



**STATE LEGISLATION  
COMMITTEE**  
**Wednesday, April 24, 2024**  
**10:00am – 12:00pm**  
**City Hall, Room 201**

This meeting will be held in person at the location listed above. Members of the public may attend the meeting to observe and provide public comment at the physical meeting location listed above. Members of the public may view the meeting by clicking the link below or calling the below number provided:

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**Meeting ID:** 2663 498 0092 **Meeting Password:** hCZVSqQh332  
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*(Public Comment Instructions available on page 6)*

**Members**

Mayor's Office (Chair) – Eileen Mariano  
Supervisor Dean Preston -- Preston Kilgore  
Supervisor Connie Chan -- Frances Hsieh  
Assessor's Office -- Holly Lung  
City Attorney's Office -- Rebekah Krell  
Controller's Office -- Hannah Kohanzadeh  
Treasurer's Office -- Eric Manke

**AGENDA**

**I. ROLL CALL**

**II. APPROVAL OF MEETING MINUTES (Action Item).** Discussion and possible action to approve the minutes from the meeting on March 27, 2024.

**III. STATE LOBBYIST OVERVIEW AND UPDATE (Discussion Item).** The City's state lobbyist will present to the Committee an update on State legislative matters.

**IV. PROPOSED LEGISLATION (Discussion and Action).** Discussion and possible action item: the Committee will review and discuss state legislation affecting the City and County of San Francisco. Items are listed by Department, then by bill number.

## **New Business**

### **Department of Public Health**

Presenter: Max Gara

SB 1184 (Eggman): Mental health: involuntary treatment: antipsychotic medication

***Recommended Position: Support***

This bill amends Lanterman-Petris-Short Act bill to require the determination of a person's incapacity to refuse treatment with antipsychotic medication to remain in effect for the 14-day period (or additional 30-day period following 14-day).

### **Department of Public Health**

Presenter: Max Gara

AB 1842 (Reyes): Health care coverage: Medication-assisted treatment.

***Recommended Position: Support***

This bill would expand access to medications for the treatment of substance use disorders by prohibiting health plans from subjecting medications such as naloxone buprenorphine and long-acting injectable naltrexone to prior authorization or step therapy.

### **Mayor's Office of Housing and Community Development**

Presenter: Kyra Geithman

AB 1789 (Quirk-Silva): Department of Housing and Community Development.

***Recommended Position: Support***

AB 1789 would empower the California Department of Housing and Community Development (HCD) to provide loans or grants for rehabilitating, capitalizing operating subsidy reserves, and extending the long-term affordability of housing projects that qualify as "challenged developments."

### **San Francisco Public Utilities Commission**

Presenter: Scott Ammon

AB 2221 (Carrillo): Broadband projects: electric power design approval.

***Recommended Position: Oppose***

This bill requires applications from broadband providers for providing power to equipment installed on utility poles to be "deemed approved" by publicly-owned electric utilities (electric POU) and investor-owned utilities (IOU) if not approved or denied within 45 days. The bill requires electric POU and IOU to provide a written notice within 10 days to providers if their application is deemed incomplete. The bill also requires electric POU and IOU to adopt and publish all applicable requirements 12 months in advance of an application.

For approved applications, electric utilities would have 14 days to provide a cost estimate for work needed to accommodate the electric power design. If the applicant accepts the cost estimate within 45 days, the bill would require electric utilities to complete energization of the project within 30 days.

The SFPUC recommends an oppose position for AB 2221.

### **San Francisco Public Utilities Commission**

Presenter: Rebecca Peacock

AB 2962 (Papan): Wholesale Regional Water System Security and Reliability Act.

***Recommended Position: Support***

This bill would amend the Wholesale Regional Water System Security and Reliability Act, which requires the City and County of San Francisco to adopt a specified program of capital improvement projects designed to restore and improve the SFPUC's Bay Area Regional Water System. Existing law makes the Act inoperative and repeals its provisions on January 1, 2026.

AB 2962 would extend the repeal date of the Act to January 1, 2036 to allow for the continued oversight and completion of certain capital improvement projects, and any further adjustments to project schedules through the next 12 years.

The San Francisco Public Utilities Committee (SFPUC) recommends a Support position for AB 2962.

### **Department of Environment**

Presenter: Charles Sheehan

SB 1066 (Blakespear): Marine Flare Producer Responsibility Act.

***Recommended Position: Support***

This bill will require producers of marine flares to fund and operate a convenient collection system to manage expired or unwanted flares, which are toxic and explosive, to ensure they are properly disposed of to not pollute the water or environment.

### **San Francisco Fire Department**

Presenter: Chief Michael Mason

SB 1180 (Ashby): Health care coverage: Emergency Medical Services.

***Recommended Position: Support***

SB 1180 will direct health care service plans that are issued, amended, or renewed on or after January 1, 2025, to provide reimbursement coverage for the services that are provided by a community paramedicine, triage to alternate destination, or mobile integrated health program.

This bill would benefit San Francisco in several ways: 1) Provide reimbursement for a significant portion of SFFD's Community Paramedicine Division's responses (approximately 16,000 responses per year), provide reimbursement for the SFFD's EMS Division's ambulance transports to the Department of Public Health's (DPH) Sobering Center, and incentivize private EMS providers to transport their patients to the Sobering Center.

Anticipated impacts include financial sustainability of alternate response programming (such as the Street Crisis Response Team, California's largest alternate-to-law-enforcement mental health crisis response program), a reduction in Emergency Department overcrowding as EMS providers are correctly

incentivized to transport patients to more appropriate forms of care, and potentially improved ambulance response times as these units are able to offload patients faster at alternate destination sites.

**San Francisco Human Services Agency**

Presenter: Susie Smith

AB 2636 (Bains): Mello-Granlund Older Californians Act.

***Recommended Position: Support***

AB 2636 (Bains) modernizes term of use throughout the Older Californians Act and repeals obsolete provisions. The bill also updates findings and declarations relating to statistics and issues of concern for older Californians. It also increases flexibility to Area Agencies on Aging to develop and deliver community based programs.

