



**California Clinical Laboratory Association**  
**Legislative Status Report 4/5/2018**

**AB 180**

**Wood D**

**Medi-Cal.**

Text Version:

Amended: 5/26/2017

Position: Watch

[html](#) [pdf](#)

Status:

8/21/2017-Ordered to inactive file at the request of Senator Hernandez.

Existing law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. Existing law requires the department to develop and prepare one or more reports issued on at least a quarterly basis and make the reports public within 30 days for the purpose of informing the California Health and Human Services Agency, the California Health Benefit Exchange, the Legislature, and the public about the enrollment process for all insurance affordability programs. Existing law further requires the department to collect the data for these reports pursuant to specified administrative procedures. This bill would instead require these ongoing reports to be issued on at least a biannual basis and be made public within 90, rather than 30, days. The bill would further require the data within the reports to be aggregated and calculated on at least a quarterly basis. The bill would delete the requirement for the department to collect the data pursuant to the specified administrative procedures. This bill contains other related provisions and other existing laws.

An act to amend Sections 14094.18 and 14102.5 of the Welfare and Institutions Code, relating to Medi-Cal.

**AB 613**

**Nazarian D**

**Healing arts: clinical laboratories.**

Text Version:

Amended: 8/29/2017

Position: Watch High Importance

[html](#) [pdf](#)

Status:

9/5/2017-Ordered to inactive file at the request of Senator Newman.

Existing law provides for the licensure, registration, and regulation of clinical laboratories and various clinical laboratory personnel by the State Department of Public Health, with specified exceptions. A violation of those provisions is a crime. Existing law authorizes a person who is licensed under those provisions to perform certain laboratory tests. This bill, until January 1, 2020, would authorize a person with specified qualifications to perform a total protein test using a digital refractometer in a licensed plasma collection center in this state if specified circumstances are met, as determined by the department, including that the person meets certain education and training requirements. The bill would require the digital refractometer used to perform a total protein test pursuant to these provisions to meet specific criteria, including that it be used within 30 feet of the donor for whom the test is being conducted and performs total protein tests on plasma samples from the waived spun hematocrit test. The bill would require a licensed plasma collection center to maintain specified records and provide specified information to the department upon request, as well as provide an annual report of protein test results below the required lower limit, as specified. Because a violation of those provisions would be a crime, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

An act to add and repeal Section 1246.7 of the Business and Professions Code, relating to clinical laboratories.

**AB 1368**

**Calderon D**

**Health professionals: authorization forms.**

Text Version:

Amended: 6/29/2017

Position: Watch

[html](#) [pdf](#)

Status:

9/5/2017-Ordered to inactive file at the request of Senator Skinner.

Existing law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services. Existing law provides for a schedule of benefits and services under the Medi-Cal program, subject to utilization controls. Existing law provides that specified utilization controls may be applied to any specific service or group of services that are subject to utilization controls, including prior authorization requirements. Existing law also requires the department to administer other health programs, including the Genetically Handicapped Persons Program and the Child Health and Disability Prevention Program. This bill would require the department to allow a physician assistant or a nurse practitioner to sign any authorization form required by the department for benefits and services under the Medi-Cal program, the Genetically Handicapped Persons Program, or the Child Health and Disability Prevention Program, subject to specified criteria, including, among others, that the physician and the designated physician



to avoid CMV infection of those women. The bill would require the State Department of Health Care Services to make that information available on its Internet Web site and to provide the information to specified entities and individuals. This bill contains other related provisions and other existing laws.

An act to add Article 6.7 (commencing with Section 124123) to Chapter 3 of Part 2 of Division 106 of the Health and Safety Code, relating to newborns.

[AB 1802](#)

[Salas D](#)

**Optometry: scope of practice.**

Text Version:

Introduced: 1/9/2018

Position:

[html](#) [pdf](#)

Status:

1/22/2018-Referred to Com. on B. & P.

