

Date of Hearing: April 14, 2026
Counsel: Kimberly Horiuchi

ASSEMBLY COMMITTEE ON PUBLIC SAFETY

Nick Schultz, Chair

AB 1854 (Krell) – As Amended March 19, 2026

SUMMARY: Prohibits a state or local law enforcement agency from knowingly affecting the arrest of, or arresting any person who the Governor has declined to surrender on the demand of the executive authority of any other state where the accused was not in the demanding state at the time of the commission of the crime and has not fled from another state. Specifically, **this bill:**

- 1) Prevents a state or local law enforcement agency or state court from arresting or participating in the arrest of, cooperating with, or providing information to, or imposing criminal or civil penalty on, any person performing, supporting, or aiding in the performance of a legally protected health care activity, whether in this state or not, if the legally protected healthcare activity is lawful in this state.
- 2) Prohibits a state or local law enforcement officer or agency or a state or local public agency or employee from cooperating with, or providing information to, another state or federal agency, as specified, about a legally protected healthcare activity that is lawful in California.
- 3) Mandates an out-of-state warrant, subpoena, or wiretap order be based on a declaration stating various grounds for the discovery of information, as specified, be filed under penalty of perjury.
- 4) Requires any person or entity headquartered, located, or incorporated in California and who receives, is served with, or is subject to a civil, criminal, or regulatory inquiry, investigation, subpoena, or summons, as specified, for information regarding legally protected health care activity not comply with or provide information in response to that inquiry, unless all of the following conditions are met:
 - a) It includes a declaration or affidavit signed under penalty of perjury, that the request is not made in connection with, and the information will not be used in, an out-of-state proceeding related to legally protected healthcare activity.
 - b) It is not related to any investigation or proceeding that seeks to impose civil or criminal liability, professional sanctions, or any other legal consequences on a person or entity for any legally protected healthcare activity.
 - c) It is related to an investigation regarding activity that is unlawful under California civil or criminal law and identifies which California law makes the activity unlawful.
 - d) It is related to an investigation or proceeding regarding activity that is grounds for professional discipline in California and identifies the grounds for professional

discipline.

- e) The recipient of the inquiry, investigation, subpoena, or summons has notified the Attorney General within seven days of receiving the inquiry and indicates whether the person or entity intends to comply with or provide information in response to the inquiry, and provide a copy of the response.
 - f) The recipient of the inquiry, investigation, subpoena, or summons has made reasonable attempts to notify the person who provided, sought, received, facilitated, or otherwise engaged in the legally protected health care activity to which the inquiry pertains at least 30 days prior to providing any responsive information.
 - g) A minimum of 30 days has passed since the recipient of the inquiry notified the Attorney General.
- 5) States the requirements specified above do not apply to an inquiry, investigation, subpoena, or summons from the Department of Justice (DOJ).
 - 6) Authorizes a person or entity that is located, headquartered, or incorporated in California and receives or is subject to a civil, criminal, or regulatory inquiry, investigation, subpoena, or summons, for information regarding legally protected health care activity may institute a civil action to obtain declaratory relief, or other relief deemed necessary and proper by the court, stating that compliance is prohibited.
 - 7) Authorizes a person or entity that is located, headquartered, or incorporated in California and who receives or is subject to a civil, criminal, or regulatory inquiry, investigation, subpoena, or summons for information regarding legally protected health care activity may institute a civil action to obtain declaratory relief, or other relief deemed necessary and proper by the court, stating that compliance is prohibited.
 - 8) Requires before any action to quash an inquiry, subpoena, investigation, or summons related to legally protected healthcare activity, a copy of the commencing document and all supporting documents must be served on the DOJ.
 - 9) Authorizes DOJ to intervene in any action brought to quash or any request for information.
 - 10) Authorizes DOJ to commence an action to enforce the requirements of this bill including, but not limited to an application or motion for an order enjoining ongoing or future violations.
 - 11) Prohibits DOJ from commencing an action unless the DOJ has reason to believe the defendant or respondent intends to comply or has complied with, or intends to provide information in response to or has provided information in response to, an inquiry, investigation, subpoena, or summons regarding legally protected health care activity.
 - 12) Mandates that any action brought by the DOJ, as specified, be commenced within six years of the date on which the DOJ received the notice of the inquiry, investigation, subpoena, or summons at issue.

- 13) States that, notwithstanding any law to the contrary, DOJ may seek any other legal or equitable remedy lawfully available.
- 14) Mandates the DOJ be awarded all attorney's fees and costs in any civil action in which a court imposes any penalties, as specified.