**V. GENERAL PUBLIC COMMENT**

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**VI. ADJOURNMENT**

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## **Know Your Rights Under the Sunshine Ordinance**

The government's duty is to serve the public, reaching its decisions in full view of the public. Commissions, boards, councils, and other agencies of the City and County exist to conduct the people's business. This ordinance assures that deliberations are conducted before the people and that City operations are open to the people's review. For information on your rights under the Sunshine Ordinance (Chapter 67 of the San Francisco Administrative Code) or to report a violation of the ordinance, contact the Donna Hall at Sunshine Ordinance Task Force, 1 Dr. Carlton B. Goodlett Place, Room 244, San Francisco, CA 94102, by phone at 415-554-7724, by fax at 415-554-7854, or email the Sunshine Ordinance Taskforce Administrator at [sof@sfgov.org](mailto:sof@sfgov.org). Citizens may obtain a free copy of the Sunshine Ordinance by contacting the Task Force, or by printing Chapter 67 of the San Francisco Administrative Code on the Internet, at [www.sfgov.org/sunshine.htm](http://www.sfgov.org/sunshine.htm).

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**Meeting ID:** 2664 959 7581 **Meeting Password:** CmPsgqsi733  
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Controller's Office -- Hannah Kohanzadeh  
Treasurer's Office -- Eric Manke

**AGENDA**

Meeting commenced at 10:03am.

**I. ROLL CALL**

Present: Eileen Mariano, Preston Kilgore, Rebekah Krell, Hannah Kohanzadeh, and Eric Manke.

Absent: Frances Hsieh and Holly Lung.

**II. APPROVAL OF MEETING MINUTES (Action Item).** Discussion and possible action to approve the minutes from the meeting on February 28, 2024.

Motion to Approve: Eric Manke  
Seconded by: Preston Kilgore

Approved: 5-0

### **III. STATE LOBBYIST OVERVIEW AND UPDATE (Discussion Item).**

The City's state lobbyist will present to the Committee an update on State legislative matters.

Presenter: Paul Yoder and Karen Lange, Partners of Shaw Yoder Antwih Schmelzer & Lange

**IV. PROPOSED LEGISLATION (Discussion and Action).** Discussion and possible action item: the Committee will review and discuss state legislation affecting the City and County of San Francisco. Items are listed by Department, then by bill number.

### **New Business**

#### **Department of Public Health**

Presenter: Max Gara

AB 1975 (Bonta): Medi-Cal: Medically Supportive Food and Nutrition Interventions.

***Recommended Position: Support***

This bill aims to directly address racial and ethnic health disparities, combat chronic disease, and reduce rates of food and nutrition insecurity among Medi-Cal enrollees by making medically supportive food and nutrition interventions a permanent covered benefit under the Medi-Cal program.

Public Comment: No public comment.  
Motion to Support AB 1975: Eric Manke  
Seconded by: Preston Kilgore  
Approved: 5-0

#### **Department of Environment**

Presenter: Hilary Near

AB 2346 (Lee) Organic waste reduction regulations: procurement of recovered organic waste products.

***Recommended Position: Support***

The Short-Lived Climate Pollutant Reduction Act (SB 1383) requires California jurisdictions to procure an amount of "organic waste products" that is proportionate to their populations. The amendments proposed in AB 2346 would simplify the process of documenting agreements with external service providers to fulfill SB 1383's procurement requirements on behalf of jurisdictions. In addition, AB 2346 proposes to extend procurement credit for activities and investments that build markets or create additional capacity for locally processed organics, including community composting.

Public Comment: No public comment.



Motion to Support AB 2346: Eric Manke  
Seconded by: Hannah Kohanzadeh  
Approved: 5-0

## **Department of Environment**

Presenter: Hilary Near

SB 1167 (Blakespear): Solid waste: single-use drinking vessels.

***Recommended Position: Support***

SB 1167 would prohibit chain restaurants from serving or offering for sale beverages in single-use vessels to customers dining or consuming the beverage on the premises.

Public Comment: No public comment.  
Motion to Support SB 1167: Preston Kilgore  
Seconded by: Hannah Kohanzadeh  
Approved: 5-0

## **San Francisco Human Services Agency**

Presenter: Susie Smith

AB 3079 (Ting): In-Home Supportive Services program: undocumented related providers

***Recommended Position: Sponsor***

This bill would develop a policy permitting undocumented In-Home Supportive Service recipients to select their undocumented relative as their IHSS provider of choice. These providers would give their Individual Taxpayer Identification Number (ITIN), in lieu of a Social Security Number, in completing employment documentation. It would also waive the background check normally required by providers and instead require a self-attestation.

Public Comment: No public comment.  
Motion to Support AB 3079: Preston Kilgore  
Seconded by: Eric Manke  
Approved: 5-0

## **San Francisco Municipal Transportation Agency**

Presenter: Monique Webster

SB 689 (Blakespear): Local coastal program: bicycle lane: amendment.

***Recommended Position: Support***

The bill will make it easier to convert vehicular traffic lanes to bicycle lanes/nonvehicular uses. It achieves this by:

1. Not requiring a traffic study for purposes of a coastal development permit or a change to a Local Coastal Program, when converting a vehicle travel lane to a dedicated bicycle lane; and
2. Provides that changes to Local Coastal Program to create a dedicated bicycle lane in the right of way would be eligible for a simplified approval

process (de minimis), only requiring Commission Director's approval.

The de minimis approval process already exists for qualified amendments to local programs, as described by [Public Resource Code 30154](#). The de minimis process ensures that improvements that align with the California Coastal Act are reviewed and implemented quickly and improves governmental accountability and responsiveness.

Providing streamlined approval processes for minor traffic improvement projects increases the responsiveness and effectiveness of City agencies, makes efficient use of taxpayer money and City staff time, and better meets the needs of San Francisco residents.

Public Comment: No public comment.  
Motion to Support SB 689: Eric Manke  
Seconded by: Preston Kilgore  
Approved: 5-0

## **San Francisco Public Utilities Commission**

Presenter: Rebecca Peacock

SB 903 (Skinner): Environmental health: product safety: perfluoroalkyl and polyfluoroalkyl substances.

### ***Recommended Position: Support***

This bill would, beginning January 1, 2030, prohibit a person from distributing, selling, or offering for sale a product that contains intentionally added PFAS, unless the Department of Toxic Substances Control (DTSC) has made a determination that the use of PFAS in the product is a currently unavoidable use, the prohibition is preempted by federal law, or the product is used. The bill would require the department to maintain on its internet website a list of each determination of currently unavoidable use, when each determination expires, and the products and uses that are exempt from the prohibition. The bill would impose a civil penalty for a violation of the prohibition and establish the PFAS Penalty Account, requiring all civil penalties received to be deposited into that account. Upon appropriation by the Legislature, these penalties will be used for the administration and enforcement of the bill's provisions.