The Optometry Practice Act provides for the licensure and regulation of the practice of optometry by the State Board of Optometry, which is within the Department of Consumer Affairs. That act provides that the practice of optometry includes the prevention and diagnosis of disorders and dysfunctions of the visual system, and the treatment and management of certain disorders and dysfunctions of the visual system, as well as the provision of habilitative or rehabilitative optometric services, and doing certain things, including the examination of the human eye or eyes. Existing law authorizes an optometrist certified to use therapeutic pharmaceutical agents to, among other things, administer immunizations if the optometrist meets certain requirements. This bill would correct an erroneous cross-reference in the provision relating to the authority of an optometrist certified to use therapeutic pharmaceutical agents to administer immunizations, and would make other nonsubstantive changes.

An act to amend Section 3041 of the Business and Professions Code, relating to healing arts.

[AB 1860](#)

[Limón D](#)

**Health care coverage: cancer treatment.**

Text Version:

Introduced: 1/10/2018

Position: Watch

[html](#) [pdf](#)

Status:

1/29/2018-Referred to Com. on HEALTH.

Calendar:

4/24/2018 1:30 p.m. - State Capitol, Room 4202 ASSEMBLY HEALTH, WOOD, Chair

Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care. Existing law also provides for the regulation of health insurers by the Department of Insurance. Existing law prohibits, until January 1, 2019, an individual or group health care service plan contract or health insurance policy issued, amended, or renewed on or after January 1, 2015, that provides coverage for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells from requiring an enrollee or insured to pay, notwithstanding any deductible, a total amount of copayments and coinsurance that exceeds \$200 for an individual prescription of up to a 30-day supply of a prescribed orally administered anticancer medication, as specified. Under existing law, a willful violation of this prohibition by a health care service plan is a crime. This bill would extend the duration of this prohibition indefinitely. Because the bill would expand the scope of a crime, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

An act to amend Section 1367.656 of the Health and Safety Code, and to amend Section 10123.206 of the Insurance Code, relating to health care coverage.

[AB 1880](#)

[Fong R](#)

**Valley Fever reporting.**

Text Version:

Amended: 3/1/2018

Position: Watch

[html](#) [pdf](#)

Status:

3/20/2018-In committee: Set, first hearing. Hearing canceled at the request of author.

Existing law requires the State Department of Public Health to establish a list of reportable communicable and noncommunicable diseases and conditions and specify the timeliness requirements related to the reporting of each disease and condition. Existing law also supports research into the development of a vaccine to protect against coccidioidomycosis, also known as Valley Fever. This bill would require the department to collect data on coccidioidomycosis cases on or before April 1 each year, as specified. The bill would require the department, if it collects data on coccidioidomycosis cases and removes discrepant data from its internal data set, to timely report sufficient information about its removal of discrepant data to a local health officer in order that the local health officer may remove discrepant data from the county's data set. The bill would also require the department, if it publishes provisional data on coccidioidomycosis cases, to publish an explanation of data changes likely to occur and of discrepancies between data reported by a local health officer and data reported by the department. The bill would require the department to publish the date range of a data set and the date on which the data set was updated if the department publishes data on coccidioidomycosis cases.

An act to add Section 120132 to the Health and Safety Code, relating to public health.

[AB 1881](#)

[Fong R](#)

**Valley Fever testing.**

Text Version:

Amended: 3/14/2018

Position: Watch

[html](#) [pdf](#)

Status:

3/20/2018-In committee: Set, first hearing. Hearing canceled at the request of author.

Existing law requires the State Department of Public Health to establish a list of reportable communicable and noncommunicable diseases and conditions and specify the timeliness requirements related to the reporting of each disease and condition. Existing law also supports research into the development of a vaccine to protect against coccidioidomycosis, also known as Valley Fever. This bill would require the department to develop standardized methodology for coccidioidomycosis tests to ensure comparable sensitivity and specificity among laboratories, among other things.

An act to add Section 101161 to the Health and Safety Code, relating to health.

**AB 2088**

**Santiago D**

**Patient records: addenda.**

Text Version:

Introduced: 2/7/2018

Position: Watch

[html](#) [pdf](#)

Status:

4/4/2018-From committee: Do pass. To Consent Calendar. (Ayes 15. Noes 0.) (April 4).

