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AB-1161 Public social services: state of emergency or health emergency. (2025-2026)

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CALIFORNIA LEGISLATURE— 2025–2026 REGULAR SESSION

ASSEMBLY BILL

NO. 1161

Introduced by Assembly Member Harabedian
(Coauthor: Assembly Member Calderon)

February 20, 2025

An act to add Sections 10507 and 14118 to the Welfare and Institutions Code, relating to public social services.

LEGISLATIVE COUNSEL'S DIGEST

AB 1161, as amended, Harabedian. Public social services: state of emergency or health emergency.

Existing law establishes various public social services programs under the jurisdiction of the State Department of Social Services, including, among others, the California Work Opportunity and Responsibility to Kids (CalWORKs) program, the CalFresh program, the California Food Assistance Program (CFAP), the In-Home Supportive Services (IHSS) program, and the Cash Assistance Program for Immigrants (CAPI).

Existing law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services and 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, the Knox-Keene Health Care Service Plan Act of 1975, requires a health care service plan to provide an enrollee who has been displaced or whose health may otherwise be affected by a state of emergency, as declared by the Governor, or a health emergency, as declared by the State Public Health Officer, with access to medically necessary health care services, as specified.

This bill would require the State Department of Social Services, for purposes of CalWORKs, CalFresh, CFAP, IHSS, and CAPI, and the State Department of Health Care Services, for Medi-Cal purposes, to provide continuous eligibility for the applicable programs to a recipient or beneficiary who has been ~~displaced by, or who has otherwise been affected by, a state of emergency.~~
~~For~~ *affected by a state of emergency, including through displacement.*

For Medi-Cal purposes, the bill would ~~also specify additional qualifying circumstances, including certain disruptions in providers, infrastructure, or other services, and would also~~ require this continuous eligibility in the case of ~~displacement or other~~ effect ~~an~~ by a health emergency. *The bill would authorize the State Department of Health Care Services to implement these Medi-Cal provisions by providing continuous eligibility to all Medi-Cal beneficiaries within a geographic region where the department finds that multiple Medi-Cal beneficiaries within the geographic region have experienced any of these circumstances due to a state of emergency or health emergency.*

Under the bill, the continuous eligibility would maintain a recipient's or beneficiary's current scope of benefits under the applicable program for ~~at least 90 calendar days starting from the proclamation or declaration, as applicable, and would continue through at least the conclusion of the proclamation or declaration, as applicable.~~ *certain timelines.* The bill would require the 2 departments to implement the continuous eligibility through automated programming of eligibility systems, with notifications, as specified.

The bill would require a county to immediately restore eligibility for the applicable program for any recipient or beneficiary whose eligibility was discontinued and who informs the county that they have been impacted as described above, without requesting any further verifications from the recipient or beneficiary.

In the case of CalWORKs, CalFresh, CFAP, IHSS, and CAPI, if a recipient fails to submit a semiannual report or an annual redetermination or recertification of eligibility, if applicable, the bill would require the county to determine that the recipient had good cause for failing to submit that information. The bill would set forth related provisions for the county, the State Department of Social Services, and the Director of Social Services.

Under the bill, these provisions would be implemented only to the extent not in conflict with federal law. *The bill would authorize the Director of Social Services to waive, subject to receipt of any necessary federal approvals, the enforcement of specific federal requirements, regulations, or standards necessary to implement the above-described applicable provisions. Under the bill, implementation of the Medi-Cal provisions would be conditioned on receipt of any necessary federal approvals and the availability of federal financial participation.* The bill would authorize the Director of Social Services or the Director of Health Care Services to issue county directives regarding compliance with ~~these the respective~~ provisions.

By creating new duties for counties with regard to eligibility for the above-described programs, the bill would impose a state-mandated local program.

Existing law continuously appropriates moneys from the General Fund to defray a portion of county costs under the CalWORKs program.

This bill would instead provide that the continuous appropriation would not be made for purposes of implementing these provisions.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to the statutory provisions noted above.

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

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

SECTION 1. Section 10507 is added to the Welfare and Institutions Code, to read:

10507. (a) The State Department of Social Services shall provide continuous eligibility for the following programs to a recipient of the applicable program who has been displaced by, or who has otherwise been affected by, a state of emergency, as proclaimed by the Governor pursuant to Section 8625 of the Government Code:

(1) The California Work Opportunity and Responsibility to Kids (CalWORKs) program, as described in Chapter 2 (commencing with Section 11200) of Part 3.

(2) The CalFresh program, as described in Chapter 10 (commencing with Section 18900) of Part 6.

(3) The California Food Assistance Program (CFAP), as described in Chapter 10.1 (commencing with Section 18930) of Part 6, through whichever version of Section 18930 is operative.

(4) The In-Home Supportive Services (IHSS) program, as described in Article 7 (commencing with Section 12300) of Chapter 3 of Part 3.

(5) The Cash Assistance Program for Immigrants (CAPI) pursuant to Chapter 10.3 (commencing with Section 18937) of Part 6.

(b) The continuous eligibility described in subdivision (a) shall maintain a recipient's current scope of benefits under the applicable program for at least 90 calendar days starting from the proclamation described in subdivision (a), and shall continue through at least the conclusion of the proclamation described in subdivision (a).

(c) (1) The department shall implement subdivision (b) for each recipient described in subdivision (a) through automated programming of eligibility systems to pause all discontinuances and all negative actions, without requiring manual eligibility worker action.

(2) The automated programming described in paragraph (1) shall include the transmission of a notification by mail, and a notification through electronic, text, or telephonic format, that inform a recipient about their continued eligibility and about any changes to deadlines for any information required to continue eligibility after the state of emergency.