By January 1, 2027, DTSC would be required to adopt regulations to carry out the provisions of this bill, which must include regulations establishing and providing for the assessment of an application fee. The bill would create the PFAS Oversight Fund and require all application fees to be deposited into the fund. Upon appropriation by the Legislature, the bill would require these application fees be used to cover the department's reasonable costs of administering this act.

The San Francisco Public Utilities Commission (SFPUC) recommends a support position for SB 903.

Public Comment: No public comment.  
Motion to Support SB 689: Preston Kilgore

Seconded by: Hannah Kohanzadeh  
Approved: 5-0

## **V. GENERAL PUBLIC COMMENT**

Members of the public may address the Committee on items of interest that are within the Committee's subject matter jurisdiction and that do not appear on the agenda.

Public Comment: No public comment.

## **VI. ADJOURNMENT**

Meeting ended at 10:36 am.

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Date Submitted	April 12, 2024
Submitting Department	Department of Public Health
Contact Name	Max Gara; 415-554-2621
Contact Email and Phone Number	<a href="mailto:Maxwell.gara@sfdph.org">Maxwell.gara@sfdph.org</a> Sneha Patil; 415-554-2795 <a href="mailto:Sneha.patil@sfdph.org">Sneha.patil@sfdph.org</a>
SLC Meeting Presenter	Max Gara
Reviewed and approved by Department Head?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Reviewed and approved by Commission?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A

## SB 1184

### Senator Eggman, Senate District #5, D-Stockton

### Mental health: involuntary treatment: antipsychotic medication

#### Recommended Position

SPONSOR     SUPPORT     SUPPORT if amended  
 OPPOSE     OTHER & Describe

#### Summary

This bill amends Lanterman-Petris-Short Act bill to require the determination of a person’s incapacity to refuse treatment with antipsychotic medication to remain in effect for the 14-day period (or additional 30-day period following 14-day).

#### Background/Analysis

The Lanterman-Petris-Short (LPS) Act establishes a civil process for the involuntary detention of people considered gravely disabled due to a serious mental illness and/or substance use disorders. On January 1, 2024, Senate Bill 43 (Eggman) went into effect. This law, modernized California’s conservatorship laws for the first time in more than 50 years, updating the definition of those eligible for conservatorship to include individuals who live with severe substance use disorder and those who are unable to provide for their own personal safety or necessary medical care.

San Francisco Department of Public Health has continued to invest significant resources

in expanding behavioral health treatment options across the continuum of care to ensure high quality, timely, easily accessible, coordinated, and recovery-oriented care, delivered in the most appropriate, least restrictive settings. Conservatorship remains an important treatment option within the continuum of care for some high acuity patients who have few alternatives.

Under the act, individuals can be involuntary detained if they are deemed to be a danger to themselves or others, “gravely disabled,” for periods of up to 72 hours for evaluation and treatment, or for up to 14 days and up to 30 days for additional intensive treatment in county-designated facilities (i.e., hospitals). Further, patients on a hold can be given involuntary antipsychotic medications if a court finds (via a “Riese Hearing”) that they lack the capacity to refuse medications.

#### Challenge

Under existing law, involuntary treatment during a hold can be discontinued even if it is not clinically indicated to do so if a person is in the process of transitioning from one type hold to another. Specifically, the orders for involuntary medication can be limited to the phase of the involuntary detention. This means that patients who have their detention extended must have a new

hearing at the conclusion of a 14-day hold, and another hearing at the second 30-day hold, on top of discontinuation of involuntary treatment. These rules lead to a mandatory, but clinically contraindicated, discontinuation of medication treatment during detention while another Riese hearing is scheduled, and a court decision is awaited. Stopping or interrupting such medication at arbitrary points during LPS detention exposes patients to unjustified clinical risks. This can also prolong the length of stay in inpatient settings.

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#### **Solution/Recommended Proposal**

SB 1184 would extend the determination of a person's incapacity to refuse treatment with antipsychotic medication for the duration of an additional up-to 14-day hold for intensive treatment and for an up-to 30-day hold for persons who continue to need intensive treatment after an initial up-to 14 days.

Nothing in this bill would alter the current ability of individuals to petition for the discontinuation of involuntary treatment. This bill preserves due process protections while ensuring that the person can continue to be treated until a determination has been made that their capacity has been restored.

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#### **Departments Impacted & Why**

No other departments would be directly impacted.

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#### **Fiscal Impact**

No direct state or local fiscal impacts.

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#### **Support / Opposition**

**Support:** California State Association of Psychiatrists (sponsor)  
Psychiatric Physicians Alliance of California  
**Oppose:** Disability Rights California



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Date Submitted	April 12 <sup>th</sup> , 2024
Submitting Department	Department of Public Health
Contact Name	Max Gara; 415-554-2621
Contact Email and Phone Number	Maxwell.gara@sfdph.org  Sneha Patil; 415-554-2795 <a href="mailto:Sneha.patil@sfdph.org">Sneha.patil@sfdph.org</a>
SLC Meeting Presenter	Max Gara
Reviewed and approved by Department Head?	X YES <input type="checkbox"/> NO
Reviewed and approved by Commission?	<input type="checkbox"/> YES <input type="checkbox"/> NO    X N/A

## AB 1842

### Assemblymember Reyes, Assembly District #50, D-Colton Health care coverage: Medication-assisted treatment

#### Recommended Position

SPONSOR     **SUPPORT**     SUPPORT if amended  
 OPPOSE     OTHER & Describe

#### Summary

This bill would expand access to medications for the treatment of substance use disorders by prohibiting health plans from subjecting medications such as naloxone buprenorphine and long-acting injectable naltrexone to prior authorization or step therapy.

#### Background/Analysis

The overdose crisis is one of the most significant public health issues facing San Francisco. In 2023, 806 people died from drug overdose in the City.<sup>1</sup> Significant inequities exist – Black/African Americans in San Francisco are disproportionately affected, with an opioid overdose death rate that is more than five times higher than the citywide rate.

