older and a different color than most other students, but heartened by the conversations. They were assigned to read, and write about what had changed since, essays by James Baldwin from the 1960s and on civil unrest sparked by the 2014 death of Michael Brown in Ferguson, Missouri. It was hard to write, yet he did not address James Baldwin also speaking as a gay man. That is an invisible minority. He presents as a White man; not necessarily as a homosexual, or gay, or same gender loving, or man who has sex with men, or however we label ourselves and each other. He strives not to create "the other." He finds it difficult to speak about his

privilege, but what helped him write the paper was work he had done at the Commission where he first heard the concept of Black Lives Matter. He also used Center for Health Equity online data, e.g., on worse birth outcomes for African American women. He returned to the Commission to help make change. (Donnelly)

- ✉ Doors to the Commission are open. Doors to Committees are open. Some lack time to volunteer, but what is important is the quality a person brings - not race or color. He has had no problems with African Americans, Latinos, or White people. People who want to be part of the Commission should just apply. He felt people like Mr. Kochems and Ms. Nelson do not need to get approval. He appreciates the time they spend. (Martinez)
- ✉ Bringing people onto the Commission without a mentor can set them up for failure. The new Mentorship Program is meant to address that, but just three Commissioners have volunteered so far. The Operations Committee planned to interview three people that week in addition to the three already coming on so the need for volunteers was pressing. Mentoring - collaborative partnership - creates synergy between seasoned and new Commissioners, between the aging and youth to facilitate the transfer of knowledge. (Green)
- ✉ Statistics on health issues for Black women, particularly concerning childbirth, are damning. Continuing long-time work on the issue by collaborating with the Commission would be welcome. (Clavreul)

- ➡ The Co-Chairs will document these ideas and report back to the October Public Policy Committee. They will also review them during their next meeting with the BAAC Task Force. Email any additional ideas to the Co-Chairs.

b. Execute Measurable Objectives: Work is continuing in collaboration with the BAAC Task Force.

c. Methamphetamine Use and HIV

- Mr. Kochems reported he and Ms. Nelson met with Richard Zaldivar, Founder and Executive Director, The Wall Las Memorias Project, and some of his staff on their current series of town halls on methamphetamine use. Opportunities for collaboration were discussed and a presentation at an upcoming Public Policy Committee was being planned.
- Mr. Kochems discussed harm reduction strategies, in particular, user groups and other forms of harm reduction that empower communities rather than the "Act Against Meth" campaign which can be seen as stigmatizing. He highly recommended, *A War on People: Drug User Politics and A New Ethics of Community*, University of California Press, 2019, by Jarrett Zigon. It provides helpful information on efforts in Vancouver and New York.
- This topic was also raised with the BAAC Task Force as, like other SDH, it pertains to the population. The topic was also addressed at the Consumer Caucus. Each population should be addressing SDH which pertain to them.
- Mr. King said he designed the original Crystal Meth Task Force funded by LAC and based on a California Endowment demonstration project. He believed Mr. Zaldivar led one of the funded task forces. Millions of state dollars were brought to bear, mainly due to advocacy by Black men in West Hollywood. Then attention, resources, and efforts ended. As someone 26 years clean and sober, who sponsors several people, and who has started a meeting for people in recovery in South Los Angeles, he urged engaging people dealing with addiction and the process of recovery rather than just surface providers. The last effort was agency centered and isolated many that the effort was intended to help.
- ➡ Ms. Barrit will follow up on scheduling a presentation with Mr. Zaldivar. This item will remain on the agenda for now.

d. Master Aging Plan Update

- Ms. Nelson noted the next meeting of the Master Plan for Aging (MPA) Stakeholder Advisory Committee (SAC) will be 9/15/2020, 10:00 am to 3:00 pm, including a break. She will attend and make a comment supporting PLWH services.
- San Francisco Principles 2020 was developed by a group of people from the area to address effects of HIV on aging and what PLWH need to age well. A sign-on was available. She will discuss the document more at the Aging Task Force.
- ➡ Ms. Nelson posted links to both items in the Chat.

V. DISCUSSION ITEMS

7. STATE POLICY AND BUDGET UPDATE: Congress has reportedly reached a deal for a Continuing Resolution (CR) through 12/11/2020 to cover routine budget matters only, e.g., no COVID-19 relief. The current budget expires 9/30/2020.

a. 2020-2021 Legislative Docket Update: The Docket was updated with the status of bills. Governor Gavin Newsom has until 9/30/2020 to sign or veto bills. If he does neither, a bill becomes law. An update should be available for the next meeting.

b. Ballot Measures

- Mr. Kochems noted the Commission rarely takes a position unless a Proposition serves Policy Priorities. The Board rarely takes positions either. It has only taken a position on Proposition 15 this year.

- Ms. Barrit included a link to the League of Women Voters of California recommendations in the Chat. Ms. Nelson added the Organizing Committee for the Ending The Epidemics (ETE) Coalition has also been reviewing measures in preparation for the Coalition's meeting on 9/16/2020.
- The Committee reviewed the Propositions as follows:
 - ↳ Proposition 14: Authorizes bonds continuing stem cell research - **Watch, may pertain to HIV biomedical research**
 - ↳ Proposition 15: Increases funding sources for public schools, community colleges, and local government services by changing tax assessment of commercial and industrial property; **LAC supports - Yes, more funding may be leveraged with advocacy to support HIV, Hepatitis C, and STD services**
 - ↳ Proposition 16: Allows diversity as a factor in public employment, education, and contracting decisions - **Yes, helps address disparities, SDH tied to economic opportunities, and increases equity**
 - ↳ Proposition 17: Restores right to vote after completion of prison term - **Yes, reduces barriers**
 - ↳ Proposition 18: Amends California Constitution to permit 17-year-olds to vote in primary and special elections if they will turn 18 by the next general election and be otherwise eligible to vote - **Yes, reduces barriers**
 - ↳ Proposition 19: Changes certain property tax rules - **No position, not directly relevant**
 - ↳ Proposition 20: Restricts parole for certain offenses currently considered to be non-violent. Authorizes felony sentences for certain offenses currently treated only as misdemeanors - **No, moves towards tough on crime**
 - ↳ Proposition 21: Expands local government's authority to enact rent control on residential property - **Yes, helps manage inflation of housing costs**
 - ↳ Proposition 22: Exempts app-based transportation and delivery companies from providing employee benefits to certain drivers - **Watch, sponsored by Uber and Lyft, repeals AB 5, effective 1/1/2020, making app-based transportation drivers employees with benefits; provides some benefits to drivers as independent contractors; some drivers prefer - others do not; companies may withdraw services from state if it does not pass which is a consumer concern raised at Transgender Caucus**
 - ↳ Proposition 23: Establishes state requirements for kidney dialysis clinics; requires on-site medical professional - **Watch, similar to prior proposition with concerns for quality on one hand and clinic closures on other**
 - ↳ Proposition 24: Amends consumer privacy laws - **No position, not directly relevant**
 - ↳ Proposition 25: Referendum on law that replaced money bail with system based on public safety and flight risk - **Watch, review was ongoing, could spare those with fewer resources from unnecessary incarceration**
 - ↳ LAC Measure J: Amends LAC Charter to designate at least 10% of locally generated unrestricted revenue to community investment initiatives - **Yes, supports services**
- ➡ Proposition 22: Ms. Nelson will check on National Hispanic Council on Aging and the California Senior Advocacy League positions and report back.
- ➡ Proposition 23: Ms. Nelson will request information on its opposition from the Co-Chair of the Cal Hep Task Force.
- ➡ Agreed to add to Docket with positions, as noted: 14-Watch, 15-Yes, 16-Yes, 17-Yes, 18-Yes, 20-No, 21-Yes, 22-Watch, 23-Watch, 25-Watch, J-Yes. No position is taken on 19 and 24.

