Commission on Alcohol and Other Drugs (CAOD)

Policy and Advocacy

SAPC Substance Abuse Prevention and Control

County of Los Angeles Public Health

November 2026

Roles and Responsibilities of CAOD

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County of Los Angeles Public Health

CAOD Bylaws

ARTICLE IX: COMMITTEES

C: Policy and Planning Committee The Policy and Planning Committee shall have the following responsibilities:

1. Review federal, State and County budgets and their impact on communities and delivery of programs and services in the County and regularly update the Commission on the same;

2. Review and make recommendations on all processes used to ensure citizen and professional involvement at all stages of planning for, delivery of, and evaluation of programs and services for prevention and treatment of alcohol and other drug abuse and addiction;

3. Review and advise on proposed federal, State and local legislation and laws that impact the alcohol and other drugs field and are within the committee's subject matter jurisdiction.

http://publichealth.lacounty.gov/sapc/docs/public/coa/2022-04/CAOD%20Bylaws.pdf

Policy and Advocacy

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Equity

- Advocate for policies that promote equitable outcomes for historically marginalized and underserved communities.

Health, Public Health, and Behavioral Health

- Provide public health services that protect and promote health among individuals and communities, and address the growing need for prevention, diagnostic, and treatment services for individuals with behavioral and other health conditions.

Housing and Homelessness

- Reduce barriers to housing. Transition residents who are experiencing homelessness into safe, stable, and permanent housing. Implement effective strategies to reduce inflow into homelessness.

Human Services

- Alleviate financial hardship, address food insecurity, provide affordable health care, promote the well-being of families, prevent abuse, exploitation, and neglect, provide aging and disability services, provide child support services, and prevent or mitigate poverty, all while promoting diversity, equity, and inclusion.

Justice, Public Safety, Emergency Management systems

- Support reforms to justice and public safety systems in pursuit of the “Care First, Jails Last” vision. Support preemptive emergency management and response investments.

https://ceo.lacounty.gov/wp-content/uploads/2025/04/Priorities-In-Action_State2025_Final-1.pdf
https://ceo.lacounty.gov/wp-content/uploads/2025/04/Priorities-In-Action_Federal-2025.pdf

County Legislative Position Process and Advocacy

CAOD

Provide recommendations and identify legislation or issues

Substance Abuse Prevention and Control (SAPC)

Prepares Formal Analysis, provides Subject Matter Expertise, confers with providers and other stakeholders

Department of Public Health (DPH) Government Affairs

Refines submission, confers with all relevant DPH Bureaus, presents to DPH leadership

Chief Executive Officer - Legislative Affairs and Intergovernmental Relations (CEO-LAIR)