Expanding access to medication assisted treatment (MAT) for substance use disorders (SUD) is essential to addressing the overdose crisis in San Francisco. MAT is the use of

medications, commonly in combination with counseling and behavioral therapy, to provide a comprehensive approach to SUD treatment. Prescription drugs used in MAT include methadone, buprenorphine, naltrexone, naloxone, or other Federal Drug Administration (FDA) approved or evidence-based medications for the treatment of SUD. The use of MAT increases the likelihood of successful treatment for individuals with a SUD and reduces morbidity and mortality.

#### Challenge

In 2020, just 11% of the 2.7 million people with an opioid use disorder (OUD) in the U.S. received medication for opioid use disorder (MOUD).<sup>2</sup> One important barrier to accessing MAT is insurance utilization management policies. These policies include, but are not limited to, plans requiring prior authorization for medication use, and requiring step-therapy. Prior authorization, sometimes called prior approval, is a requirement that health care providers obtain authorization from a health plan before they can deliver a specific service, such as a prescription for an MAT-related drug. Step therapy is a process by which insurers (public or private) require

<sup>1</sup> Preliminary Accidental Drug Overdose Data Report for January 2023 through December 2023, San Francisco Office of the Chief Medical Examiner.

<sup>2</sup> Substance Abuse Center for Behavioral Health Statistics and Quality. Results from the 2020 National

Survey on Drug Use and Health: Detailed Tables. SAMHSA. Published October 25, 2021. Accessed November 29, 2021.



patients to take one or more alternative medications before they can access the medicine prescribed by their provider.

These types of requirements and processes have been found to create barriers and delays to receiving necessary care, as well as exacerbate complexity for patients and their providers. In 2020, the American Medical Association stated that prior authorization for MAT has potentially dangerous consequences for patients who are forced to delay care or are denied treatment because of administrative barriers and, has supported the removal of these policies.

There is currently no prior authorization needed for accessing MAT for Medi-Cal beneficiaries, and seventeen states have already adopted policies to remove prior authorization requirements for commercial health insurers. But many commercial insurers in California maintain these types of policies and are not allowing these medically appropriate treatments to be provided to patients that pay for coverage.

#### **Solution/Recommended Proposal**

AB 1842 would address current barriers in insurance utilization management policies to accessing MAT by prohibiting health plans and insurers from requiring prior authorization or step therapy for a naloxone product or another opioid antagonist approved by the FDA or a buprenorphine product or long-acting injectable naltrexone for detoxification (medically supervised withdrawal) or maintenance treatment of a SUD.

This bill expands on the recent work of the federal government to mainstream addiction treatment by eliminating unnecessary barriers to treatment. As a policy, commercially insured Californians are the only group where prior authorization delays are still allowed. There is an urgent need to expand access to MAT medications to treat SUD, and for these reasons San Francisco Department of Public Health recommends support of this bill.

#### **Departments Impacted & Why**

No City departments would be impacted by the bill. SF City and County already offer all medically necessary SUD MAT.

#### **Fiscal Impact**

Based on a fiscal analysis of a prior year bill that is substantially similar (AB 1288-Rendon), the impacts to the State are limited to \$100,000 annually for state administration.

#### **Support / Opposition**

No official positions have been taken on this bill.



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Date Submitted	April 15, 2024
Submitting Department	Mayor's Office of Housing and Community Development
Contact Name	Kyra Geithman
Contact Email and Phone Number	<a href="mailto:Kyra.geithman@sfgov.org">Kyra.geithman@sfgov.org</a> ; (415) 234-0271
SLC Meeting Presenter	Kyra Geithman
Reviewed and approved by Department Head?	X YES <input type="checkbox"/> NO
Reviewed and approved by Commission?	<input type="checkbox"/> YES <input type="checkbox"/> NO      X N/A

## AB 1789

### Assemblymember Quirk-Silva, Assembly District #67, D-Fullerton

### Department of Housing and Community Development

#### Recommended Position

SPONSOR     SUPPORT     SUPPORT if amended     OPPOSE     OTHER & Describe

#### Summary

AB 1789 would empower the California Department of Housing and Community Development (HCD) to provide loans or grants for rehabilitating, capitalizing operating subsidy reserves, and extending the long-term affordability of housing projects that qualify as "challenged developments."

#### Background/Analysis

Existing law authorizes HCD to make loans and grants for the above uses only for department-funded housing projects with specific affordability restrictions or that are at risk of conversion to market-rate housing. There is no current option for projects that have not received HCD funding in the past to seek financing from the State for critical capital repairs or rehabilitation, even if residents are extremely low- or very low-income households.

#### Challenge

In 2021, California created the Portfolio Reinvestment Program (PRP) at the Department of Housing and Community Development (HCD). This program finances the rehabilitation of a limited universe of challenged developments, namely those with old HCD loans and regulatory agreements that expire within 10 years.

California has thousands of affordable rental homes in need of rehabilitation after 15 years or more of occupancy. Those developments with rental income in excess of operating costs are often able to access debt and/or low-income housing tax credits to finance the rehabilitation. Developments with the lowest rents, however, are not in a position to leverage debt or tax credits and therefore have no ability to finance rehabilitation. Without rehabilitation, such challenged developments fall into disrepair, creating health and safety concerns for residents and, ultimately, jeopardizing the loss of precious affordable homes.

AB 1789 will expand the PRP to challenged developments that until now have been excluded. This will provide access to critical resources for existing affordable rental housing that is in dire need of repair.

The proposed bill opens up PRP to all challenged developments while maintaining a priority for those that have HCD loans and expiring regulatory agreements. Consistent with tax credit law, the bill defines a challenged development as one with an average affordability of 45% of the area median income or less and insufficient access to private or other public resources to complete substantial rehabilitation.

MOHCD issued a Notice of Funding Availability for capital financing to make repairs in existing buildings owned by nonprofit organizations. The NOFA was oversubscribed by nearly 3:1. This demonstrates the huge need for additional financing for this capital repairs and rehabilitation.

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### **Solution/Recommended Proposal**

AB 1789 could bring more state funding into MOHCD's portfolio. Currently, affordable housing projects rely on the City's occasional Existing Nonprofit (ENP) NOFAs for critical capital improvements. There are limited soft debt funds for rehabs, so in recent years MOHCD has devoted significant 9% credits to those projects. Expansion of the PRP could better leverage 9% credits and allow the City to undertake more complex rehab work.