Calendar:

4/5/2018 #33 ASSEMBLY SECOND READING FILE -- ASSEMBLY BILLS

Existing law requires a health care provider to allow an adult patient who inspects his or her patient records to provide to the health care provider a written addendum with respect to any item or statement in his or her records that the patient believes to be incomplete or incorrect. Existing law authorizes any minor patient authorized by law to consent to a medical treatment to inspect his or her patient records, as specified. A violation of these provisions is punishable as a crime. This bill would require a health care provider to allow a patient, regardless of his or her ages, who inspects his or her patient records to provide to the health care provider a written addendum with respect to any item or statement in his or her records that the patient believes to be incomplete or incorrect. By increasing the scope of a crime, this bill would create a state-mandated local program. The bill would additionally correct an erroneous cross reference. This bill contains other related provisions and other existing laws.

An act to amend Section 123111 of the Health and Safety Code, relating to patient records.

**AB 2122**

**Reyes D**

**Medi-Cal: Blood lead screening tests.**

Text Version:

Introduced: 2/8/2018

Position: Watch

[html](#) [pdf](#)

Status:

4/3/2018-In committee: Hearing postponed by committee.

Calendar:

4/17/2018 1:30 p.m. - State Capitol, Room 4202 ASSEMBLY HEALTH, WOOD, Chair

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid Program provisions. Under existing law, Medi-Cal covers early and periodic screening, diagnosis, and treatment for individuals under 21 years of age, consistent with federal law. This bill would require the Department of Health Care Services to ensure that a child enrolled in Medi-Cal receives blood lead screening tests at 12 and 24 months of age, and that a child 2 to 6 years of age, inclusive, receives a blood lead screening test if there is no record of a previous test for that child. The bill would require the department to report its progress toward blood lead screening tests for all enrolled children, as specified, annually on its Internet Web site, establish a case management monitoring system, and require health care providers to test enrolled children, as specified. The bill would further require the department to notify a child's parent, parents, guardian, or other person charged with his or her support and maintenance, and the child's health care provider, with specified information, including when a child has missed a required blood lead screening test, as specified.

An act to amend Section 14132 of, and to add Section 14132.015 to, the Welfare and Institutions Code, relating to Medi-Cal.

**AB 2130**

**Brough R**

**Taxation: Hazardous Substance Tax Law.**

Text Version:

Introduced: 2/12/2018

Position: Watch

[html](#) [pdf](#)

Status:

3/19/2018-In committee: Hearing postponed by committee.

Existing law requires that certain fees, including, among others, the hazardous waste disposal fees and hazardous waste facility and generator fees, be administered and collected by the California Department of Tax and Fee Administration in accordance with the Hazardous Substances Tax Law. Existing law requires a feepayer, within 30 days of the date of assessment, to deliver a remittance of the amount of those assessed fees to the office of the department. This bill would require a feepayer to deliver that remittance to the office of the department within 45 days, instead of 30 days, of the date of assessment.

An act to amend Section 43152.10 of the Revenue and Taxation Code, relating to taxation.

**AB 2139**

**Chiu D**

**Office of Statewide Health Planning and Development.**

Text Version:

Introduced: 2/12/2018

Position: Watch

[html](#) [pdf](#)

Status:

2/13/2018-From printer. May be heard in committee March 15.

Existing law establishes the Office of Statewide Health Planning and Development in the California Health and Human Services Agency. The office is vested with all the duties, powers, purposes, responsibilities, and jurisdiction of the State Department of

Public Health relating to health planning and research development. This bill would make a technical, nonsubstantive change to one of those provisions.

An act to amend Section 127000 of the Health and Safety Code, relating to public health.

[AB 2281](#) **Irwin D** **Clinical laboratories: licensed medical laboratory technicians.**  
Text Version: Introduced: 2/13/2018 Position: Support  
[html](#) [pdf](#)  
Status: 4/3/2018-From committee: Do pass and re-refer to Com. on APPR. (Ayes 16. Noes 0.) (April 3). Re-referred to Com. on APPR.

Existing law provides for the licensure, registration, and regulation of clinical laboratories and various clinical laboratory personnel by the State Department of Public Health. Existing law requires a medical laboratory technician to be licensed by the department, sets forth the duties that a licensed medical laboratory technician is authorized to perform, and prohibits a licensed medical laboratory technician from performing microscopic analysis or immunohematology procedures. This bill would exempt from that prohibition blood smear reviews, microscopic urinalysis, and blood typing of moderate complexity.