(d) A county shall immediately restore eligibility for the applicable program for any recipient whose eligibility was discontinued and who informs the county that they have been impacted as described in subdivision (a), without requesting any further verifications from the recipient. The county shall accept the recipient's attestation of their impact by any means, including, but not limited to, verbal communication.

(e) (1) If a recipient described in subdivision (a) fails to submit a semiannual report for purposes of a program listed in subdivision (a), if applicable, by the end of the semiannual reporting period, or an annual redetermination or recertification of eligibility, if applicable, by the end of the annual reporting period, the county shall determine that the recipient had good cause for failing to submit that information.

(2) If a discontinuance notice has been issued, the county shall rescind the notice for the full period of continuous eligibility described in subdivision (b).

(3) A county shall not terminate benefits due to a failure to submit a semiannual report by the end of the semiannual reporting period if the recipient had good cause for failing to submit the report.

(4) A county shall not terminate benefits due to a failure to submit an annual redetermination or recertification of eligibility by the end of the annual reporting period if the recipient had good cause for failing to submit the report.

(5) To the extent permitted by federal law, the department shall seek any necessary federal waivers to suspend or defer the federal Supplemental Nutrition Assistance Program (SNAP) recertification deadline for purposes of recipients described in subdivision (a), as applicable.

(6) The Director of Social Services may waive, subject to receipt of any necessary federal approvals, the enforcement of specific federal requirements, regulations, or standards necessary to implement this section.

(f) This section shall not be construed as limiting the Governor's authority under the California Emergency Services Act (Chapter 7 (commencing with Section 8550) of Division 1 of Title 2 of the Government Code), or the authority of the director under any provision of this part.

(g) This section shall be implemented only to the extent not in conflict with federal law.

(h) The director may issue county directives in the form of all-county letters or eligibility division letters regarding compliance with this section during the first three years following the proclamation of a state of emergency, or until the state of emergency is terminated, whichever occurs first. This guidance shall not be subject to the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code).

SEC. 2. Section 14118 is added to the Welfare and Institutions Code, to read:

14118. (a) (1) The department shall provide continuous Medi-Cal eligibility to a beneficiary ~~who has been displaced by, or who has otherwise been affected by, who, due to~~ a state of emergency, as proclaimed by the Governor pursuant to Section 8625 of the Government Code, or a health emergency, as declared by the State Public Health Officer pursuant to Section 101080 of the Health and Safety ~~Code. Code, has been affected by any of the following circumstances:~~

(A) A county welfare department operating at reduced capacity, including, but not limited to, staffing, office closures, or operation at reduced hours.

(B) The beneficiary being displaced or otherwise experiencing limited freedom of movement, including, but not limited to, relocation to shelter or emergency housing, stay-at-home orders, or evacuation orders or warnings.

(C) A disruption in providers, infrastructure, or other services necessary to maintain daily life and health, including, but not limited to, a disruption in utilities, school, childcare, medical services or providers, access to food, transportation, or mail services.

(2) The department may implement paragraph (1) by providing continuous eligibility to all Medi-Cal beneficiaries within a geographic region where the department finds, after consulting with counties, consumer stakeholders, and the Office of Emergency Services within the office of the Governor, that multiple Medi-Cal beneficiaries within the geographic region have experienced any of the circumstances described in subparagraphs (A) to (C), inclusive, of paragraph (1), due to a proclaimed state of emergency or declared health emergency.

(b) The continuous Medi-Cal eligibility described in subdivision (a) shall maintain a beneficiary's current scope of Medi-Cal ~~coverage~~ *coverage*, for at least 90 calendar days starting from the *date of the* proclamation or declaration described in subdivision (a), ~~whichever one is later, and shall continue through at least the conclusion of~~ *or through the date* the proclamation or declaration described in subdivision ~~(a); (a) is terminated~~, whichever one is later.

(c) (1) The department shall implement subdivision (b) for each beneficiary described in subdivision (a) through automated programming of eligibility systems to pause all discontinuances and all negative actions, without requiring manual eligibility worker action.

(2) The automated programming described in paragraph (1) shall include the transmission of a notification by mail, and a notification through electronic, text, or telephonic format, that inform a beneficiary about their continued Medi-Cal eligibility and about any changes to deadlines for any information required to continue Medi-Cal eligibility after the state of emergency or the health emergency, as applicable.

(d) A county shall immediately restore Medi-Cal eligibility for any beneficiary whose Medi-Cal coverage was discontinued and who informs the county that they have been impacted as described in subdivision (a), without requesting any further verifications from the beneficiary. The county shall accept the beneficiary's attestation of their impact by any means, including, but not limited to, verbal communication.

(e) This section shall not be construed as limiting the Governor's authority under the California Emergency Services Act (Chapter 7 (commencing with Section 8550) of Division 1 of Title 2 of the Government Code), or the director's authority under any provision of this chapter.

(f) *(1)* This section shall be implemented only to the extent not in conflict with federal law.

(2) This section shall be implemented only to the extent that any necessary federal approvals are obtained and that federal financial participation is available and not otherwise jeopardized.

(g) The director may issue county directives in the form of all-county letters or eligibility division letters regarding compliance with this section during the first three years following the proclamation of a state of emergency or the declaration of a health emergency, or until the state of emergency or the health emergency is terminated, whichever occurs first. This guidance shall not be subject to the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code).

SEC. 3. No appropriation pursuant to Section 15200 of the Welfare and Institutions Code shall be made for purposes of implementing this act.

SEC. 4. If the Commission on State Mandates determines that this act contains costs mandated by the state, reimbursement to local agencies and school districts for those costs shall be made pursuant to Part 7 (commencing with Section 17500) of Division 4 of Title 2 of the Government Code.