Currently PRP is limited to projects with existing loans from HCD legacy programs but expansion would allow funds to go to other affordable housing projects that don't have existing HCD loans. AB 1789 unlocks valuable State resources for multifamily properties to rehabilitate existing buildings. Although funding is contingent on future budgets, AB 1789 makes changes to statute to allow that in a future budget.

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### **Departments Impacted & Why**

MOHCD would be impacted because this would augment existing efforts to preserve and rehabilitate existing housing. There are limited soft debt funds for rehabilitations, and as such MOHCD has had to devote significant resources to these projects because of their emergent nature.

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### **Fiscal Impact**

Expansion of HCD's Portfolio Reinvestment Program would allow MOHCD to leverage its preservation financing and would result in more units being preserved. While funding won't come directly to MOHCD, it will support projects similar to how State affordable housing financing programs like the Multifamily Housing Program of the Infill Infrastructure Grant program support new construction projects.

Indirectly, unlocking State financing will lower the financial barriers for affordable multifamily housing to make critical repairs to their buildings. This means fewer homes will be at risk of falling into disrepair or even foreclosure.

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### **Support / Opposition**

The California Housing Partnership and the Non-Profit Housing Association of Northern California are both supporters of this legislation. Additional formal supporters are pending.

No formal opposition has yet been filed.



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Date Submitted	4/9/2024
Submitting Department	San Francisco Public Utilities Commission
Contact Name	Scott Ammon
Contact Email and Phone Number	<a href="mailto:sammon@sfgov.org">sammon@sfgov.org</a> ; 415-407-5208
SLC Meeting Presenter	Scott Ammon
Reviewed and approved by Department Head?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Reviewed and approved by Commission?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A

## AB 2221

### Assemblymember Carrillo, Assembly District #39, Democrat Broadband projects: electric power design approval.

#### Recommended Position

SPONSOR     SUPPORT     SUPPORT if amended  
 OPPOSE     OTHER

#### Summary

This bill requires applications from broadband providers for providing power to equipment installed on utility poles to be "deemed approved" by publicly-owned electric utilities (electric POU) and investor-owned utilities (IOU) if not approved or denied within 45 days. The bill requires electric POU and IOU to provide a written notice within 10 days to providers if their application is deemed incomplete. The bill also requires electric POU and IOU to adopt and publish all applicable requirements 12 months in advance of an application.

For approved applications, electric utilities would have 14 days to provide a cost estimate for work needed to accommodate the electric power design. If the applicant accepts the cost estimate within 45 days, the bill would require electric utilities to complete energization of the project within 30 days.

The SFPUC recommends an oppose position for AB 2221.

#### Background/Analysis

Existing state and federal law establishes shot clocks for approval of broadband project

site permits but not for the approval of electric service designs. AB 1027 (2011) requires public utilities to provide a response within 45 days of receiving a broadband project site permit request and 60 days for batches of 300 or more poles. Similarly, the 2018 Federal Communications Commission (FCC) Small Cell Order reduced the shot clock for applications for installation of small wireless facilities from 90 to 60 days.

In recent years, the SFPUC and the City and County of San Francisco (CCSF) have opposed numerous bills supported by the telecommunications industry that would have advanced industry interests at the expense of the public. In 2023, the SFPUC opposed AB 965 (Carrillo), which would have required approval of multiple permits for wireless broadband pole attachment project sites as a batch and automatic approval of batches if a response is not received by the applicant within 60 days. Per the SFPUC's advocacy with the California Municipal Utilities Association (CMUA), the author and sponsor amended the bill to exempt electric POU.

In 2022, CCSF adopted an Oppose Unless Amended position for SB 717 (Dodd), which required the California Department of Technology to develop a report identifying the barriers to and opportunities for broadband deployment in underserved

communities. CCSF and the SFPUC expressed concerns about the study's narrow focus on regulatory barriers and recommended amendments to broaden it. In September 2022, the bill was signed into law by the Governor without the City's amendments.

Prior to 2022, the SFPUC and CCSF advocated against multiple bills including SB 556 (Dodd, 2021) and SB 649 (Hueso, 2017) which would have imposed shot clocks, capped the license fees that state and local governments can impose for use of their poles, and undermined local governments' authority to regulate telecommunications pole attachments. Both of these bills were vetoed by their respective Governors.

### Challenge

The SFPUC is concerned with AB 2221 for several reasons. The requirement that applications be "deemed approved" after 45 days is similar to the author's 2023 bill, AB 965, and would undermine SFPUC's ability to effectively review safety issues. This concern is exacerbated by the 10 day shot clock to provide applicants with a written and itemized notice of incompleteness. The SFPUC is also concerned by the requirement for utilities to adopt and publish all applicable requirements 12 months in advance of an application.

Finally, the requirement for electric utilities to complete energization within 30 days of applicants' acceptance of the cost estimate would be infeasible. Since October 2018, the SFPUC has provided quarterly reports to the Board of Supervisors which identified 158 projects that have experienced delays or obstruction to energization by PG&E.<sup>1</sup> The requirement would prioritize energization of broadband facilities over other critical projects such as affordable housing.

### Solution/Recommended Proposal

The SFPUC recommends an oppose position for AB 2221.

<sup>1</sup> San Francisco Public Utilities Commission's Quarterly Report to the Board of Supervisors on the Status of Applications to PG&E for Electric Service.

### Departments Impacted & Why

This bill would apply to the SFPUC which reviews broadband providers' applications for the use of utility poles to install wireless facilities and for electric power designs related to such facilities. Following application approval and subsequent service connection to PG&E's electrical distribution grid, the SFPUC may provide power to approved facilities.

### Fiscal Impact

The fiscal impact on the SFPUC is unknown. However, the bill's shot clock for approving pole attachment electric power design applications and for energization of such projects may result in additional costs related to staff time to meet these new requirements.

### Support / Opposition

#### Support

Crown Castle (Sponsor)  
CalBroadband  
California Communications Association  
California Retailers Association  
California Wireless Association  
CTIA  
Los Angeles County Business Federation  
Pasadena Chamber of Commerce  
Rural County Representatives of California  
San Francisco Chamber of Commerce  
San Mateo County Economic Development Association  
Silicon Valley Leadership Group  
The Broadband Association  
Wireless Infrastructure Association

#### Oppose

California Municipal Utilities Association  
California Special Districts Association  
Environmental Defense Action Fund  
Pacific Gas and Electric Company  
San Diego Gas & Electric  
Southern California Edison  
Southern California Public Power Authority

February 20, 2024. PDF p. 2.