Reviews and prepares for presenting to Board of Supervisors

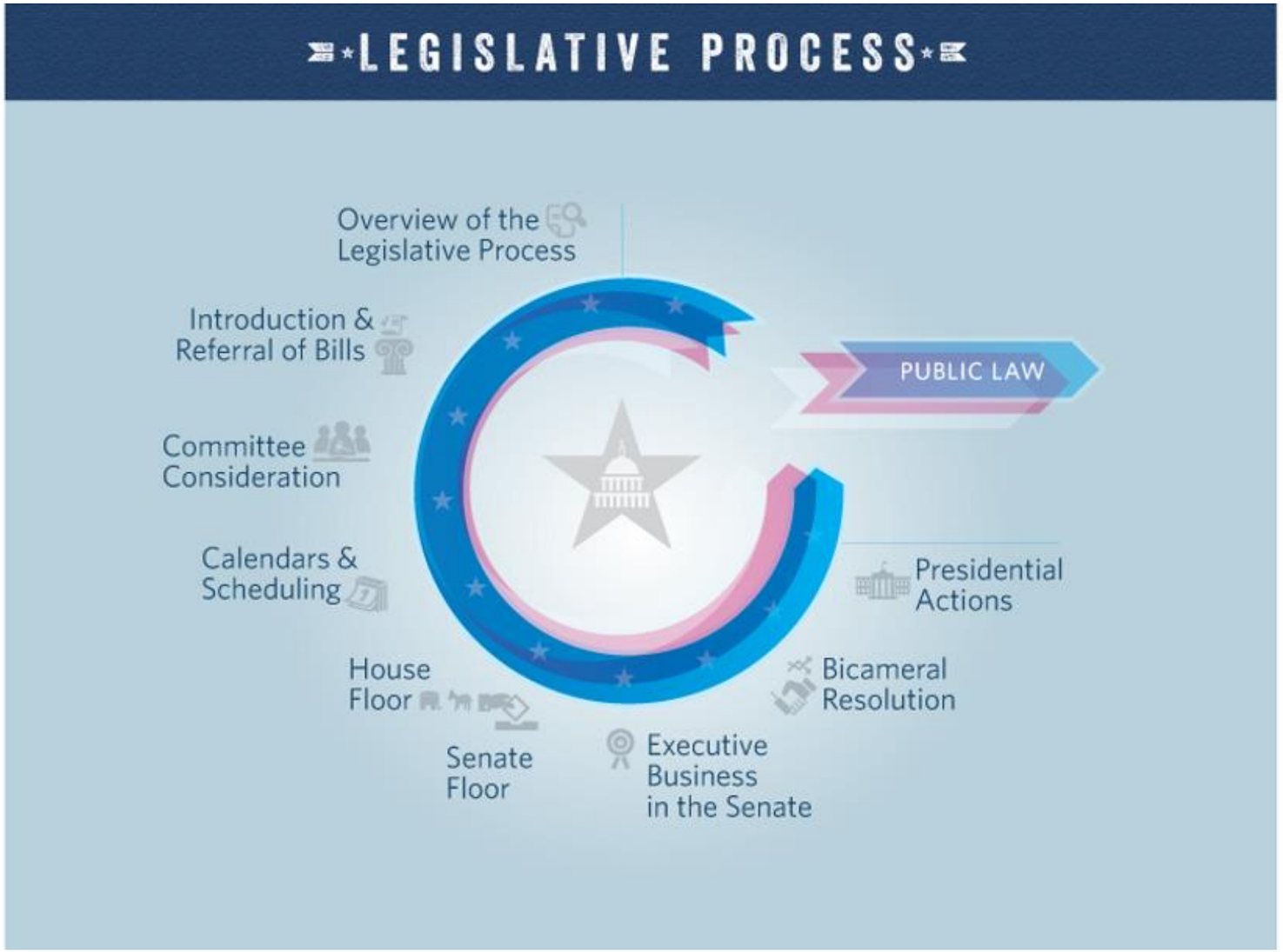
Board of Supervisors

Presented at Board Meeting and the position is voted on

Federal Policy Updates

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County of Los Angeles Public Health



https://www.congress.gov/legislative-process

Changes to Medicaid/Medi-Cal

- The federal interim final rule [CMS-2454-IFC] provides guidance to states for implementation of work requirements mandated by H.R. 1. It narrows the definition of the medical frailty exclusion, requiring states to verify that someone has a qualifying condition (substance use disorder and/or severe mental illness) and that the condition "significantly impairs" their ability to work.
- CMS released additional guidance to states regarding a tier system for determining medical frailty eligibility verification. It includes three tiers that links the severity of the condition to the individuals' impairment. The guidance also clarifies that individuals who have been in "stable recovery" from a SUD for five or more consecutive years will not be included under the medical frailty SUD category. CMS anticipates allowing states to use a five-year lookback period to verify that an individual is not in recovery from a SUD for five years or more. Individuals verified as medically frail will be allowed to re-verify annually; all other eligibility criteria beside medical frailty will remain on a six-month verification schedule.
- Starting January 1, 2027, some Medi-Cal members will no longer get care through a Medi-Cal health plan (managed care). Instead, they will get care through fee-for-service (FFS) Medi-Cal, where Medi-Cal pays providers directly for each visit or service. FFS does not mean members pay; Medi-Cal still covers the cost of care.
    - Applies to individuals with unsatisfactory immigration status (UIS), certain lawful permanent residents (green card holders) in the five-year waiting period before they qualify for full-scope Medi-Cal, and individuals with Permanently Residing Under Color of Law (PRUCOL) status.

Federal Public Charge Rule

- The U.S. Department of Homeland Security (DHS) published a final rule [USCIS-2025-0304] that changes how immigration officials decide whether certain non-citizens applying for immigration status may be considered a "public charge".
- Effective 9/18/26, this rule raises concerns among immigrant families about accessing public programs and services.