EXISTING LAW:

- 1) Defines "legally protected health care activity" as any of the following:
 - a) The exercise and enjoyment, or attempted exercise and enjoyment, by a person of rights to reproductive health care services, gender-affirming health care services, or gender-affirming mental health care services secured by the Constitution or laws of California or the provision by a health care service plan contract or a policy, or a certificate of health insurance, that provides for such services.
 - b) An act or omission undertaken to aid or encourage, or attempt to aid or encourage, a person in the exercise and enjoyment or attempted exercise and enjoyment of rights to reproductive health care services, gender-affirming health care services, or gender-affirming mental health care services secured by the Constitution or laws of California.
 - c) The provision of reproductive health care services, gender-affirming health care services, or gender-affirming mental health care services by a person duly licensed under the laws of California or the coverage of, and reimbursement for, those services or care by a health care service plan or a health insurer, if the service or care is lawful under the laws of California, regardless of the patient's location. (Pen. Code, § 1549.15, subd. (b)(1)(A)-(C).)
- 2) Provides that "gender-affirming health care" and "gender-affirming mental health care" shall have the same meaning as medically necessary health care that respects the gender identity of the patient, as experienced and defined by the patient, and may include, but is not limited to, interventions to suppress the development of endogenous secondary sex characteristics; interventions to align the patient's appearance or physical body with the patient's gender identity; and intervention to alleviate symptoms of clinically significant distress resulting from gender dysphoria, as defined in the Diagnostic and Statistical Manual of Mental Disorders, 5th Edition. (Pen. Code, § 1549.15, subd. (a).)
- 3) States that "reproductive health care services" means and includes all services, care, or products of a medical, surgical, psychiatric, therapeutic, diagnostic, mental health, behavioral health, preventative, rehabilitative, supportive, consultative, referral, prescribing, or dispensing nature relating to the human reproductive system provided in accordance with the constitution and laws of this state, whether provided in person or by means of telehealth services which includes, but is not limited to, all services, care, and products relating to pregnancy, the termination of a pregnancy, assisted reproduction, or contraception. (Pen. Code, § 1549.15, subd. (c).)
- 4) Defines "anti-reproductive-rights crime" to mean a crime committed partly or wholly because the victim is a reproductive health services client, provider, or assistant, or a crime that is partly or wholly intended to intimidate the victim, any other person or entity, or any

class of persons or entities from becoming or remaining a reproductive health services client, provider, or assistant. (Pen. Code, § 13776, subd. (a).)

- 5) Requires the DOJ to direct local law enforcement agencies to report annually to the DOJ specified information related to anti-reproductive-rights crimes. (Pen. Code, § 13777, subd. (a)(2).)
- 6) Requires the DOJ to carry out certain functions relating to anti-reproductive-rights crimes in consultation with the Governor, the Commission on Peace Officer Standards and Training (POST), and other subject matter experts. (Pen. Code, § 13777, subd. (b).)
- 7) Requires POST to develop an interactive training course on anti-reproductive-rights crimes and make the telecourse available to all California law enforcement agencies through an online portal or platform. (Pen. Code, § 13778, subd. (a).)
- 8) Mandates every law enforcement agency in this state to develop, adopt, and implement written policies and standards for officers' responses to anti-reproductive-rights calls by January 1, 2023. (Pen. Code, § 13778.1.)
- 9) Prohibits a state or local law enforcement agency or officer from knowingly arresting or knowingly participating in the arrest of any person for performing, supporting, or aiding in the performance of an abortion in this state, or obtaining an abortion in this state, if the abortion is lawful under the laws of this state. (Pen. Code, § 13778.2, subd. (a).)
- 10) Prohibits a state or local public agency, or any employee thereof acting in their official capacity, from cooperating with or providing information to any individual or agency or department from another state or, to the extent permitted by federal law, to a federal law enforcement agency regarding an abortion that is lawful under the laws of this state and that is performed in this state. (Pen. Code, § 13778.2, subd. (b).)
- 11) Provides that a law of another state that authorizes the imposition of civil or criminal penalties related to an individual performing, supporting, or aiding in the performance of an abortion in this state, or an individual obtaining an abortion in this state, if the abortion is lawful under the laws of this state, is against the public policy of this state. (Pen. Code, § 13778.2, subd. (c)(1).)
- 12) Prohibits a state court, judicial officer, or court employee or clerk, or authorized attorney from issuing a subpoena pursuant to any state law in connection with a proceeding in another state regarding an individual performing, supporting, or aiding in the performance of an abortion in this state, or an individual obtaining an abortion in this state, if the abortion is lawful under the laws of this state. (Pen. Code, § 13778.2, subd. (c)(2).)
- 13) Provides that the investigation of any criminal activity in this state that may involve the performance of an abortion is not prohibited, provided that information relating to any medical procedure performed on a specific individual is not shared with an agency or individual from another state for the purpose of enforcing another state's abortion law. (Pen. Code, § 13778.2, subd. (d).)
- 14) Prohibits a person shall from posting on the internet or social media, with the intent that another person imminently use that information to commit a crime involving violence or a

threat of violence against a reproductive health care services patient, provider, or assistant, or other individuals residing at the same home address, the personal information or image of a reproductive health care services patient, provider, or assistant, or other individuals residing at the same home address. (Gov. Code, § 6218.01, subd. (a)(1).)