8. **FEDERAL POLICY UPDATE:** Lambda Legal sued the Department of Health and Human Services (HHS) and won a preliminary injunction regarding the regulatory definition of "on the basis of sex" under Section 1557 of the Affordable Care Act (ACA).

9. **COUNTY POLICY UPDATE**

- a. **Fiscal Year 2020-2021 Measure H and Homeless Housing, Assistance and Prevention (HHAP) Funding Recommendations:**
There was no report.
- a. **STD Epidemic Update:** There was no report.
- b. **Housing Saves Lives: HUD Rule Change Serving Transgender Persons**
 - A joint statement was included at the end of the packet against the rule change which would allow shelters to refuse entry to single-sex housing based on a person's gender identity. The Commission has also submitted public comments.
 - Comments highlight stable housing as a health intervention for PLWH and to reduce transmission. Transgender people are disproportionately impacted by HIV so the rule is inconsistent with Ending the HIV Epidemic goals (EHE)
 - The Board of Supervisors (Board) has taken a position consistent with those comments.
 - ➡ Agreed to forward comments to the Executive Committee for approval. (A formal Public Policy Committee motion was not feasible because it was not agendized for this month and the public comment period closes in September 2020.)

VI. NEXT STEPS

10. **TASK/ASSIGNMENTS RECAP:** There was no additional discussion.
11. **AGENDA DEVELOPMENT FOR NEXT MEETING:** There was no additional discussion.

VII. ANNOUNCEMENTS

12. **OPPORTUNITY FOR PUBLIC AND COMMITTEE TO MAKE ANNOUNCEMENTS:** There were no announcements.

VIII. ADJOURNMENT

13. **ADJOURNMENT:** The meeting adjourned at 4:07 pm.



COMMISSION MEMBER "CONFLICTS-OF-INTEREST"

Updated 09/04/20

The following list identifies "conflicts-of-interest" for Commission members who represent agencies with Part A/B –and/or CDC HIV Prevention-funded service contracts with the County of Los Angeles. According to Ryan White legislation, HRSA guidance and Commission policy, Commission members are required to state their "conflicts-of-interest" prior to priority- and allocation-setting and other fiscal matters concerning the local HIV continuum of care, and to recuse themselves from discussions involving specific service categories for which their organizations have service contracts.

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
ALVAREZ	Miguel	No Affiliation	No Ryan White or prevention contracts
BALLESTEROS	AI	JWCH, INC.	Ambulatory Outpatient Medical (AOM)
			Benefits Specialty
			Case Management, Transitional
			Health Education/Risk Reduction (HERR)
			HIV Counseling and Testing (HCT)
			Medical Care Coordination (MCC)
			Mental Health, Psychotherapy
			Mental Health, Psychiatry
			Oral Health
			Biomedical Prevention
BURTON	Alasdair	No Affiliation	No Ryan White or prevention contracts
CAMPBELL	Danielle	UCLA/MLKCH	HIV/AIDS Oral Health Care (Dental) Services
			HIV/AIDS Medical Care Coordination Services
			HIV/AIDS Ambulatory Outpatient Medical Services
			HIV/AIDS Medical Care Coordination Services
			nPEP Services

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
CATALDO	Raquel	Tarzana Treatment Center	Ambulatory Outpatient Medical (AOM)
			Benefits Specialty
			Case Management, Home-Based
			HCT - Mobile Testing Unit
			HCT - Storefront
			Health Education/Risk Reduction
			Biomedical HIV Prevention
			Medical Care Coordination (MCC)
			Mental Health
			Substance Abuse, Transitional Housing meth)
			Transitional Case Management-Jails
			Benefits Specialty (SPA 1)
			Medical Transportation (SPA 1)
			Oral Healthcare Services (SPA1)
COFFEY	Pamela	Unaffiliated consumer	No Ryan White or prevention contracts
DANIELS	Michele	Unaffiliated consumer	No Ryan White or prevention contracts
DARLING-PALACIOS	Frankie	Los Angeles LGBT Center	Ambulatory Outpatient Medical (AOM)
			HCT - Routine Testing
			HCT - Storefront
			Health Education/Reduction Risk
			Biomedical HIV Prevention
			Medical Care Coordination (MCC)
			STD Screening, Diagnosis and Treatment
			Promoting Healthcare Engagement Among Vulnerable Populations
DAVIES	Erika	City of Pasadena	HCT - Storefront
FOX	Aaron	Los Angeles LGBT Center	Ambulatory Outpatient Medical (AOM)
			HCT - Routine Testing, Storefront
			Health Education/Risk Reduction
			Biomedical HIV Prevention
			Medical Care Coordination (MCC)
			STD Screening, Diagnosis and Treatment
			Promoting Healthcare Engagement Among Vulnerable Populations

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
GATES	Jerry	AETC	Part F Grantee
GONZALEZ	Felipe	Unaffiliated consumer	No Ryan White or Prevention Contracts
GORDON	Bridget	Unaffiliated consumer	No Ryan White or prevention contracts
GRANADOS	Grissel	Children's Hospital Los Angeles	Ambulatory Outpatient Medical (AOM)
			Case Management, Transitional - Youth
			Promoting Healthcare Engagement Among Vulnerable Populations
			HIV Counseling and Testing (HCT)
			Medical Care Coordination (MCC)
			Biomedical Prevention
GREEN	Joseph	Unaffiliated consumer	No Ryan White or prevention contracts
GREEN	Thomas	APAIT (aka Special Services for Groups)	HCT - Storefront
			Mental Health
HALFMAN	Karl	California Department of Public Health, Office of AIDS	Part B Grantee
JOHNSON	Diamante	Unaffiliated consumer	No Ryan White or prevention contracts
KOCHEMS	Lee	Unaffiliated consumer	No Ryan White or prevention contracts
KING	William	W. King Health Care Group	No Ryan White or prevention contracts
LEE	David	Charles R. Drew University of Medicine and Science	Benefits Specialty
			HCT - Storefront & MTU
			Ambulatory Outpatient Medical (AOM)
MARTINEZ	Eduardo	AIDS Healthcare Foundation	Ambulatory Outpatient Medical (AOM)
			Benefits Specialty
			Medical Care Coordination (MCC)
			HCT-Storefront, Mobile Testing Unit
			Mental Health
			Medical Subspecialty
			Oral Healthcare Services
			HIV and STD Prevention Services in Long Beach
			STD-Screening, Diagnosis,&Treatment

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
MILLS	Anthony	Southern CA Men's Medical Group	Ambulatory Outpatient Medical (AOM)
			Biomedical Prevention
			Medical Care Coordination (MCC)
			Promoting Healthcare Engagement Among Vulnerable Populations
MORENO	Carlos	Children's Hospital, Los Angeles	Ambulatory Outpatient Medical (AOM)
			HCT-Storefront
			Biomedical HIV Prevention
			Medical Care Coordination (MCC)
			Transitional Case Management-Youth
Promoting Healthcare Engagement Among Vulnerable Populations			
MURRAY	Derek	City of West Hollywood	No Ryan White or prevention contracts
NELSON	Katja	APLA Health & Wellness	Case Management, Home-Based
			Benefits Specialty
			Nutrition Support
			HCT - Storefront
			Health Education/Risk Reduction (HERR)
			Health Education/Risk Reduction (HERR), Native American
			Biomedical HIV Prevention
			Oral Healthcare Services
			Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)
HIV and STD Prevention Services in Long Beach			
PERÉZ	Mario	Los Angeles County, Department of Public Health, Division of HIV and STD Programs	Ryan White/CDC Grantee
PRECIADO	Juan	Northeast Valley Health Corporation	Mental Health, Psychotherapy
			Benefits Specialty
			Mental Health, Psychiatry
			Oral Health
			Ambulatory Outpatient Medical (AOM)
Medical Care Coordination (MCC)			