<https://sfpuc.sharefile.com/share/view/s19fea2f30e62409bb4142031a2421cec>



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Date Submitted	4/9/2024
Submitting Department	San Francisco Public Utilities Commission
Contact Name	Rebecca Peacock
Contact Email and Phone Number	<a href="mailto:rpeacock@sfgwater.org">rpeacock@sfgwater.org</a> / 415-757-8365
SLC Meeting Presenter	Rebecca Peacock
Reviewed and approved by Department Head?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Reviewed and approved by Commission?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A

## AB 2962

### Assemblymember Papan, Assembly District #21, D-San Mateo Wholesale Regional Water System Security and Reliability Act.

#### Recommended Position

SPONSOR     SUPPORT     SUPPORT if amended     OPPOSE     OTHER & Describe

#### Summary

This bill would amend the Wholesale Regional Water System Security and Reliability Act, which requires the City and County of San Francisco to adopt a specified program of capital improvement projects designed to restore and improve the SFPUC's Bay Area Regional Water System. Existing law makes the Act inoperative and repeals its provisions on January 1, 2026.

AB 2962 would extend the repeal date of the Act to January 1, 2036 to allow for the continued oversight and completion of certain capital improvement projects, and any further adjustments to project schedules through the next 12 years.

The San Francisco Public Utilities Committee (SFPUC) recommends a Support position for AB 2962.

#### Background/Analysis

In 2002, the Wholesale Regional Water System Security and Reliability Act was established by AB 1823 and defined a process for SFPUC to launch the Water System Improvement Program (WSIP). This program is a \$4.8 billion multi-year capital program to improve the aging infrastructure of the regional water system with the goal of enhancing the SFPUC's ability to continue to provide reliable, affordable, high quality drinking water after a major earthquake or during an extended drought in an environmentally sustainable manner. The program repairs, replaces, and seismically upgrades crucial portions of the Hetch Hetchy Regional Water System.

The program consists of 87 projects: 35 local projects located within San Francisco and 52 regional projects, spread over seven counties from the Sierra foothills to San Francisco. The San Francisco portion of the program is 100% complete as of June 2020. In April 2024, the SFPUC will consider approval of revisions to the program including a schedule extension to June 2032.

#### Challenge

The SFPUC has one outstanding WSIP project that will not be completed by the current SFPUC-approved program completion date of February 1, 2027: the Alameda Creek Recapture Project is forecasted to be completed by June 30, 2031; all other projects are forecasted to be completed

by December 2027. This project is critically needed to ensure the Regional Water System provides a reliable water supply during a drought.

In addition to project completion, the SFPUC is also required to provide an annual report on progress made during the previous calendar year on securing supplemental sources of water to augment existing supplies during dry years.

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**Solution/Recommended Proposal**

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In order to ensure these remaining projects are completed with ample time for further adjustments to project schedules, AB 2962 would extend the bill's sunset date from January 1, 2026 to January 1, 2036.

Such a change has precedent under the Wholesale Regional Water System Security and Reliability Act, with the sunset date being extended from 2022 to 2026 by SB 699 (2019).

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**Departments Impacted & Why**

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We do not anticipate this bill will impact any City departments other than the SFPUC.

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**Fiscal Impact**

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No fiscal impact is anticipated.

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**Support / Opposition**

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**Sponsor**

- Bay Area Water Supply & Conservation Agency



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Date Submitted	4/12/2024
Submitting Department	Environment
Contact Name	Huy Le
Contact Email and Phone Number	<a href="mailto:Huy.le@sfgov.org">Huy.le@sfgov.org</a> 415-355-3760
SLC Meeting Presenter	Charles Sheehan, <a href="mailto:charles.sheehan@sfgov.org">charles.sheehan@sfgov.org</a>
Reviewed and approved by Department Head?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Reviewed and approved by Commission?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A

## SB 1066

### Senator Blakespear, Senate District #38, D-Encinitas

### Marine Flare Producer Responsibility Act

#### Recommended Position

SPONSOR     SUPPORT     SUPPORT if amended     OPPOSE     OTHER & Describe

#### Summary

This bill will require producers of marine flares to fund and operate a convenient collection system to manage expired or unwanted flares, which are toxic and explosive, to ensure they are properly disposed of to not pollute the water or environment.

#### Background/Analysis

The U.S. Coast Guard requires boats operating in and around coastal waters to be equipped with approved visual distress signals for day and night use. Boaters most often meet this provision of the law by carrying three marine flares—a pyrotechnic device that produces bright light or colorful smoke to attract attention in an emergency. Alternative visual distress signals are available, but some boaters feel safer with traditional flares due to increased visibility during the day.

The California Department of Toxic Substances Control (DTSC) and the Environmental Protection Agency (EPA) classify unwanted and/or expired flares as hazardous waste that cannot be disposed of in waterways or in the trash. They contain toxic metals and other pollutants that can contaminate water and impact human health.

Flares are also reactive and ignitable, meaning they must be transported as explosive devices and disposed of at a facility permitted by the EPA to manage explosives; currently there are only three of those facilities in the United States. The Bureau of Alcohol, Firearms, Tobacco, and Explosives requires expired flares to be transported in a Type 4 magazine, a container that is fire resistant, weather-, and theft-resistant.

#### Challenge

Marine flares need to be replaced about every three years, amounting to over 147,000 flares expiring each year in California. However, there are no facilities in California that have the necessary permit to treat and/or dispose of these flares. As a result, nearly all household hazardous waste (HHW) facilities refuse to accept flares due to the potential danger.



This leaves boaters with few options. Some will stockpile their expired flares, which could cause a fire, or dispose of them in the ocean, which creates pollution. Others set them off as fireworks, risking a felony under federal law.

The San Francisco Recreation and Parks Department reported finding flares abandoned in dock boxes where boaters store their supplies. The Port of San Francisco also reported them being improperly disposed of in the trash. These options put workers at great risk: a marine flare can accidentally explode while being unknowingly handled. Further, this puts the responsibility of proper disposal on local governments, often at great expense.