- 15) Provides that the above is punishable by a fine of up to \$10,000 per violation, imprisonment of either up to one year in a county jail or by imprisonment for 16 months, two years, or three years, or by both that fine and imprisonment. (Gov. Code, § 6218.01, subd. (a)(2).)
- 16) Provides that a violation of the above that leads to the bodily injury of a reproductive health care services patient, provider, or assistant, or other individuals residing at the same home address, is a felony punishable by a fine of up to \$50,000, imprisonment for 16 months, two years, or three years, or by both that fine and imprisonment. (Gov. Code, § 6218.01, subd. (a)(2).)
- 17) Provides that the state may not deny or interfere with a person's right to choose or obtain an abortion prior to viability of the fetus or when the abortion is necessary to protect the life or health of the person. (Health & Safe. Code, § 123462, subd. (c); 123466.)
- 18) Prohibits under the Confidentiality of Medical Information Act (CMIA), providers of health care, health care service plans, or contractors, as defined, from sharing medical information without the patient's written authorization, subject to certain exceptions. (Civ. Code § 56, *et seq.*)

FISCAL EFFECT: Unknown

COMMENTS:

- 1) **Author's Statement:** According to the author, "AB 1854 continues California's commitment to defend reproductive health care freedoms by strengthening California's shield laws to better stop out-of-state anti-abortion prosecutions and extradition attempts at our border. At a time when anti-abortion states are targeting those who legally provide or receive reproductive health care in California, it's vital we fortify our protections."
- 2) **Attacks on Gender Affirming Care and Reproductive Rights:** In the past few years, numerous states have introduced legislation targeting transgender individuals in an attempt to prohibit or limit their ability to obtain gender-affirming care and reproductive care. More recently, on the first day of President Trump's second term, he issued an executive order titled "Defending Women from Gender Ideology Extremism and Restoring Biological Truth to the Federal Government" which states that "the United States recognizes two sexes, male and female."¹

¹ Exec. Order No. 14168, 90 Fed. Reg. 8615 (Jan. 20, 2025), available at <<https://www.federalregister.gov/documents/2025/01/30/2025-02090/defending-women-from-gender-ideology-extremism-and-restoring-biological-truth-to-the-federal>>.

In 2025, the federal DOJ announced that it had sent more than 20 subpoenas to doctors and clinics providing gender-affirming health care to minors.² Along with other states, California's DOJ has worked to prevent the federal government and out-of-state officials from obtaining these kinds of records.³ However, DOJ's ability to successfully prevent disclosure is directly tied to it having the authority to intervene in disputes regarding the provision of this information, and having notice of an inquiry in the first instance.

Since then, the President has issued an executive order banning transgender girls and women from participating in women's sports, and another one banning the use of federal funding for youth gender affirming care, including funding for research on gender affirming care.⁴ Although some of these orders are currently being challenged in court, the outcome of those cases is uncertain. In response to these executive orders, the Trump Administration has taken several actions, including rescinding all existing federal policies protecting transgender people from sex and disability discrimination; revoking the ability to obtain passports and federal documents reflecting their gender identity; denying transition-related healthcare to federal employees; and directing federal prisons to deny medical treatment and house transgender people according to sex assigned at birth.⁵

Some California healthcare providers are beginning to scale back care for transgender youth, following efforts by the Trump administration to restrict access to such care. Stanford is the second provider in this state that has begun restricting gender-affirming health care because of the recent actions of the Trump administration. Stanford recently issued the following statement on the matter:

After careful review of the latest actions and directives from the federal government and following consultations with clinical leadership, including our multidisciplinary LGBTQ+ program and its providers, Stanford Medicine paused providing gender-related surgical procedures as part of our comprehensive range of medical services for LGBTQ+ patients under the age of 19, effective June 2, 2025.⁶

² U.S. Department of Justice, Department of Justice Subpoenas Doctors and Clinics Involved in Performing Transgender Medical Procedures on Children, (Jul. 9, 2025) available at: <https://www.justice.gov/opa/pr/departments-justice-subpoenas-doctors-and-clinics-involved-performing-transgender-medical>.

³ See California Department of Justice, Attorney General Bonta Joins Multistate Opposition to U.S. DOJ's Attempt to Subpoena Gender-Affirming Care Records, (Oct. 22, 2025) available at: <https://oag.ca.gov/news/press-releases/attorney-general-bonta-joins-multistate-opposition-us-doj%E2%80%99s-attempt-subpoena>.

