Date of Hearing: April 29, 2025

ASSEMBLY COMMITTEE ON HUMAN SERVICES Alex Lee, Chair AB 617 (McKinnor) – As Amended March 20, 2025

SUBJECT: Developmental services: personal care or assistance and in-home respite services

SUMMARY: Requires vendored or contracted organization providing personal care or personal assistance services or in-home respite services to become a licensed home care organization, and requires individuals providing personal care or personal assistance services or in-home respite services to register with the home care aide registry. Specifically, **this bill**:

- Requires organizations vendored or contracted through a regional center or the Department
 of Developmental Services (DDS) to provide personal care or personal assistance services or
 in-home respite services to a consumer receiving services to be licensed as a home care
 organization prior to providing personal care or personal assistance services or in-home
 respite services to a consumer receiving services.
- 2) Requires an individual who is employed by organizations described in 1) above, to be listed on the home care aide registry prior to providing personal care or personal assistance services or in-home respite services to a consumer receiving services.
- 3) Permits an organization vendored or contracted through a regional center or DDS to provide personal care or personal assistance services or in-home respite services to a consumer receiving services prior and an individual who is employed by such an organization before January 1, 2026, must meet the requirements in 1) and 2) above, by January 1, 2028.

EXISTING LAW:

- 1) Established the Home Care Services Consumer Protection Act. (Health and Safety Code [HSC] §§1796.10 1796.70)
- 2) Specifies individuals who are not employed by a home care organization but who provide home care services to a client may be listed on the home care aide registry. (HSC § 1796.14 (a))
- 3) Exempts specified individuals from being required to register with the home care registry. (HSC § 1796.14 (c) (1))
- 4) Specifies organizations are not precluded from obtaining more than one home care license or from obtaining a home care organization license in addition to other licenses issued by the department, or both. (HSC § 1796.17 (a))
- 5) Exempts specified organizations from licensure requirements (HSC § 1796.17 (b))

FISCAL EFFECT: Unknown, this bill has not been analyzed by a fiscal committee.

COMMENTS:

Background: Home Care Services Consumer Protection Act. Home care refers to a range of nonmedical services provided to individuals in their own homes to help them manage their health, personal needs, and activities of daily living. The goal of home care is to support individuals who may have chronic illnesses, disabilities, or are recovering from surgeries or medical procedures, allowing them to remain in the comfort of their own home rather than in a hospital or nursing facility. Home care services can be short-term or long-term, depending on the needs of the individual. The types of services provided by a home care aide employed by a home care organization are nonmedical and include the following:

- Assistance with daily living activities such as bathing, dressing, grooming, and eating.
- Help with housekeeping tasks like cleaning, cooking, and laundry.
- Support with mobility and companionship.

After several attempts to require a licensing scheme, AB 1217 (Lowenthal), Chapter 790, Statutes of 2013, enacted the Home Care Services Consumer Protection Act which requires Home Care Organizations to be licensed and creates a public online registry for Home Care Aides who have been background checked. The California Department of Social Services (CDSS) is responsible for the licensure and registry compliance.

The law provides for numerous exemptions to licensure and registry. Exemptions include, but are not limited to: home health agencies, hospices, health facilities, In-Home Supportive Services providers, an organization vendored or contracted through a regional center or DDS to provide services and supports for persons with developmental disabilities when funding for those services is provided through DDS and more than 50% of the recipients of the home care services, independent home care aides, nonrelative extended family members, clinics, alcoholism or drug recovery facilities, and foster homes. The organizations listed are not precluded from voluntarily becoming licensed. Similarly, individuals who provide services through the listed exempt organizations are still permitted to be listed on the registry on a volunteer basis.

DDS' Vendorization Process. Service providers must be vendored by a regional center before they can provide and be reimbursed for services. DDS and regional centers use the term "vendorization" to describe the entire approval process involved in preparing to provide services to regional center consumers. Typically, this process also often involves obtaining licenses or approvals from other state and local agencies prior to becoming a vendor, but starts at the regional center.

According to DDS, vendorization is the process for identification, selection, and utilization of service providers based on the qualifications and other requirements necessary in order to provide the services. The vendorization process allows regional centers to verify, prior to the provision of services to consumers, that an applicant meets all of the requirements and standards specified in regulations. Applicants who meet the specified requirements and standards are assigned a service code and a unique vendor identification number.

Service providers are vendored by the regional center in whose catchment area the service is located, known as the vendoring regional center. The vendoring regional center is responsible for ensuring that the applicant meets licensing and Title 17 requirements for vendorization,

determining the appropriate vendor category for the service to be provided, and approving or disapproving vendorization based upon their review of the documentation submitted by the applicant.

Once a potential service provider has obtained all necessary licenses, submitted a complete application and all necessary documentation to the vendoring regional center, the regional center has 45 days to approve or disapprove vendorization.

This bill removes the exemption for regional centers or DDS vendored or contracted organizations providing personal care or personal assistance services or in-home respite services as well as the individuals providing that care through these organizations.

This bill does not make changes to the vendorization process or requirements. These organizations still must be a vendor to provide services to regional center consumers.

Author's Statement: According to the Author, "[This bill] adds respite providers to the home care aid registry and will serve as a directory to help connect consumers and their families to qualified respite providers. By also removing an exemption, we can encourage non-medical providers, that are already licensed as a home care organization, to become respite providers, thus increasing access to a much needed service."

Equity Implications: This bill adds to the existing list of organizations and individuals required to be licensed and listed on the home care registry. Increased oversight of these individuals providing care might increase quality; however, it is unclear if this will impact the number of available providers if they now must become licensed.

RELATED AND PRIOR LEGISLATION:

AB 1217 (Lowenthal), Chapter 790, Statutes of 2013, created the Home Care Services Consumer Protection Act, which provided, on and after January 1, 2015, for the licensure and regulation of home care organizations by CDSS and the registration of home care aides.

AB 322 (Yamada) of 2013, would have established the Home Care Services Act of 2013 to license and regulate home care organizations providing services for the elderly, frail, and persons with disabilities. AB 322 was held on the Assembly Committee on Appropriations suspense file.

SB 411 (Price) of 2011, would have established the Home Care Services Act of 2011, which required the Department of Public Health to license and regulate home care organizations. SB 411 was vetoed by Governor Brown.

AB 899 (Yamada) of 2011, would have established the Home Care Services Act of 2013 to license and regulate home care organizations providing services for the elderly, frail, and persons with disabilities. AB 899 was held on the Assembly Committee on Appropriations suspense file.

AB 853 (Jones) of 2007, would have established the Home Care Services Act to license and regulate home care services for the elderly, frail, and persons with disabilities. AB 853 was held was held on the Assembly Committee on Appropriations suspense file.

REGISTERED SUPPORT / OPPOSITION:

Support

SEIU California (Sponsor) Alzheimer's Association, State Policy Office North East Medical Services (NEMS)

Opposition

Achievement House & NCI Affiliates, INC.

Achievement House, INC.

Achievement House, Incorporated

Aveanna Healthcare

California Community Living Network

California Community Living Network (UNREG)

California Disability Services Association

California Respite Association

Channel Islands Social Services

Compass LLC

Compass SLS & ILS

In2vision Programs, LLC

InClusion Services LLC

Networx Supported Living Services

Pathpoint

Progressive Employment Concepts

Special Care Services

Strategies to Empower People

The Adult Skills Center

Tri-County Respite Care Service

UCP of Sacramento and Northern California

Twenty-seven private citizens

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