An act to amend Section 1260.3 of the Business and Professions Code, relating to clinical laboratories.

[AB 2342](#) **Burke D** **BRCA gene mutations: screening, counseling, and testing.**  
Text Version: Introduced: 2/13/2018 Position: Watch  
[html](#) [pdf](#)  
Status: 3/1/2018-Referred to Com. on HEALTH.  
Calendar: 4/24/2018 1:30 p.m. - State Capitol, Room 4202 ASSEMBLY HEALTH, WOOD, Chair

Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care, and makes a willful violation of its provisions a crime. Existing law provides for the regulation of health insurers by the Department of Insurance. Existing law requires every health care service plan contract and health insurance policy to provide coverage for screening for, diagnosis of, and treatment for, breast cancer, consistent with generally accepted medical practice and scientific evidence, upon the referral of the enrollee's or insured's participating physician. This bill would require health care service plans, health insurers, and the State Department of Health Care Services to cover screening, genetic counseling, and testing for BRCA gene mutations in women who have not been diagnosed with BRCA-related cancer and do not have signs or symptoms of the disease, but who may have an increased risk based on one or more of specified family history risk factors. By creating a new crime with respect to health care service plans, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

An act to add Sections 1367.615 and 104150.5 to the Health and Safety Code, and to add Section 10123.815 to the Insurance Code, relating to cancer.

[AB 2684](#) **Bloom D** **Parent and child relationship.**  
Text Version: Amended: 4/4/2018 Position: Watch  
[html](#) [pdf](#)  
Status: 4/4/2018-From committee chair, with author's amendments: Amend, and re-refer to Com. on JUD. Read second time and amended.  
Calendar: 4/10/2018 9 a.m. - State Capitol, Room 437 ASSEMBLY JUDICIARY, STONE, Chair

(1)The Uniform Parentage Act defines the parent and child relationship as the legal relationship existing between a child and the child's parents, and provides rebuttable presumptions as to the parentage of a child born under certain circumstances. The Uniform Act on Blood Tests to Determine Paternity provides the procedures for the use of genetic testing, as defined, to determine paternity. This bill would delete the name of the Uniform Act on Blood Tests to Determine Paternity and would revise and recast these provisions to, among other things, refer instead to genetic testing and parentage and to specify the procedures for genetic testing for parentage. The bill would also make various conforming changes to the Uniform Parentage Act, including changing references from paternity to parentage and to change the ways in which a voluntary declaration of parentage may be challenged. This bill contains other existing laws.

An act to amend Section 2032.010 of the Code of Civil Procedure, to amend Sections 7541, 7552.5, 7556, 7558, 7570, 7571, 7572, 7574, 7611, 7612, 7613, 7630, 7644, 7645, 7646, 7647, 7647.7, 7648, 7649, 7650, and 17412 of, to amend the headings of Article 1 (commencing with Section 7630) and Article 1.5 (commencing with Section 7645) of Chapter 4 of Part 3 of Division 12 of, to amend the headings of Chapter 2 (commencing with Section 7550) and Chapter 3 (commencing with Section 7570) of Part 2 of Division 12 of, to amend the heading of Part 2 (commencing with Section 7540) of Division 12 of, to amend, renumber, and add Sections 7576 and 7577 of, to add Sections 7550.5, 7559, 7560, 7561, 7561.5, 7562, 7573.5, 7578, and 7579 to, and to repeal and add Sections 7550, 7551, 7552, 7554, 7555, 7573, and 7575 of, the Family Code, and to amend Sections 1635, 1644, 102766, and 102767 of, to amend the heading of Article 4 (commencing with Section 102766) of Chapter 5 of Part 1 of Division 102 of, to amend the heading of Chapter 5 (commencing with Section 102625) of Part 1 of Division 102 of, and to add Sections 1644.1, 1644.2, and 1644.3 to, the Health and Safety Code, relating to parentage.