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
RAY	Joshua	Unaffiliated consumer	No Ryan White or prevention contracts
ROGEL	Nestor	Alta Med	Ambulatory Outpatient Medical (AOM)
			Benefits Specialty
			Case Management, Home-Based
			HCT Mobile Testing
			HIV Biomedical Prevention
			Medical Care Coordination (MCC)
			Mental Health
			Oral Healthcare Services
			Transitional Case Management
			Promoting Healthcare Engagement Among Vulnerable Populations
ROSALES	Ricky	City of Los Angeles AIDS Coordinator	No Ryan White or prevention contracts
SATTAH	Martin	Rand Schrader Clinic LA County Department of Health Services	Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)
			Mental Health
SAN AGUSTIN	Harold	JWCH, INC.	Ambulatory Outpatient Medical (AOM)
			Benefits Specialty
			Case Management, Transitional
			Health Education/Risk Reduction (HERR)
			HIV Counseling and Testing (HCT)
			Medical Care Coordination (MCC)
			Mental Health, Psychotherapy
			Mental Health, Psychiatry
			Oral Health
			Biomedical Prevention
SPENCER	LaShonda	LAC & USC MCA Clinic	Ambulatory Outpatient Medical (AOM)
			Medical Care Coordination (MCC)
SPEARS	Tony	Capitol Drugs	No Ryan White or prevention contracts
STALTER	Kevin	Unaffiliated consumer	No Ryan White or prevention contracts
ULLOA	Maribel	HOPWA-City of Los Angeles	No Ryan White or prevention contracts
VALERO	Justin	California State University, San Bernardino	No Ryan White or prevention contracts

COMMISSION MEMBERS		ORGANIZATION	SERVICE CATEGORIES
WALKER	Kayla	No Affiliation	No Ryan White or prevention contracts
WILSON	Amiya	Unique Women's Coalition	No Ryan White or prevention contracts

For Executive Committee Review
Approved by Public Policy Committee - 3/2/2020



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2020 POLICY PRIORITIES

The Public Policy Committee recommends the following policy priorities (in no particular order) for the Commission on HIV to focus on in 2020:

1. Preserve access to and continuity of care for people living with HIV/AIDS (PLWHA) and communities at highest risk for the acquisition and transmission of HIV disease.
 - Preserve or increase federal funding for Medicaid, Medicare, and for HIV/AIDS programs.
 - Preserve or increase health insurance coverage for individuals with pre-existing conditions.
2. Protect and expand service access and availability for syndemic HIV, STD, and viral hepatitis in California's annual budgeting process and ensure the impact of services and allocation of resources are distributed in accordance to the HIV burden within Los Angeles County.
3. Preserve or increase the Ryan White Program at current or increased funding levels and, where appropriate and strategically viable, support stronger compatibility and greater effectiveness between the RWP, Medicaid, Medicare, and other health systems.
4. Advance and enhance routine HIV testing, expanded linkage to care, and other improvements to the local, state, and national HIV service delivery systems that optimize health outcomes in the HIV Continuum and advance HIV services in LA County consistent with efforts to end the HIV epidemic.
5. Support policies that use data, without risking personal privacy and health, to improve health outcomes and eliminate health disparities among PLWHA and communities highly impacted by HIV/STDs.
6. Enhance accountability for deliverables from a heightened and coordinated federal, state, and local response, particularly in the context of local planning and responsiveness to end the HIV epidemic.
7. Support proposals and increased funding for the provision of and access to: prevention, care and treatment services, bio-medical interventions (such as PrEP and PEP) for people at risk for acquiring HIV and people living with HIV/AIDS, and comprehensive HIV/STD counseling, testing, education, outreach, research, harm reduction services including syringe exchange, and social marketing programs.
8. Support proposals that seek to advance health equity, reduce HIV-related stigma, and address social determinants of health such as poverty, education, violence, substance use, food insecurity, and transportation in order to improve health outcomes for PLWHA and special populations at highest risk for contracting HIV.
9. Preserve or improve systems, strategies and proposals that seek to expand affordable housing, as well as prioritize housing opportunities for people living with, affected by, or at risk of contracting HIV/AIDS.



10. Preserve or improve systems, strategies, and proposals that seek to prevent homelessness for people living with, affected by, or at risk of contracting HIV/AIDS.
11. Support proposals that seek to create and expand medical and supportive services for PLWHA ages 50 and over.
12. Support proposals that eliminate discrimination against or the criminalization of people living with or at risk of HIV/AIDS.
13. Support proposals that expand access and reduce barriers and cost of HIV/AIDS, STD, and viral hepatitis prevention and treatment medication.
14. Preserve full funding and accessibility to the AIDS Drug Assistance Program (ADAP), Pre-Exposure Prophylaxis Assistance Program (PrEP-AP), Office of AIDS Health Insurance Premium Payment (OA-HIPP) Assistance, Employer Based Health Insurance Premium Payment (EB-HIPP), and Medigap.
15. Support proposals and policies that prioritize mental health services for people living with, affected by, or at risk of contracting HIV/AIDS.
16. Support proposals and policies, especially in the event of Ryan White Reauthorization, that advocate for and encourage the empowerment and engagement of consumer PLWHA and those at risk for contracting HIV on all levels of policy creation, legislation, regulation, and service provision related to HIV prevention and treatment and care with the goal of ending all HIV transmissions and curing all PLWHA.

The Public Policy Committee acts in accordance with the role of the Commission on HIV, as dictated by Los Angeles County Code 3.29.090. Consistent with Commission Bylaws Article VI, Section 2, no Ryan White resources are used to support Public Policy Committee activities.

END THE EPIDEMICS

It's time to end the HIV, HCV & STD
epidemics in California.

End the Epidemics Racial Justice Working Group Condemns Policy Brutality and White Supremacist Violence September 22, 2020

The End the Epidemics Racial Justice Working Group condemns the ongoing police brutality and violence perpetrated against Black, Indigenous and People of Color (BIPOC) in California and across the United States. Racism is a public health crisis and we will not end the HIV, HCV, and STD epidemics until we address the systemic racism that is embedded in nearly every facet of our society.

Fear is a dangerous thing and the ongoing cycle of brutal violence, beatings, modern day lynchings, and murders at the hands of police and those empowered by a broken system are all due to an escalating cycle of fear and unwillingness to allow BIPOC to simply exist with liberty and justice for all, just as it says in the Pledge of Allegiance. Racism, the need to dominate others, a false sense of entitlement, and hatred are all based in fear. These are the elements that prompt young white people to march down the street with guns, white supremacists to attack and kill protestors, and voting rights to be manipulated. Fear infects our society, creating division, and making us all weak. We do not abide by a society that gives some of its members false privilege and allows them to turn a blind eye, yet is based on the claim that "all men are created equal under the law."

To those who would say "shut up and dribble" we say: We do not recognize you who try to claim power to control us. You do not have the power to push us down, to make us invisible, and to cancel out our rights. Promoting the buy back of guns in BIPOC neighborhoods to "save our streets," while encouraging white people to arm themselves is against humanity. This promotion unfortunately lends itself toward a call to arms for white people as a way to protect the status quo and a culture dominated by white supremacist thinking. For those who attempt to arm themselves against us, your right to bear arms does not cancel out our right to bear them, in addition to our rights to free speech, freedom of assembly, and justice under the law.