In a 2019 survey of San Francisco boaters, 64% reported storing expired or unwanted marine flares on their boat or elsewhere. This is concerning as it can be a fire hazard. To put it into perspective, San Francisco has over 2,000 boat slips distributed between the five marinas.

The end-of-life management of flares is costly. In April 2019, San Francisco Environment hosted a marine flare pilot collection event in which they contracted with a hazardous waste disposal company to collect, transport, and dispose of the flares at a permitted facility. In total, the event cost approximately \$30,000 to collect roughly 2,000 flares from 51 residents. This event was funded by a grant from CalRecycle.

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### **Solution/Recommended Proposal**

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SB 1066 shifts responsibility for disposing of marine flares from local government to those who produce and profit from them.

SB 1066 will require producers to create a producer responsibility plan for the collection, transportation, and safe and proper management of expired flares. The plan requires a free and convenient statewide collection program with permanent collection sites, as well as a statewide education and outreach program, including prominently displayed and easily visible signs at point of sale and in marinas.

This bill would provide a sustainable disposal option for the 2,000+ boaters in San Francisco. Boaters would have a safe and legal way to get rid of their expired marine flares. This would result in less improper disposal into the San Francisco Bay and in the trash and reduce the likelihood of fires from expired and unwanted marine flares being stored on their boats.

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### **Departments Impacted & Why**

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The Department of Public Health (DPH) and the SF Fire Department are likely to be impacted as they are the first responders to hazardous materials/waste related issues. DPH is also responsible for removing abandoned waste around San Francisco, which includes marine flares.

The Port of San Francisco may also be impacted as they respond to flare-related clean ups and incidents which impact their property around the San Francisco Bay.

If the bill passes, it is expected there would be less abandoned marine flare waste for these Departments to manage.

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### **Fiscal Impact**

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If passed, San Francisco Departments including DPH, the Port, and Rec & Park would likely see decreased cost towards disposing of marine flares. This includes staff time, transportation, and dispose costs.

## **Support / Opposition**

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### **SUPPORT:**

Ban Sup (single Use Plastic), Boatsafe Northwest, California Association of Environmental Health Administrators (CAEHA), California Retailers Association, California State Association of Counties (CSAC), California Teamsters Public Affairs Council, California Waste Haulers Council, Californians Against Waste, Center for Biological Diversity, City of Santa Barbara, City of South Lake Tahoe, Clean Water Action, Delta Diablo, Heal the Bay League of California Cities, Marin Sanitary Service, Napa Recycling and Waste Services, National Stewardship Action Council, North American Hazardous Materials Management Association, Plastic Pollution Coalition, Regen Monterey, Republic Services - Western Region, Republic Services INC., Resource Recovery Coalition of California, Rethink Waste, Rural County Representatives of California (RCRC), San Francisco Baykeeper, San Rafael Fire Department, Santa Clara County Recycling and Waste Reduction Commission, Save Our Shores, Sirius Signal LLC, Somaliland Community Action Network, Sonoma County Fire District, Sonoma County Regional Parks Department, The Last Plastic Straw, Truckee; Town of, Western Placer Waste Management Authority (WPWMA), Zero Waste Marin, Joint Powers Authority, and Zero Waste Sonoma.

### **OPPOSITION:**

Standard Fusee Corporation Db a Orion Safety Products (marine flare manufacturer) Note: their opposition letter wrongly claims that marine flares can be disposed on land by burning, but this practice is prohibited by fire departments and Air Districts.



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<b>Date Submitted</b>	4/12/2024
<b>Submitting Department</b>	Fire Department
<b>Contact Name</b>	Michael Mason
<b>Contact Email and Phone Number</b>	<a href="mailto:Michael.Mason@sfgov.org">Michael.Mason@sfgov.org</a> ; (628) 732 6041
<b>SLC Meeting Presenter</b>	Michael Mason or Simon Pang (TBD)
<b>Reviewed and approved by Department Head?</b>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<b>Reviewed and approved by Commission?</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A

**SB 1180**  
**Senator Ashby, Senate District #8, D-Sacramento**  
**Health care coverage: Emergency Medical Services.**

### Recommended Position

SPONSOR     SUPPORT     SUPPORT if amended     OPPOSE     OTHER & Describe

### Summary

*SB 1180 will direct health care service plans that are issued, amended, or renewed on or after January 1, 2025, to provide reimbursement coverage for the services that are provided by a community paramedicine, triage to alternate destination, or mobile integrated health program.*

*This bill would benefit San Francisco in several ways: 1) Provide reimbursement for a significant portion of SFFD's Community Paramedicine Division's responses (approximately 16,000 responses per year), provide reimbursement for the SFFD's EMS Division's ambulance transports to the Department of Public Health's (DPH) Sobering Center, and incentivize private EMS providers to transport their patients to the Sobering Center.*

*Anticipated impacts include financial sustainability of alternate response programming (such as the Street Crisis Response Team, California's largest alternate-to-law-enforcement mental health crisis response program), a reduction in Emergency Department overcrowding as EMS providers are correctly incentivized to transport patients to more appropriate forms of care, and potentially improved ambulance response times as these units are able to offload patients faster at alternate destination sites.*

### Background/Analysis

*Community paramedicine is a form of mobile integrated health care that has recently transitioned out of the pilot phase (AB 1544) and is now codified in the California Health & Safety Code (Title 22). Unlike traditional paramedics, community paramedics are trained to conduct holistic assessments and care for patients, and transport individuals to destinations other than emergency departments. The San Francisco Fire Department currently operates the state's largest accredited community paramedicine program and training center.*

*Community paramedicine activities include transporting individuals to non-hospital destinations such as drug and alcohol sobering centers, urgent care and shelter, diverting individuals away*

from emergency departments, and providing case management to high-utilizers of 911 systems. Currently, none of these activities are reimbursed by insurance providers.