Bill	Summary	Status
H.R. 1266 (Panetta-D)/S. 545 (Cortez-D) – Combatting Illicit Xylazine Act	Prohibits the illicit use of xylazine by classifying xylazine as a Schedule III substance of the Controlled Substances Act and requires certain reporting to be submitted to Congress on the prevalence and impacts of illicit use of xylazine in the U.S.	9/16/2026 – Received in the Senate. Read twice. Placed on Senate Legislative Calendar under General Orders. Calendar No. 623.
S. 3588 (Merkley-D) – School Access to Naloxone Act of 2026	Amends the Public Health Service Act to provide grant funding for trained school personnel to administer drugs and devices for emergency treatment of known or suspected opioid overdose among public and private elementary and secondary schools.	3/19/2026 – In Committee on Health, Education, Labor, and Pensions.
H.R. 5462 (Goldman-D) – The Michelle Alyssa Go Act	Revises the definition of institution for mental diseases (IMDs) under the Medicaid program to exclude from such definition institutions having 36 beds or less if such institutions meet certain standards. This change will remove barriers to creating more behavioral health beds	9/18/2025 – Referred to the House Committee on Energy and Commerce.
H.R. 6104 (Pappas-D) – Dark Web Interdiction Act of 2025	Prohibits the delivery or distribution of controlled substances (i.e. opioids) by means of the dark web, establishes a 2-level sentencing increase for violations, and establishes the Joint Criminal Opioid and Darknet Enforcement Task Force.	11/18/2025 - Referred to the House Committee on the Judiciary, Committee on Energy and Commerce, and House Committee on Financial Services. Further referrals pending.

Updated 10/29/26

Local Policy Updates

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County of Los Angeles Public Health

Prohibiting the Sale and Distribution of Nitrous Oxide by Tobacco and Cannabis Retailers

- The Los Angeles City Council unanimously approved an ordinance to prohibit nitrous oxide sales at tobacco and cannabis retail locations within the City. A violation of the ordinance is a criminal misdemeanor charge, punishable by a fine of up to $1,000, six months in jail, or both.
  - The prohibition does not apply to nitrous oxide that is in a pre-packaged food product and used solely as a propellant.
- The ordinance has been sent to the Mayor for final approval and signature.