And to those who preferentially allow only police and white citizens permission to perpetrate violence against others with no regard for their culpability under the law we say: THAT TIME HAS PASSED! We must do more than work to address disparities in health outcomes, we have to act to dismantle the systems that perpetuate oppression and inequities. It is time for

intervention, education, training in civility, humility, and demilitarization of the police. So often we are silent in the shadows observing, working to “stay in our lane,” but not anymore! Life, liberty, and justice for all is everyone’s right and there are no longer lanes to stay in! WE STAND IN SOLIDARITY FOR WHAT IS RIGHT! WE WILL BE SILENT NO MORE!

For more information, contact Dr. Demisha Burns, End the Epidemics Racial Justice Co-Chair, clarystrategies@gmail.com.

End the Epidemics is committed to ending the syndemic of HIV, hepatitis C (HCV) and sexually transmitted diseases (STDs) in California, with a focus on advocating for anti-racist policies and funding priorities to eliminate health inequities among people of African descent/African Americans/Black, Latino/a/x, Indigenous populations and all people of color (POC).



LOS ANGELES COUNTY
COMMISSION ON HIV



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**PUBLIC POLICY COMMITTEE
PUBLIC COMMENTSUBMITTED TO HOUSING SAVES LIVES REGARDING
PROPOSED RULE CHANGE BY HUD AND DENYING ACCESS TO HOUSING FOR
TRANSGENDER INDIVIDUALS**

HUD must maintain protections for transgender people under the Equal Access Rule in order to support your own administration's priority to end HIV by 2030 (<https://www.hiv.gov/federal-response/ending-the-hiv-epidemic/overview>).

For people living with HIV/AIDS (PLWHA) and those at a high-risk of contracting HIV, stable housing is the most effective health intervention, over time having a bigger impact on preventing transmission and retaining PLWHA in medical care than demographics, health status, insurance coverage, mental illness and substance abuse, or other supportive services. Nationally, transgender individuals make up .06% of the population, but HOPWA grantees report that 3% of their client populations identify as transgender. Moreover, transgender women of color have an almost 1 in 2 chance of becoming HIV-infected during their lifetime. In Los Angeles County, transgender individuals shoulder a disproportionate burden of HIV, with poorer health outcomes across the HIV continuum.

HUD has documented this link between housing instability and both delayed HIV diagnosis and increased risk of acquiring and transmitting HIV infection. Homelessness and unstable housing are strongly associated with inadequate access to healthcare and poor health outcomes. It is important to note that as an infectious disease without a cure, HIV/AIDS continues to be a critical public health issue, and there is a disproportionate risk of transmission and lack of healthcare among the homeless and unstably housed. Stable housing supports more frequent HIV testing and is linked to fewer new transmissions. The three-pronged benefit of stable housing for PLWHA, increased testing, and fewer transmissions will help bring LA County and the Nation one step closer to realizing the federal initiative to end HIV by 2030.



2020-2021 Legislative Docket

Commission Approved 06/11/2020 – [Updated for 10/05/2020 Meeting](#)

POSITIONS: SUPPORT | OPPOSE | SUPPORT w/AMENDMENTS | OPPOSE unless AMENDED | WATCH | County bills noted w/asterisk

BILL	TITLE	DESCRIPTION / COMMENTS	RECOMMENDED POSITION	STATUS
AB 362 (Eggman)	Controlled substances: overdose prevention program	This bill would, until January 1, 2026, authorize the City and County of San Francisco <i>and the City of Oakland</i> to approve entities to operate overdose prevention programs for persons 18 years of age or older that satisfy specified requirements. http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201920200AB362	Support	08/01/20 Hearing Canceled with Author's Request
AB 683 (Carrillo)	Medi-Cal: eligibility	This bill would update the assets limits for programs serving seniors to \$10,000 for an individual and an additional \$5,000 for each additional household member, with annual indexing; expand and simplify the list of items to be excluded from the assets test for those Medi-Cal programs still subject to the assets test; and eliminate the assets test entirely for the Medicare Savings Programs, programs where Medi-Cal pays for an individual's Medicare premiums and co-payments. https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201920200AB683	Support 2019 Docket: Support	6/23/20 Referred to Committee on Health
AB 732 (Bonta)	County jails: incarcerated pregnant persons	This bill would improve the quality of reproductive health care for pregnant people in county jails and state prisons: require an incarcerated person in a county jail or the state prison who is identified as possibly pregnant or capable of becoming pregnant to be offered a pregnancy test upon intake or request, and in the case of a county jail, within 72 hours of arrival at the jail, require an incarcerated person who is confirmed to be pregnant to be scheduled for pregnancy examination with a physician, nurse practitioner, certified nurse midwife, or physician assistant within 7 days, require incarcerated pregnant persons to be scheduled for prenatal care visits, provided specified prenatal services and a referral to a social worker, given access to community-based programs serving pregnant, birthing, or lactating inmates, have a support person present during childbirth, and more. https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201920200AB732 <i>Committee questions:</i> (Received email response from bill sponsor ACLU on 4/3/20) - <i>Can community-based organizations appeal if they are denied access to support a client or potential client? Grievances may be filed; grievance process depends on whether the grievance is considered a healthcare grievance or non-health related grievance.</i>	Support	<i>09/30/20 Approved by Governor</i>

Commission Approved 06/11/2020 – Update 10/05/2020

BILL	TITLE	DESCRIPTION / COMMENTS	RECOMMENDED POSITION	STATUS
<p>AB 890 (Wood)</p>	<p>Nurse practitioners: scope of practice: practice without standardized procedures</p>	<p>Existing law authorizes the implementation of standardized procedures that authorize a nurse practitioner to perform in collaboration with a physician and surgeon. A violation of the act is a misdemeanor. <i>This bill, until January 1, 2026, would establish the Advanced Practice Registered Nursing Board which would consist of 9 members. Nurse Practitioner Advisory Committee to advise and give recommendations to the board on matters relating to nurse practitioners.</i> The bill would require the board to define minimum standards for a nurse practitioner to transition to practice without the routine presence of a physician and surgeon. <i>The bill would require the committee to provide recommendations or guidance to the board when the board is considering disciplinary action against a nurse practitioner. The bill would require the occupational analysis to be completed by January 1, 2023.</i></p> <p>https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201920200AB890</p>	<p>Support</p> <p>2019 Docket: Support</p>	<p>09/29/20 Approved by Governor</p>
<p>AB 1938 (Weiner)</p>	<p>Prescription drugs: 340B discount drug purchasing program.</p>	<p><i>This bill would define a “designated entity” as a nonprofit organization. The bill would prohibit a designated entity from using any revenue from a contract with the department, a contract with the federal Centers for Medicare and Medicaid Services, and from the 340B program on specified activity, such as funding litigation under the California Environmental Quality Act. The bill would require a designated entity, and any subsidiary of that entity, to annually report on its internet website specified information, including the amount of gross revenue generated from a contract with the department, a contract with the federal Centers for Medicare and Medicaid Services, and from the 340B program for the previous year, and would condition the implementation of these provisions to the extent that federal financial participation is available and federal approvals are obtained.</i></p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201920200AB1938</p>	<p>Watch</p>	<p>05/19/20 From committee: Do pass and re-refer to Committee on Appropriations</p>
<p>AB 1965 (Aguiar-Curry)</p>	<p>Family Planning, Access, Care, and Treatment (Family PACT) Program</p>	<p>Existing law establishes the Family PACT Program under Medi-Cal, under which comprehensive clinical family planning services are provided to a person who is eligible and has a family income at or below 200% of the federal poverty level. Existing law provides that comprehensive clinical family planning services under the program includes preconception counseling, maternal and fetal health counseling, and general reproductive health care, among other things. This bill would expand comprehensive clinical family planning services under the program to include the human papillomavirus (HPV) vaccine for persons of reproductive age.</p> <p>http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201920200AB1965</p>	<p>Support</p>	<p>3/17/20 In Committee: Set, first hearing. Hearing canceled at the request of author.</p>