Calendar: 4/17/2018 1:30 p.m. - State Capitol, Room 4202 ASSEMBLY HEALTH, WOOD, Chair

Existing law, the Childhood Lead Poisoning Prevention Act of 1991, requires the State Department of Public Health to adopt regulations establishing a standard of care at least as stringent as the most recent United States Centers for Disease Control and Prevention screening guidelines, whereby all children are evaluated for risk of lead poisoning by health care providers during each child's periodic health assessment. Existing law requires the standard of care for a child who is determined to be "at risk" for lead poisoning to be screened. Existing regulations require every health care provider who performs a periodic health assessment of a child to order a child who receives services from a publicly funded program for low-income children to be screened for lead poisoning. This bill would require the department to coordinate with specified state entities to gather data to determine whether children are being screened for lead poisoning as required by the regulation described above.

An act to add Section 105286 to the Health and Safety Code, relating to public health.

[AB 3009](#)

**Quirk D**

**Hazardous materials: lead-based paint.**

Text Version: Amended: 4/3/2018 Position: Watch  
[html](#) [pdf](#)

Status: 4/4/2018-Re-referred to Com. on E.S. & T.M.

Calendar: 4/10/2018 1:30 p.m. - State Capitol, Room 444 ASSEMBLY ENVIRONMENTAL SAFETY AND TOXIC MATERIALS, QUIRK, Chair

The Childhood Lead Poisoning Prevention Act of 1991 imposes a fee on manufacturers and other persons formerly, presently, or both formerly and presently engaged in the stream of commerce of lead or products containing lead, or who are otherwise responsible for identifiable sources of lead that have significantly contributed historically, currently contribute, or both have significantly contributed historically and contribute currently to environmental lead contamination. The act requires the collected fees to be deposited into the Childhood Lead Poisoning Prevention Fund. The act requires the moneys in the fund, upon appropriation of the Legislature, to be expended for the prevention of childhood lead poisoning. This bill would impose a \$1 charge on manufacturers of paint, as defined, for each gallon of paint sold in the state. The bill would require the California Department of Tax and Fee Administration to collect the charges, as prescribed. The bill would, except as provided, require the collected charges to be deposited into the Lead-Based Paint Cleanup Fund, which the bill would create in the State Treasury. The bill would require moneys in the fund, upon appropriation by the Legislature, to be expended by the Department of Toxic Substances Control to provide grants to cities and counties for the investigation, abatement, or removal of lead-based paint from residences within their respective jurisdictions. The bill would become operative if a specified initiative is enacted and becomes operative. This bill contains other related provisions.

An act to add Article 11.3 (commencing with Section 25235) to Chapter 6.5 of Division 20 of the Health and Safety Code, relating to hazardous materials, to take effect immediately, tax levy.

[ACR 158](#)

**Baker R**

**Cancer Screen Week.**

Text Version: Amended: 2/27/2018 Position: Watch  
[html](#) [pdf](#)

Status: 2/28/2018-Re-referred to Com. on RLS.

This measure would annually designate the first week of December as Cancer Screen Week, as specified.

Relative to Cancer Screen Week.

[ACR 174](#)

**Gipson D**

**Hepatitis Awareness Month and Hepatitis Testing Day.**

Text Version: Introduced: 2/13/2018 Position: Watch  
[html](#) [pdf](#)

Status: 2/26/2018-Referred to Com. on RLS.

This measure would proclaim the month of May 2018 as Hepatitis Awareness Month and May 19, 2018, as Hepatitis Testing Day.

Relative to Hepatitis Awareness Month and Hepatitis Testing Day.

[SB 152](#)

**Hernandez D**

**Medi-Cal.**

Text Version: Amended: 6/5/2017 Position: Watch  
[html](#) [pdf](#)

Status: 7/17/2017-Action rescinded whereby the bill was read a third time, passed, and ordered to the Senate. Ordered to inactive file on request of Assembly Member Calderon.

Existing law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. Existing law requires the department to develop and prepare one or more reports issued on at least a quarterly basis and make the reports public within 30 days for the purpose of informing the California Health and



under the Medi-Cal program, to be reimbursed, to the extent that federal financial participation is obtained, to providers on a per-visit basis. This bill would state the intent of the Legislature to enact legislation that would increase the Medi-Cal reimbursement rates for services provided by qualified providers in counties with both a population density under 300 persons per square mile and a total population under 500,000 persons.