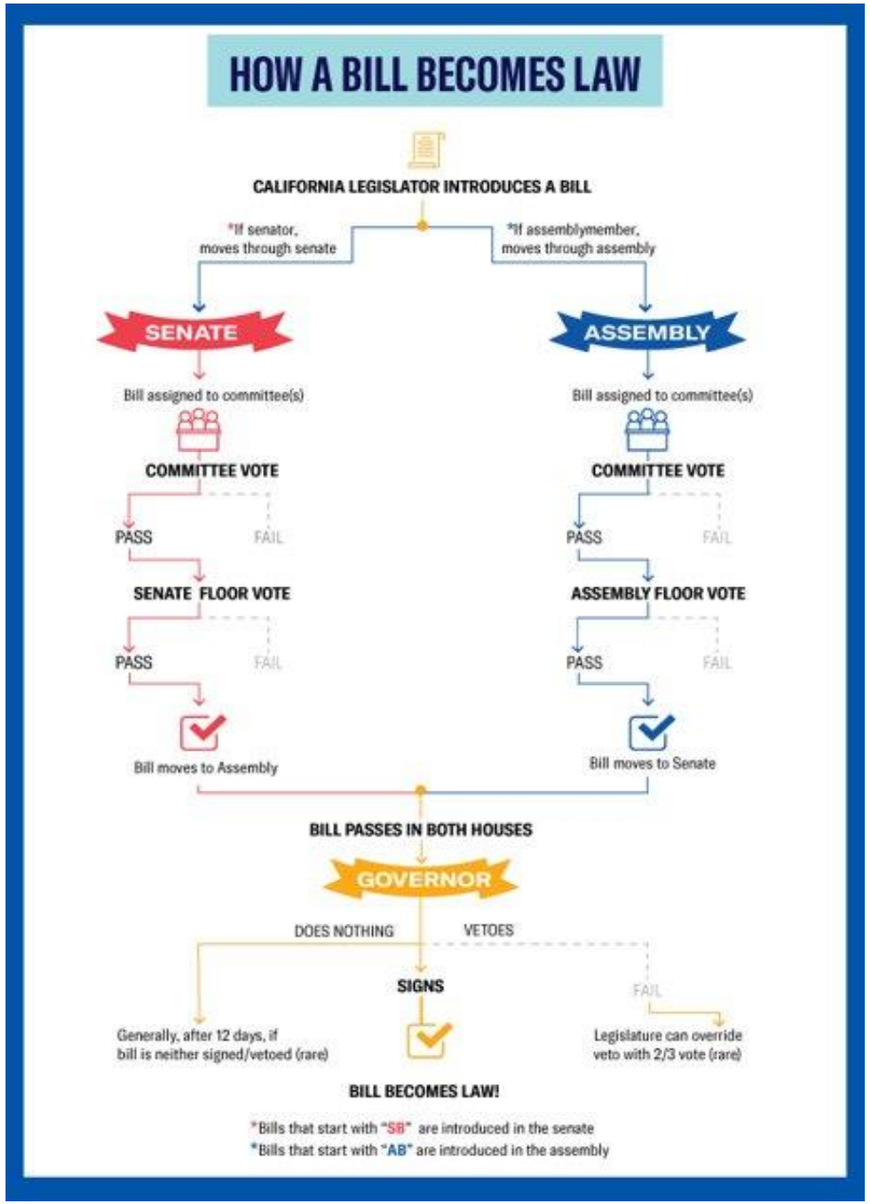
Measure ER

- Measure ER is a LA County ballot measure that appeared on the June 2, 2026 election ballot in response to HR 1 (One Big Beautiful Bill Act) and the anticipated federal funding cuts affecting the County's healthcare system. Voters approved the measure, a temporary 0.5% general sales tax increase in LA County, with 50.6% voting Yes.
- The sales tax increase went into effect on October 1, 2026, but the County will be unable to spend the funds due to an ongoing lawsuit. Funds were supposed to made available to the County beginning November 1, 2026, but until the lawsuit is resolved, revenue collected under this measure cannot be distributed to hospitals, clinics, and the County health departments who provide the County's most vulnerable residents with life-saving access to healthcare.
  - This lawsuit does not change residents' access to Medi-Cal or CalFresh benefits.

State Legislative Updates

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California State Legislative Process

- Bill Research and Prep – Fall to Winter
- Bill Introductions – December to February
- First House Committee Hearing(s) – February to May
- First House Appropriations Suspense – End of May
- House of Origins – End of May or early June
- Second House Committee Hearing(s) – June to August (with Summer Recess in between)
- Second House Appropriations Suspense – August or September
- End of Session – End of August or early September
- Last Day for Governor to Act – End of September or early October (30 days after End of Session)
- Statutes take effect – January 1

https://capitolmuseum.ca.gov/learn/about-the-government/life-cycle-of-a-bill/

State Legislative Report Highlights: Prevention

Bill	Summary	Status	Position
AB 2076 (Lowenthal-D) – The Parent's Accountability and Child Protection Act: online marketplaces: nitrous oxide	Adds nitrous oxide to the list of specified products or services that require a person or a business that conducts a business in California to verify the purchaser is of legal age. Prohibits an online seller from allowing a purchaser to use a gift card for specified products or services that are illegal to sell to a minor.	Chaptered.	**DPH Position:** Watch. **County Position**: No position taken. **CBHDA Position**: No position taken.
SB 758 (Umberg-D) – Public health: nitrous oxide	Prohibits cigarette and tobacco product retailers from selling nitrous oxide in any retail location. A retailer does not include a grocery store or a general retail merchandise store with a grocery department. Adds the authority for a city or county to adopt an ordinance imposing greater restriction on the retail of nitrous oxide than those imposed by this section, provided it does not restrict legitimate uses.	Chaptered.	**DPH Position:** Watch. **County Position**: No position taken. **CBHDA Position**: No position taken.
SB 936 (Blakespear-D and Umberg-D) – Nitrous oxide: sales	Prohibits the sale of nitrous oxide containers that can hold more than 8 grams of nitrous oxide and containers that have, or is marketed to have, the taste or smell of any food. Prohibits knowingly selling or distributing a device that allows an individual to inhale nitrous oxide from the container or hold nitrous oxide for the purposes of inhalation. Authorizes a court to suspend a business license if the business has a prior conviction for violating these prohibitions and to revoke a license to sell tobacco products if the business has two prior convictions for violating these prohibitions. Prohibits tobacco retailers from selling nitrous oxide. Authorizes CDTFA to seize nitrous oxide products.	Chaptered	**DPH Position:** Watch. **County Position:** Watch. **CBHDA Position:** Watch.