Commission Approved 06/11/2020 – Update 10/05/2020

BILL	TITLE	DESCRIPTION / COMMENTS	RECOMMENDED POSITION	STATUS
AB 2007 (Salas)	Medi-Cal: federally qualified health center: rural health clinic: telehealth	<p>FQHC and RHC services are reimbursed to providers on a per-visit basis, and a “visit” is defined as a face-to-face encounter between a patient of an FQHC or RHC and specified health care professionals, including dental providers. The bill would clarify, for purposes of an FQHC or RHC visit, that face-to-face contact between a health care provider and a patient is not required for an FQHC or RHC to bill for telehealth.</p> <p>http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201920200AB2007</p>	Support	<p>3/17/20 In Committee: Hearing postponed by committee.</p>
AB 2077 (Ting)	Hypodermic needles and syringes	<p>Existing law, until January 1, 2021 authorizes a physician or pharmacist to, without a prescription or permit, to furnish hypodermic needles and syringes for human use to a person 18 years of age or older, and authorizes a person 18 years of age or older to, without a prescription or license, obtain hypodermic needles and syringes solely for personal use from a physician or pharmacist, as a public health measure, as specified.</p> <p>This bill would extend this authority until January 1, 2026 and would make other conforming changes.</p> <p>http://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201920200AB2077</p>	Support	<p><i>09/29/20 Approved by Governor</i></p>
AB 2204 (Arambula)	Health care coverage: sexually transmitted diseases	<p>This bill would require a health care service plan contract or health insurance policy issued, amended, or renewed on or after January 1, 2021, to provide coverage for sexually transmitted disease testing, treatment, and referral at a contracting or noncontracting health facility at the same cost-sharing rate an enrollee or insured would pay for the same services received from a contracting health facility. The bill would require a plan or insurer to reimburse a noncontracting health facility providing sexually transmitted disease testing, treatment, and referral at the same rate at which it reimburses a contracting health facility for those covered services.</p> <p>http://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201920200AB2204</p> <p><i>Committee questions:</i></p> <ul style="list-style-type: none"> - <i>What is the billing process? How will organizations and clinics bill insurance?</i> 	<p>Watch *Need more info</p>	<p>3/02/20 Re-referred to Committee on Health.</p>

Commission Approved 06/11/2020 – Update 10/05/2020

BILL	TITLE	DESCRIPTION / COMMENTS	RECOMMENDED POSITION	STATUS
<p>AB 2218 (Santiago)</p>	<p>Transgender Wellness and Equity Fund</p>	<p>This bill would establish the Transgender Wellness and Equity Fund, for grants the purpose of funding grants, upon appropriation by the legislature, to transgender-led (Trans-led) organizations and hospitals, health care clinics, and other medical providers that provide gender-conforming health care services and have an established partnership with a Trans-led organization, to create, or fund existing, programs focused on coordinating trans-inclusive health care, as defined for people that identify as transgender, gender nonconforming, or intersex. The bill would appropriate \$15,000,000 from the General Fund to the Transgender Wellness and Equity Fund. to organizations serving people that identify as transgender, gender non-conforming of intersex (TGI), to create or fund TGI specific housing programs and partnerships with hospitals, health care clinics, and other medical providers to provide TGI focused health care, as defined and related education programs for health care providers.</p> <p>http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201920200AB2218</p>	<p>Support</p>	<p>09/26/20 Approved by Governor</p>
<p>AB 2258 (Reyes)</p>	<p>Doula care: Medi-Cal pilot program</p>	<p>A new bill targeting the maternal mortality crisis seeks to address pregnancy care inequities by requiring Medi-Cal to cover doulas. This bill would require the department to establish, commencing July 1, 2021, a full-spectrum doula care pilot program to operate for 3 years for pregnant and postpartum Medi-Cal beneficiaries residing in 14 counties that experience the highest burden of birth disparities in the state, and would provide that any Medi-Cal beneficiary who is pregnant is entitled to doula care.</p> <p>http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201920200AB2258</p>	<p>Support</p>	<p>2/20/20 Referred to Committee on Health.</p>
<p>AB 2275 (Nazarian)</p>	<p>State armories: homeless shelters: security</p>	<p>This bill would require, prior to shelter services commencing, that the county or city notify local law enforcement officers and request that officers make periodic visits to the armory on each night of operation.</p> <p>https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201920200AB2275</p> <p>Note: The County is in support of this bill.</p>	<p>Support</p>	<p>09/25/20 Approved by Governor</p>
<p>AB 2329 (Chiu)</p>	<p>Homelessness: statewide needs and gaps analysis</p>	<p>This bill, upon appropriation by the Legislature, would require the council to conduct, or contract with an entity to conduct, a statewide needs and gaps analysis, to among other things, identify state programs that provide housing or services to persons experiencing homelessness and create a financial model that will assess certain investment needs for the purpose of moving persons experiencing homelessness into permanent housing.</p> <p>http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201920200AB2329</p>	<p>Support</p>	<p>06/03/20 In Committee Held under submission.</p>

Commission Approved 06/11/2020 – Update 10/05/2020

BILL	TITLE	DESCRIPTION / COMMENTS	RECOMMENDED POSITION	STATUS
AB 2389 (Garcia)	Adult performers: employment rights	This bill would, on and after July 1, 2022, require adult entertainers and performers to complete a specified biennial training program regarding employee safety and working rights for adult entertainer workers to work in an adult entertainment video. The bill would, by January 1, 2022, require the Department of Industrial Relations to create the training program and to convene an advisory group, composed of specified representatives of the adult performance industry, to provide recommendations for the creation and dissemination of the training. https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201920200AB2389	Watch	03/02/20 Re-referred to Committee on Labor & Employment
AB 2405 (Burke)	Housing: children and families	This bill would declare that it is the policy of the state that every child and family individual has the right to safe, decent, and affordable housing, and would require the policy to consider homelessness prevention, emergency accommodations, and permanent housing. https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201920200AB2405 Committee questions: (Call w/Burke's office on 3/12) - How does the bill define family? Not defined at this time, anticipate it will broaden - Does the bill include youth experiencing homelessness? Not at this time, anticipate it will broaden. Already received requites to expand beyond children & families. - How is this plan different from existing plans? Could potentially be the same plan as long as the plan is measurable/includes metrics.	Watch/Support	09/28/20 Vetoed by Governor
SB 132 (Wiener)	(Corrections) The Transgender Respect, Agency, and Dignity Act	This bill commencing January 1, 2021 would, require the Department of Corrections and Rehabilitation to, during initial intake and classification <i>and in a private setting</i> , ask each individual entering into the custody of the department to specify the individual's gender identity and sex assigned at birth, and, if the individual's gender identity is different from their sex assigned at birth <i>whether the individual identifies as transgender, non-binary, or intersex</i> and their gender pronoun and honorific. https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201920200SB132	Support 2019 Docket: Support	09/26/20 Approved by Governor
SB 145 (Wiener)	Sex offenders: registration	This bill would exempt from mandatory registration under the act a person convicted of certain offenses involving minors if the person is not more than 10 years older than the minor and if that offense is the only one requiring the person to register. https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201920200SB145	Watch	09/11/20 Approved by Governor