---

### **Challenge**

*The University of California San Francisco (UCSF) review of community paramedicine pilot programs found them to be effective and exhibit significant cost savings. <sup>1</sup> Despite these documented savings and improved patient outcomes, insurance companies currently have no regulatory directive to reimburse these programs for their responses, transportation, or care for individuals.*

*As the City's primary 911 response, the San Francisco Fire Department provides emergency medical and mental health crisis responses to our community regardless of an individual's insurance status. The SFFD's Street Crisis Response Team responds to over 16,000 calls for service annually, almost none of which currently qualify for insurance reimbursement.*

---

### **Solution/Recommended Proposal**

*The healthcare needs of Californians have changed dramatically in recent years, compounded by the COVID-19 pandemic as well as the behavioral health and homelessness crises. Many people now rely on both emergency medical care and the emergency department of the hospital for their primary medical care, resulting in overcrowding and long delays that lead to impacts across the emergency system.*

*To manage these needs new paradigms of medical care have developed in order to divert cases from the emergency department that can be effectively treated elsewhere, as well as connecting patients with needed services to reduce hospital readmissions and future 911 calls. Fire departments throughout California have been at the forefront of these efforts, piloting and implementing community paramedicine and triage to alternate destination programs as well as developing mobile integrated health units to meet their community members where they are needed.*

*This legislation correctly incentivizes program development and sustainability in an area of great community need.*

---

### **Departments Impacted & Why**

- *Fire Department: Increased insurance reimbursement opportunities & program sustainability,*
- *Department of Public Health: Increased transports to the sobering center, decrease in hospital and emergency department overcrowding,*
- *Department of Emergency Management: Possible reductions in ambulance 911 response times due to increased ambulance availability secondary to decreased patient offload times.*

---

### **Fiscal Impact**

*The San Francisco Fire Department would be the primary recipient of any positive fiscal impacts of this bill. Private EMS providers (AMR & King American Ambulance) would also see increased reimbursement opportunities from the ability to bill for sobering center transports, although we cannot estimate that impact.*

---

<sup>1</sup> <https://emsa.ca.gov/wp-content/uploads/sites/71/2023/10/CA-CP-State-Legislature-Report-Oct-6.pdf>

*Internal Fire Department analysis of possible revenue made possible by this legislation conservatively ranges from \$7,000,000 to \$10,000,000 per year, which would be anticipated to increase as call volume and associated responses continue to rise.*

*The Department of Public Health may see benefits from increased emergency department diversion rates, especially among vulnerable populations which may lack private insurance. This diversion would decrease expensive (often non-billable) care provided in emergency departments and instead direct individuals to more appropriate and less-expensive care modalities.*

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### **Support / Opposition**

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**Support:**

*California Professional Firefighters (CPF)*

**Oppose:**

*There are currently no industry associations or elected officials openly opposing this bill.*

*It could be anticipated that private insurance companies may oppose this new reimbursement mechanism, but it should be noted that they may save costs by incentivizing 911 programs which divert patients away from expensive emergency care and into less expensive and more appropriate destinations such as urgent care, mental health drop-in, sobering centers etc.*



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Date Submitted	4/16/24
Submitting Department	HSA
Contact Name	Susie Smith
Contact Email and Phone Number	<a href="mailto:Susie.smith@sfgov.org">Susie.smith@sfgov.org</a>
SLC Meeting Presenter	Susie Smith
Reviewed and approved by Department Head?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Reviewed and approved by Commission?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A

## AB 2636

### Assemblymember Bains, Assembly District #35, D-Delano Mello-Granlund Older Californians Act.

#### Recommended Position

SPONSOR     **SUPPORT**     SUPPORT if amended     OPPOSE     OTHER & Describe

#### Summary

AB 2636 (Baines) modernizes term of use throughout the Older Californians Act and repeals obsolete provisions. The bill also updates findings and declarations relating to statistics and issues of concern for older Californians. It also increases flexibility to Area Agencies on Aging to develop and deliver community based programs.

#### Background/Analysis

Existing law requires the California Department of Aging to administer the Mello-Granlund Older Californians Act (act), which establishes various programs that serve older individuals, defined as persons 60 years of age or older, except as specified. The act requires the department to designate various private nonprofit or public agencies as area agencies on aging to work within a planning and service area and provide a broad array of social and nutritional services. Under the act, the department’s mission is to provide leadership to those agencies in developing systems of home- and community-based services that maintain individuals in their own homes or least restrictive homelike environments.

California’s aging population is growing faster than any other age group. By 2030, over 25 percent of the population in California will be 60 and older.<sup>1</sup> The population in the state is becoming more racially and ethnically diverse, and yet the COVID-19 pandemic impacted Californians disparately. In January of 2021, the Governor released his Master Plan for Aging (MPA). The MPA prioritizes the health and well-being of older Californians and the need for policies that promote healthy aging. The MPA serves as a 10 year blueprint for state government, local government, the private sector, and philanthropy to prepare the state for the coming demographic changes and continue California’s leadership in aging, disability, and equity.<sup>2</sup> The MPA is entering into its fourth year of initiatives. As we build towards a future with a rapidly increasing population of older Californians, we need to have California codes reflect current terms of use and be reflective of current programs meeting the needs of those aging in the state. The California Governor’s Master Plan for Aging has given us new

framework moving forward. Modernizing the Older Californians Act is important for the state and its population at all ages.

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#### Challenge

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The Older Americans Act has not had any updates of overall language in recent years and local agencies need more flexibility to tailor program to local needs.

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#### Solution/Recommended Proposal

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This bill would recast and revise various provisions of the act, including updating findings and declarations relating to statistics and issues of concern to the older adult population, and replacing references throughout the act from “senior,” and similar terminology to “older adult.” The bill would increase flexibility for area agencies on aging to develop and manage community-based program based on local need, as specified. The bill would repeal obsolete provisions, such as the Senior Center Bond Act of 1984.

Updating the Older Californians Act to better reflect modern terms of use is important. Language evolves, and updating this important code section needs these changes to reflect the evolution. Allowing flexibility to the vital Area Agencies on Aging ensures the programs best fit the needs of the regions older adults. By expanding the range of program initiatives AAAs are currently involved with it also allows the opportunity to meet future needs.

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#### Departments Impacted & Why

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Only DAS.

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#### Fiscal Impact

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Minimal if any.

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#### Support / Opposition

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- California Association of Area Agencies on Aging (C4A) (sponsor)
- Advisory Council to The Napa/Solano Area Agency on Aging
- Alzheimer’s Association Alzheimer's
- Greater Los Angeles Alzheimer's Orange County
- Alzheimer's San Diego
- LeadingAge California
- Senior Services Coalition of Alameda County