Updated 10/29/26

State Legislative Report Highlights: Prevention

Bill	Summary	Status	Position
AB 1586 (Ramos-D) Opioid overdose reversal medication: school resource officers.	Requires school resource officers, beginning in the 2027-2028 school year, to complete an opioid overdose recognition and response training upon assignment to a school site and every two years thereafter. Requires Commission on Peace Officer Standards and Training, in consultation with CDPH, to provide implementation guidance on accessing opioid overdose reversal medications at low or no cost and integrating overdose response into school safety planning. Introduces new annual reporting requirements on the number of times an opioid antagonist was administered and the type administered.	Chaptered.	**DPH Position:** Watch. **County Position:** No position taken. **CBHDA Position**: Support.
AB 1669 (Pacheco-D) Student health: leaves of absence: mental health.	Requires all post-secondary educational institutions to adopt a written policy to allow a student to take a voluntary medical leave of absence for a period determined by the institution or one academic year, whichever is longer.	Chaptered.	**DPH Position:** Watch. **County Position:** No position taken. **CBHDA Position:** No position taken.
AB 1830 (Petrie-Norris-D, Calderon-D, Lackey-R, Ransom-D) Ignition interlock devices.	Makes the installation of an ignition interlock device (IID) mandatory upon conviction of a first DUI offense involving alcohol. Adopts mandatory IID/restricted license model for alcohol-involved DUI convictions. Allows first-time DUI offenders to opt for suspension of their driving privilege in lieu of maintaining a restricted license and IID. Requires a 30-day administrative license suspension prior to a person applying for a restricted license for a DUI involving alcohol. Repeals the existing statewide IID pilot program made obsolete by this bill.	Died.	**DPH Position:** Watch. **County Position:** No position taken. **CBHDA Position:** No position taken.

Updated 10/29/26

State Legislative Report Highlights: Budget

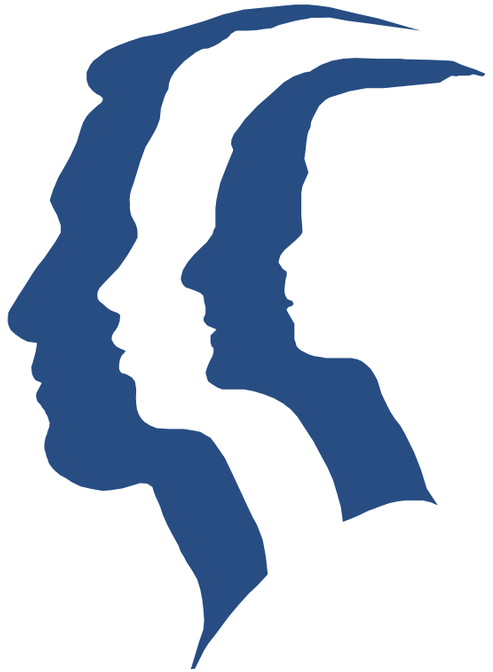
Bill	Summary	Status	Position
AB 173 (Committee on Budget) Health	Appropriates various federal grant funds from the Substance Abuse and Mental Health Services Administration (SAMHSA) including: $1.2 million for state operations related to implementation of the State Opioid Response Grant, $105.6 million for local assistance related to implementation of the State Opioid Response Grant, and $6 million for local assistance related to expenditure of the Substance Abuse Prevention and Treatment Block Grant. It also implements various oversight provisions and expands service delivery for the state's 988 Suicide and Crisis Lifeline.	Chaptered.	**DPH Position:** Watch. **County Position:** Watch. **CBHDA Position:** No position taken.

State Legislative Report Highlights: Workforce

Bill	Summary	Status	Position
AB 96 (Jackson-D) Mental health services: peer support specialist certification	Removes the requirement of possessing a high school diploma or equivalent degree from the requirements necessary for an applicant to receive certification.	Chaptered.	**DPH Position:** Support **County Position:** Support **CBHDA Position:** Support (Sponsor)

State Legislative Report Highlights: Recovery Oriented Housing

Bill	Summary	Status	Position
AB 1556 (Haney-D) Recovery residences funding	Would make recovery residences eligible for state funding if they meet specified Housing First and quality of care requirements.	Chaptered.	**DPH Position:** Watch. **County Position:** No position taken. **CBHDA Position:** Support.
SB 490 (Umberg-D) Alcohol and drug programs. (Gut and Amend)	Requires DHCS to initiate an investigation within 10 days of receiving an allegation and complete the investigation within 120 days of assigning the complaint. Authorizes DMC-ODS counties' behavioral health agency to request approval from DHCS to conduct a site visit of a recovery residence that is alleged to be operating without a license. Requires DHCS to conduct a site visit of a certified program or licensed facility that has disclosed specified interest in the recovery residence. No later than July 15, 2027, and by July 15th each year thereafter, all programs certified or facilities licensed by DHCS must submit a report of all money transfers between the program or facility and a recovery residence during the previous fiscal year.	Vetoed by the Governor.	**DPH Position:** Watch. **County Position:** No position taken. **CBHDA Position:** Oppose.



Thank You!