Commission Approved 06/11/2020 – Update 10/05/2020

BILL	TITLE	DESCRIPTION / COMMENTS	RECOMMENDED POSITION	STATUS
SB 175 (Pan)	Health Care Coverage	<p>This bill would delete the requirement that a plan comply with the prohibition on lifetime or annual limits to the extent required by federal law, and would instead prohibit an individual or group health care service plan contract from establishing lifetime or annual limits on the dollar value of benefits for an enrollee, thereby indefinitely extending the prohibitions on lifetime or annual limits, except as specified. Because a willful violation of these provisions by a health care service plan would be a crime, the bill would impose a state-mandated local program.</p> <p>This bill would ban health insurers from imposing annual or lifetime limits on coverage and indefinitely extend the requirement for insurers to cover preventive care without patient cost sharing.</p> <p>https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201920200SB175</p> <p>Similar to SB 406 which repeals and adds to 1367.002 of the Health and Safety Code</p>	<p>Support</p> <p>2019 Docket: Support, County position: Watch</p>	<p>06/18/20 Referred to Committee on Health.</p>
SB 406 (Pan)	Health care coverage: Omnibus bill	<p>This bill would delete the requirement that a plan <i>or a health insurer</i> comply with the requirement to cover preventive health services without cost sharing to the extent required by federal law, and would instead require a group or individual health care service plan contract <i>or health insurer</i> to, at a minimum, provide coverage for specified preventive services without any cost-sharing requirements for those preventive services, thereby indefinitely extending those requirements. Because a willful violation of these provisions by a health care service plan would be a crime, the bill would impose a state-mandated local program.</p> <p>This bill would ban health insurers from imposing annual or lifetime limits on coverage and indefinitely extend the requirement for insurers to cover preventive care without patient cost sharing.</p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201920200SB406</p> <p>Similar to SB 175 which repeals and adds to 1367.001 of the Health and Safety Code</p>	<p>Support</p>	<p><i>09/29/20 Approved by Governor</i></p>
SB 741	Change of gender and sex identifier	<p><i>The bill would authorize a person to obtain a new marriage license and certificate, confidential marriage license and certificate, or birth certificate for their minor or adult child directly from the State Registrar or county clerk, as applicable, to reflect the person's change of gender and sex identifier to female, male, or nonbinary without a court order, if the person submits specific supporting documentation.</i></p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201920200SB741</p>	<p>Watch</p>	<p><i>Vetoed by Governor. Pending in Senate in Consideration of Governor's Veto</i></p>

Commission Approved 06/11/2020 – Update 10/05/2020

BILL	TITLE	DESCRIPTION / COMMENTS	RECOMMENDED POSITION	STATUS
SB 854 (Beall/ Wiener)	Health care coverage: Substance use disorders	<p>This bill will prohibit insurers from requiring authorization before coverage for FDA-approved prescriptions, like Medication Assisted Treatment (MAT). It will also place FDA-approved medications for treatment of substance use disorders on the lowest cost-sharing tier.</p> <p>https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201920200SB854</p>	Support	04/24/20 From committee with author's amendments. Read second time and amended. Re-referred to Committee on HEALTH.
SB 859 (Wiener)	Master Plan for HIV, HCV, and STDs	<p>This bill would require the Secretary of California Health and Human Services and the Chief of the Office of Aids to develop and implement a master plan on HIV, HCV, and STDs, for the purpose of improving the health of people living with, and vulnerable to, those conditions, reducing new transmissions, and ending these epidemics. The bill would require the secretary and chief to create a Master Plan on HIV, HCV, and STDs Stakeholder Advisory Committee and work with that advisory committee and relevant state agencies to identify recommended programs, policies, strategies, and funding necessary to implement the master plan.</p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201920200SB859</p>	Support	03/17/20 March 25 hearing postponed by committee.
SB 885 (Pan)	Sexually transmitted diseases	<p>This bill would specify that family planning services for which a Medi-Cal managed care plan may not restrict a beneficiary's choice of a qualified provider for STD testing and treatment. The bill would authorize an office visit to a Family PACT provider or Medi-Cal provider for specified STD-related services for uninsured, income-eligible patients, or patients with health care coverage who have confidentiality concerns, who are not at risk for experiencing or causing an unintended pregnancy, and who are not in need of contraceptive services, to be reimbursed at the same rate as comprehensive clinical family planning services.</p> <p>http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201920200SB885</p>	Support	05/12/20 Referral to Committees on Health, and Judiciary. rescinded due to the shortened 2020 Legislative Calendar.
SB 888 (Wiener)	Substance use disorder services: contingency management services	<p>This bill would, to the extent funds are made available in the annual Budget Act, expand substance use disorder services to include contingency management services, a preventative measure to ensure continuity of access to Medi-Cal healthcare services for beneficiaries and payments to providers in the event of a disruption. The bill would require the department to issue guidance and training to providers on their use of contingency management services for Medi-Cal beneficiaries who access substance use disorder services under any Medi-Cal delivery system, including the Drug Medi-Cal Treatment Program and the Drug Medi-Cal organized delivery system.</p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201920200SB888</p>	Support	03/11/20 Re-referred to Committee on Health.

Commission Approved 06/11/2020 – Update 10/05/2020

BILL	TITLE	DESCRIPTION / COMMENTS	RECOMMENDED POSITION	STATUS
<p>SB 932 (Wiener)</p>	<p>Communicable Diseases: COVID-19 Data Collection</p>	<p>This bill would require any electronic communicable disease reporting tool used tool used by local health officers for the purpose of reporting cases of communicable diseases to by the State Department of Public Health, and each local health officer department, as specified, to include the capacity to collect and report data relating to the sexual orientation and gender identity. of individuals who are diagnosed with coronavirus disease 2019 (COVID-19). The bill would also require a health care provider that knows of, or is in attendance on, a case or a suspected case of COVID-19 that knows of or is attendance on a case or suspected case of any specified communicable disease to report to the local health officer for the jurisdiction in which the patient resides, the patient's sexual orientation and gender identity, if known because the patient self-reports this information. By imposing new duties on local health officers, this bill would impose a state-mandated local program.</p> <p>This bill would declare that it is to take effect immediately as an urgency statute.</p> <p>https://leginfo.legislature.ca.gov/faces/billStatusClient.xhtml?bill_id=201920200SB932</p> <p>Previously HIV Counselor training bill. Language amended 5/5/2020 to current bill. Committee supported previous bill.</p>	<p>Support</p>	<p>09/26/20 Approved by Governor</p>
<p>SB 961 (Gonzalez)</p>	<p><i>The Equal Insurance HIV Act.</i></p>	<p>The Equal Insurance HIV Act will stop insurance companies from rejecting Californians from life and disability income insurance coverage based solely on their HIV status.</p> <p>https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201920200SB961</p>	<p>Support</p>	<p>Hearing set for 5/14/20 Postponed by Committee on Insurance.</p>
<p>SB 1255</p>	<p>Committee on Insurance</p>	<p>This bill, on and after January 1, 2023, would prohibit an insurer from declining an application or enrollment request for coverage under a policy or certificate for life insurance or disability income insurance based solely on the results of a positive HIV test, regardless of when or at whose direction the test was performed. However, the bill would not prevent or restrict an insurer from refusing to insure an applicant that is HIV positive, limiting the amount, extent, or kind of coverage for an applicant that is HIV positive, or charging a different rate to an applicant that is HIV positive, if the refusal, limitation, or charge is based on sound actuarial principals and actual or reasonably anticipated experience.</p> <p>Note: This bill is related to SB 961</p> <p>http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201920200SB1255</p>	<p>Watch</p>	<p>09/26/20 Approved by Governor</p>

