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AB-1005 In-home supportive services: terminal illness diagnosis. (2023-2024)

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Assembly Bill No. 1005

CHAPTER 346

An act to add Section 442.9 to the Health and Safety Code, relating to in-home supportive services.

[Approved by Governor September 22, 2024. Filed with Secretary of State September 22, 2024.]

LEGISLATIVE COUNSEL'S DIGEST

AB 1005, Alvarez. In-home supportive services: terminal illness diagnosis.

Existing law establishes the In-Home Supportive Services (IHSS) program, administered by the State Department of Social Services and counties, under which qualified aged, blind, or disabled persons are provided with supportive services in order to permit them to remain in their own homes.

As a condition of receiving services under the IHSS program, existing law requires an applicant or recipient to obtain a certification from a licensed health care professional declaring that the applicant or recipient is unable to perform some activities of daily living independently, and that without services to assist the applicant or recipient with activities of daily living, the applicant or recipient is at risk of placement in out-of-home care. Existing law requires that the certification be received prior to service authorization, except under certain circumstances. Existing law requires the department to develop a standard certification form, as specified, and to identify alternative documentation, including, but not limited to, hospital or nursing facility discharge plans, containing the required information.

Existing law sets forth various provisions relating to end-of-life care. When a health care provider makes a diagnosis that a patient has a terminal illness, existing law generally requires the health care provider, upon request, to provide the patient or another person authorized to make health care decisions with comprehensive information and counseling regarding legal end-of-life care options.

This bill would, before the discharge from an acute care hospital of a Medi-Cal beneficiary diagnosed with a terminal illness, require the hospital's designated case manager or discharge planner to evaluate the patient's likely need for posthospital services and ability to access those services. The bill would require the hospital case manager or discharge planner to ask the patient or authorized person if they are interested in receiving information about the IHSS program if that patient is anticipated to need in-home personal care. If interest is expressed, the bill would require the hospital case manager or discharge planner to provide to the patient or authorized person the information, including how to initiate the application process and the option for a family member to provide care as an IHSS provider subject to the IHSS provider enrollment conditions.

If the patient seeks to apply for services under the IHSS program, the bill would require the hospital case manager or discharge planner to communicate to the patient's primary care physician the patient's interest in applying for IHSS to support the timely completion of the health care certification form.

Vote: majority Appropriation: no Fiscal Committee: no Local Program: no

THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:

SECTION 1. Section 442.9 is added to the Health and Safety Code, to read:

442.9. (a) Before the discharge from an acute care hospital of a Medi-Cal beneficiary diagnosed with a terminal illness, the hospital's designated case manager or discharge planner shall evaluate the patient's likely need for posthospital services and their ability to access those services. For patients anticipated to need in-home personal care, the hospital case manager or discharge planner shall ask the patient, or another person authorized to make health care decisions for the patient, if they are interested in receiving information about the in-home supportive services (IHSS) program (Article 7 (commencing with Section 12300) of Chapter 3 of Part 3 of Division 9 of the Welfare and Institutions Code). If the patient or authorized person expresses interest in receiving the IHSS information, the hospital case manager or discharge planner shall provide to the patient or authorized person the information, including how to initiate the application process and the option for a family member to provide care as an IHSS provider subject to the IHSS provider enrollment conditions set forth in that article.

(b) If the patient seeks to apply for services under the IHSS program, the hospital case manager or discharge planner shall, as appropriate, communicate to the patient's primary care physician the patient's interest in applying for IHSS to support the timely completion of the health care certification form (SOC 873 or its successor), as described in Section 12309.1 of the Welfare and Institutions Code.