An act relating to Medi-Cal.

[SB 1097](#)

**Hueso D**

**Lead poisoning.**

Text Version:

Amended: 4/3/2018

Position: Watch

[html](#) [pdf](#)

Status:

4/3/2018-From committee with author's amendments. Read second time and amended. Re-referred to Com. on RLS.

Existing law requires the State Department of Public Health to collect and analyze all information necessary to effectively monitor appropriate case management efforts related to lead poisoning in children. Existing law authorizes the department to contract with a public or private entity, including local agencies, to conduct case management. Existing law requires the department to prepare a biennial report describing the effectiveness of appropriate case management efforts, and to make that report available to local health departments and the general public. This bill would require the report to contain specified information for each county, including the number of children screened for risk of lead poisoning. The bill would require the department to post the report on the department's Internet Web site. The bill would additionally require the department to incorporate the collected data into its Healthy Communities Data and Indicators Project, as specified.

An act to amend Section 105295 of the Health and Safety Code, relating to lead poisoning.

[SB 1353](#)

**Nguyen R**

**State Department of Health Care Services.**

Text Version:

Introduced: 2/16/2018

Position: Watch

[html](#) [pdf](#)

Status:

3/8/2018-Referred to Com. on RLS.

Existing law establishes the State Department of Health Care Services within the California Health and Human Services Agency. Existing law sets forth the department's powers and duties relating to, among other things, public health, licensing and certification of certain health facilities, and the state Medi-Cal program. This bill would make technical, nonsubstantive changes to a related provision.

An act to amend Section 100100 of the Health and Safety Code, relating to public health.

[SB 1423](#)

**Hernandez D**

**Medi-Cal: eligibility: redeterminations.**

Text Version:

Introduced: 2/16/2018

Position: Watch

[html](#) [pdf](#)

Status:

3/8/2018-Referred to Com. on RLS.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. Existing law generally requires a county to redetermine a Medi-Cal beneficiary's eligibility to receive Medi-Cal benefits every 12 months and whenever the county receives information about changes in a beneficiary's circumstances that may affect his or her eligibility for Medi-Cal benefits. This bill would make technical, nonsubstantive changes to these provisions.

An act to amend Section 14005.37 of the Welfare and Institutions Code, relating to Medi-Cal.

[SB 1495](#)

**Committee on Health**

**Health.**

Text Version:

Introduced: 2/28/2018

Position: Watch

[html](#) [pdf](#)

Status:

3/8/2018-Referred to Com. on HEALTH.

(1) Existing law provides for the licensure and (regulation of various health care practitioners by boards within the Department of Consumer Affairs. Existing law requires licensed health care practitioners who perform stem cell therapies that are not approved by the United States Food and Drug Administration (FDA) to communicate to their patients specified information regarding the therapies in a notice and in writing prior to providing the initial stem cell therapy. Under existing law, for these purposes, a "stem cell therapy" is a therapy involving the use of HCT/Ps, defined as human cells, tissues, or cellular- or tissue-based products in accordance with specified federal law. Under existing law, these requirements do not apply to a health care practitioner who has obtained approval for an investigational new drug or device from the FDA for the use of HCT/Ps. This bill would exclude from the definition of "stem cell therapy" those therapies involving HCT/Ps that meet specified criteria pursuant to, or that qualify for an exception under, federal law. The bill would require only health care practitioners who perform a stem cell therapy that is subject to FDA regulation, and that is not FDA-approved, to provide the notice and writing to their patients. The bill

would exempt from these requirements a health care practitioner who has obtained clearance for an investigational new drug, or an investigational device exemption, from the FDA. This bill contains other related provisions and other existing laws.

An act to amend Section 684 of the Business and Professions Code, to amend Section 1797.188 of the Health and Safety Code, and to amend Sections 4300, 4301, 4311, and 4313 of, and to add Section 4005.8 to, the Welfare and Institutions Code, relating to health.

**Total Measures: 34**

**Total Tracking Forms: 34**