Commission Approved 06/11/2020 – Update 10/05/2020

BILL	TITLE	DESCRIPTION / COMMENTS	RECOMMENDED POSITION	STATUS
BALLOT MEASURES				
Measure J	Re-Imagine LA	The measure would amend the Los Angeles County charter to invest approximately 10% of Net County Costs (County General Revenue) toward community investments and alternatives to incarceration services.	Support	November 3, 2020 Measure
Proposition 14	Stem Cell Research	Authorizes \$5.5 billion state bonds for: stem cell and other medical research, including training; research facility construction; administrative costs. https://voterguide.sos.ca.gov/propositions/14/	Watch	November 3, 2020 Measure
Proposition 15	California Schools and Local Communities Funding Act of 2020.	Changes Tax Assessment of Commercial and Industrial Property based on current market value, instead of purchase price providing \$6.5 billion to \$11.5 billion in new funding to local governments and schools. https://voterguide.sos.ca.gov/propositions/15/	Support (Los Angeles County Supports this bill)	Decide November 3, 2020 Measure
Proposition 16	Allows Diversity as A Factor in Public Employment, Education, And Contracting Decisions	Permits government decision-making policies to consider race, sex, color, ethnicity, or national origin in order to address diversity by repealing constitutional provision prohibiting such policies. https://voterguide.sos.ca.gov/propositions/16/	Support	November 3, 2020 Measure
Proposition 17	Restores Right to Vote After Completion OF Prison Term	Restores voting rights upon completion of prison term to persons who have been disqualified from voting while serving a prison term. https://voterguide.sos.ca.gov/propositions/17/	Support	November 3, 2020 Measure
Proposition 18	Permit 17-Year Old To Vote	Eligible 17-year-olds who will be 18 years old by the time of the next general election may vote in the primary election and any special elections preceding the general election. https://voterguide.sos.ca.gov/propositions/18/	Support	November 3, 2020 Measure
Proposition 19	Home Protection	Allows homeowners who are over 55, disabled, or wildfire/disaster victims to transfer primary residence's tax base to a replacement residence. Changes taxation of family-property transfers. Establishes fire protection services fund. https://voterguide.sos.ca.gov/propositions/19/	Watch	November 3, 2020 Measure
Proposition 20	Authorizes Felony Sentences For Certain Current Misdemeanors	Limits access to parole program established for non-violent offenders who have completed the full term of their primary offense by eliminating eligibility for certain offenses. https://voterguide.sos.ca.gov/propositions/20/	Oppose	November 3, 2020 Measure

Commission Approved 06/11/2020 – Update 10/05/2020

BILL	TITLE	DESCRIPTION / COMMENTS	RECOMMENDED POSITION	STATUS
Proposition 21	Local Government Authority to Enact Rent Control on Residential Property	Allows local governments to establish rent control on residential properties over 15 years old. Local limits on rate increases may differ from statewide limit. https://voterguide.sos.ca.gov/propositions/21/	Support	November 3, 2020 Measure
Proposition 22	Exempt App-Based Transportation and Delivery Companies from Providing Employee Benefits to Certain Drivers	Classifies app-based drivers as "independent contractors," instead of "employees," and provides independent-contractor drivers other compensation, unless certain criteria are met. https://voterguide.sos.ca.gov/propositions/22/	Watch	Decide November 3, 2020 Measure
Proposition 23	Requires On-Site Medical Professionals at Kidney Dialysis Clinics	Requires physician, nurse practitioner or physician assistant on site during dialysis treatment. Prohibits clinics from reducing services without state approval. Prohibits clinics from refusing to treat patients based on payment source. https://voterguide.sos.ca.gov/propositions/23/	Watch	November 3, 2020 Measure
Proposition 24	Amends Consumer Privacy Laws	Permits consumers to: prevent businesses from sharing personal information, correct inaccurate personal information, and limit businesses' use of "sensitive personal information," including precise geolocation, race, ethnicity, and health information. Establishes California Privacy Protection Agency. https://voterguide.sos.ca.gov/propositions/24/	No Position	November 3, 2020 Measure
Proposition 25	Bail System Based on Public Safety and Flight Risk	Replaces money bail with a system based on public safety and flight risk. https://voterguide.sos.ca.gov/propositions/25/	Watch	November 3, 2020 Measure

Commission Approved 06/11/2020 – Update 10/05/2020

BILL	TITLE	DESCRIPTION / COMMENTS	RECOMMENDED POSITION	STATUS
FEDERAL				
H.R. 266 (McCollum/Betty)	Paycheck Protection Program and Health Care Enhancement Act	This is the fourth legislative measure Congress has enacted in response to the Coronavirus pandemic. It provides additional funding for hospitals and COVID-19 testing, as well as additional funding to replenish Small Business Administration (SBA) programs. https://www.congress.gov/bill/116th-congress/house-bill/266?	Support	4/24/20 signed into law
H.R. 748 (Courtney/ Joe)	Coronavirus Aid Relief and Economic Security (CARES) Act	The third measure enacted to address the impacts of the Coronavirus pandemic on state and local governments, health care workers, law enforcement and first responders, small businesses and individual Americans. https://www.congress.gov/bill/116th-congress/house-bill/748?q	Support	3/27/20 signed into law
H.R. 5806 (Lewis)	HIV Epidemic Loan-Repayment Program (HELP) Act of 2020	The HIV Epidemic Loan-Repayment Program (HELP) Act responds to the increasing shortage of qualified healthcare professionals needed to provide care for people living with HIV by creating a new loan repayment program to help replenish the field of professionals. H.R. 5806 authorizes up to \$250,000 over five years in loan repayment to physicians, nurse practitioners, physician assistants, and dentists, who provide HIV treatment in health professional shortage areas or at Ryan White funded clinical sites. https://www.congress.gov/bill/116th-congress/house-bill/5806?s=1&r=15	Support	02/07/20 Referred to the House Committee on Energy and Commerce.
H.R. 6074 (Lowey/ Nita)	Coronavirus Preparedness & Response Supplemental Appropriations Act of 2020	This bill provides \$8.3 billion in emergency funding for federal agencies to respond to the coronavirus outbreak. https://www.congress.gov/bill/116th-congress/house-bill/6074	Support	03/06/20 signed into law

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From: [Diana Rubio](#)
Subject: Washington – Overview of Short-Term Continuing Resolution for Federal Fiscal Year 2021 - 9/21/20
Date: Monday, September 21, 2020 5:09:27 PM

Washington – Overview of Short-Term Continuing Resolution for Federal Fiscal Year 2021

Executive Summary

On September 21, 2020, House Democrats introduced H.R. 8319, the *Continuing Appropriations Act, 2021 and Other Extensions Act*, a short-term Continuing Resolution (CR). This CR would fund the Federal government at Federal Fiscal Year (FFY) 2020 levels through December 11, 2020, with a few exceptions, and extend funding for mandatory programs and several other programs that would otherwise expire at the end of the current fiscal year. The current fiscal year ends September 30, 2020.

Of note, the CR does not include County advocacy priorities related to the time extension for the use of COVID funding (including the Coronavirus Relief Fund) or the Federal Medical Assistance Percentage (FMAP) fix which have had bipartisan support.

This report includes a summary of the measure's key provisions of County interest. **This office is continuing to work with departments to assess the impact of this measure on the County.**

County-Supported Provisions

HEALTH

Medicaid – Delays through December 12, 2020 the statutory Medicaid disproportionate share hospital (DSH) payment reductions, currently scheduled to take effect on December 1, 2020. DSH payments provide critical funding to hospitals that serve a disproportionately high share of uninsured patients and Medicaid beneficiaries. **The County continues to advocate for measures that delay the scheduled cuts in DSH funding.**

GENERAL GOVERNMENT

2020 Decennial Census – Provides \$1.5 billion which may be apportioned up to the amount deemed necessary to conduct the 2020 Decennial Census Program. **The County will continue to advocate for additional resources and support for the 2020 Census as well as an extension of the 2020 Census response period.**

Provisions of County Interest

INFRASTRUCTURE

-

Federal Surface Transportation Programs – Extends the Fixing America’s Surface Transportation (FAST) Act by one year to September 30, 2021 at FFY 2020 funding levels. It also includes a \$13.7 billion transfer from the General Fund of the U.S. Treasury to the Highway Trust Fund in an effort to keep it solvent for the next fiscal year.

National Flood Insurance Act – Extends this program by one year to September 30, 2021.

HOMELESSNESS PROGRAMS

Homeless Veterans Programs – Includes extensions for the appropriation of various homeless veterans programs for two years, from September 30, 2020 to September 30, 2022, including the Homeless Veterans Reintegration Program and the Homeless Women Veterans and Homeless Veterans with Children Reintegration Program. These programs also include: referrals and counseling services for veterans at risk of homelessness; treatment and rehabilitation for seriously mentally ill and homeless veterans; supportive services for very-low income veteran families in permanent housing; and grants for homeless veterans with special needs.

HUMAN SERVICES

-

Domestic Food Programs – Allows for current year appropriations to be apportioned up to the rate of operations necessary to maintain current program caseloads.

GENERAL GOVERNMENT

Immigration Benefit Processing – Establishes the Emergency Stopgap U.S. Citizenship and Immigration Services (USCIS) Stabilization Act (Act), which increases the premium processing fees that are allowed under current law and permits USCIS to charge new, specified premium processing fees for additional petitions. These premium processing fees are in addition to the filing fees required by law. Eligible benefit applications will include: employment-based nonimmigrant petitions and associated applications for dependents of the beneficiaries of such petitions; employment-based immigrant petitions filed by or on behalf of immigrants; applications to change or extend non-immigrant status; applications for employment authorization; and any other immigration benefit type that the Secretary deems appropriate for premium processing. The Act indicates that initial premium amounts and methodology will be established through regulations and allows for a biennial fee adjustment based on the Consumer Price Index. Fees collected may only be used by USCIS to provide premium

processing services; make infrastructure improvements to adjudications processes and dissemination of information to benefit requestors; respond to immigration demands, including reducing the number of allowable requests; and otherwise offset the cost of providing adjudication and naturalization services. It also outlines the framework and fee schedule for premium processing services.

In addition, the Act requires USCIS, no less than 180 days after the CR is enacted, to establish a 5-year plan including projected cost estimates, procurement strategies, and a project schedule with milestones, to accomplish each of the following electronic capabilities: filing procedures, payment of fees, correspondence with requestors as well as improve processing times for benefit requests. USCIS is further required to provide specified Congressional committees semi-annual briefings on the implementation status of the 5-year plan.

Department of Veterans Affairs Expiring Authorities Act of 2020 – Provides the extension of authorities and funding set to expire on September 30, 2020 for programs related to veterans' healthcare, transfer of real property, transportation services, adapted housing assistive technology programs, and the Student Veteran Coronavirus Response Act of 2020, among others. It also extends pilot programs related to assistance for child care for certain veterans receiving healthcare, counseling for women veterans newly separated from service, graduate medical education and residency. Lastly, it increases the number of judges on the Court of Appeals for Veterans Claims.

Legislative Outlook

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The House is expected to vote on the CR this week and it is possible that amendments could be considered when the measure is brought to the floor. If approved by the House, Senate action could take place next week. The Senate could LAO seek additional changes which, if approved, would require another vote in the House.

We will continue to keep you advised.

Sent on behalf of:

*Samara Ashley
Assistant Chief Executive Officer
Legislative Affairs and Intergovernmental Relations
County of Los Angeles
(213) 974-1464
SAshley@ceo.lacounty.gov*

From: [Sandra Young](#)
Subject: Washington – Latest Update on Short-Term Continuing Resolution (CR) for Federal Fiscal Year 2021 - 9/30/20
Date: Wednesday, September 30, 2020 4:23:56 PM

Washington – Latest Update on Short-Term Continuing Resolution (CR) for Federal Fiscal Year 2021

On September 30, 2020, the U.S. Senate approved [H.R. 8337 Continuing Appropriations Act, 2021 and Other Extensions Act](#) by a vote of 84 to 10. The measure, which passed the House on September 22, 2020 by a vote of 359 to 57, is expected to be signed by the President immediately to avert a Federal government shutdown.

We will continue to keep you advised.

Sent on behalf of:

*Samara Ashley
Assistant Chief Executive Officer
Legislative Affairs and Intergovernmental Relations
County of Los Angeles
(213) 974-1464
SAshley@ceo.lacounty.gov*

From: Diana Rubio <DRubio@ceo.lacounty.gov>
Sent: Tuesday, September 22, 2020 6:12 PM
Subject: Washington – Update on Short-Term Continuing Resolution (CR) for Federal Fiscal Year 2021 - 9/22/20

Washington – Update on Short-Term Continuing Resolution (CR) for Federal Fiscal Year 2021

On September 22, 2020, the U.S. House of Representatives approved [H.R. 8319 - Continuing Appropriations Act, 2021 and Other Extensions Act](#) by a vote of 359 to 57. In addition to the previously agreed upon provisions, this version of the legislation now includes an agreement between Democrats and Republicans that extends the Pandemic EBT program for a full year and provides nearly \$8.0 billion in nutrition assistance for schoolchildren and families, extends flexibilities for states to lower administrative requirements for the Supplemental Assistance Nutrition Program (SNAP), and provides \$30.0 billion in borrowing authority for the Commodity Credit Corporation. This CR would fund the Federal government at Federal Fiscal Year (FFY) 2020 levels through December 11, 2020.

The U.S. Senate is expected to vote on the measure this week and President Trump is expected to sign the measure before the September 30, 2020 Federal fiscal year deadline.

We will continue to keep you advised.

Sent on behalf of:

*Samara Ashley
Assistant Chief Executive Officer
Legislative Affairs and Intergovernmental Relations
County of Los Angeles
(213) 974-1464
SAshley@ceo.lacounty.gov*

From: Diana Rubio <DRubio@ceo.lacounty.gov>

Sent: Monday, September 21, 2020 5:09 PM

Subject: Washington – Overview of Short-Term Continuing Resolution for Federal Fiscal Year 2021 - 9/21/20

Washington – Overview of Short-Term Continuing Resolution for Federal Fiscal Year 2021

Executive Summary

On September 21, 2020, House Democrats introduced H.R. 8319, the *Continuing Appropriations Act, 2021 and Other Extensions Act*, a short-term Continuing Resolution (CR). This CR would fund the Federal government at Federal Fiscal Year (FFY) 2020 levels through December 11, 2020, with a few exceptions, and extend funding for mandatory programs and several other programs that would otherwise expire at the end of the current fiscal year. The current fiscal year ends September 30, 2020.

Of note, the CR does not include County advocacy priorities related to the time extension for the use of COVID funding (including the Coronavirus Relief Fund) or the Federal Medical Assistance Percentage (FMAP) fix which have had bipartisan support.

This report includes a summary of the measure's key provisions of County interest. **This office is continuing to work with departments to assess the impact of this measure on the County.**

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Provisions of County Interest

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In addition, the Act requires USCIS, no less than 180 days after the CR is enacted, to establish a 5-year plan including projected cost estimates, procurement strategies, and a project schedule with milestones, to accomplish each of the following electronic capabilities: filing procedures, payment of fees, correspondence with requestors as well as improve processing times for benefit requests. USCIS is further required to provide specified Congressional committees semi-annual briefings on the implementation status of the 5-year plan.

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Legislative Outlook

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We will continue to keep you advised.

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