⁴ See Exec. Order No. 14201, 90 Fed. Reg. 9279 (Feb. 5, 2025), available at <http://www.federalregister.gov/documents/2025/02/11/2025-02513/keeping-men-out-of-womens-sports>; Exec. Order No. 14187, 90 Fed. Reg. 8771 (Jan. 28, 2025), available at <https://www.federalregister.gov/documents/2025/02/03/2025-02194/protecting-children-from-chemical-and-surgical-mutilation>.

⁵ Jennifer Levi, GLAD Law, *From the Front Lines: The Fight for Transgender Rights Is a Fight for Democracy*, (Feb. 10, 2025), available at <https://www.glad.org/the-fight-for-transgender-rights-is-a-fight-for-democracy/>.

⁶ See <https://www.ktvu.com/news/stanford-no-longer-providing-gender-affirming-surgeries-children>, June 26, 2025.

In 2022, the U.S. Supreme Court published its opinion in *Dobbs v. Jackson Women's Health* (2022) 597 U.S. 215.), overturning 50 years of precedent and revoking, for the first time, a constitutional right. Prior to *Dobbs*, the Supreme Court had continuously upheld the holding of *Roe v. Wade*, that found the implied constitutional right to privacy extended to a person's decision whether to terminate a pregnancy, while allowing some state regulation of abortion access as permissible. (*Roe v. Wade* (1973) 410 U.S. 113.) In the wake of *Dobbs*, numerous states now have laws prohibiting or severely limiting abortion and have enacted laws attempting to punish those who seek safe and reliable reproductive healthcare in states where it is still legal to seek abortion care. According to the Guttmacher Institute, 16 states have effectively banned abortion and another 10 have become very restrictive or restrictive.

In 1969, the California Supreme Court held that the state constitution's implied right to privacy extends to an individual's decision about whether or not to have an abortion. (*People v. Belous* (1969) 71 Cal.2d 954.) This was the first time an individual's right to abortion was upheld in a court. In 1972 the California voters passed a constitutional amendment that explicitly provided for the right to privacy in the state constitution. (Prop. 11, Nov. 7, 1972 gen. elec.)

The Reproductive Privacy Act includes findings and declarations that every individual possesses a fundamental right of privacy with respect to personal reproductive decisions, which entails the right to make and effectuate decisions about all matters relating to pregnancy; therefore, it is the public policy of the State of California that every individual has the fundamental right to choose or refuse birth control, and every individual has the fundamental right to choose to bear a child or to choose to obtain an abortion. (Health & Saf. Code, § 123462.)

In 2019, Governor Newsom issued a proclamation reaffirming California's commitment to making reproductive freedom a fundamental right in response to the numerous attacks on reproductive rights across the nation. In September 2021, more than 40 organizations came together to form the California Future Abortion Council (CA FAB) to identify barriers to accessing abortion services and to recommend policy proposals to support equitable and affordable access for not only Californians but all who seek care in the state.

In response to the *Dobbs* decision, California enacted a comprehensive package of legislation expanding, protecting, and strengthening access to reproductive health care, including abortions, for all Californians and people seeking such care in our state. One such law, SB 345 (Skinner, Ch. 260, Stats. 2023) provided safeguards for professional licenses of California healthcare providers from out-of-state statutes attempting to punish these professionals for providing care legal in the state.

Additionally, the voters overwhelmingly approved Proposition 1 (Nov. 8, 2022 gen. elec.), and enacted an express constitutional right in the state constitution that prohibits the state from interfering with an individual's reproductive freedom in their most intimate decisions.

- 3) **Full Faith and Credit Clause:** The Full Faith and Credit Clause of the United States Constitution states:

Full faith and credit shall be given in each state to the public acts, records, and judicial proceedings of every other state. And

the Congress may by general laws prescribe the manner in which such acts, records, and proceedings shall be proved, and the effect thereof. (U.S. Const. art. IV, sec. 1.)

Because this bill prohibits government actors from cooperating with another state for the purpose of enforcing another state's laws on what we characterize as "legally protected healthcare activity," it potentially implicates the Full Faith and Credit Clause.

Generally, the laws of the state regulate conduct that occurs within that state. However, situations may arise where more than one state's laws may apply such as collection of income taxes or child support obligations from another state. The purpose of the Full Faith and Credit Clause:

"[I]s to alter the status of the several states as independent foreign sovereignties, each free to ignore obligations created under the laws or by the judicial proceedings of the others, and to make them integral parts of a single nation throughout which a remedy upon a just obligation might be demanded as of right, irrespective of the state of its origin." (*Baker v. General Motors Co.* (1998) 522 U.S. 222, 232 citing *Milwaukee County v. M. E. White Co.* (1935) 296 U.S. 268, 277.)

The Full Faith and Credit Clause may be implicated when there is a conflict between the laws of the different states. At least one court has held that any effort by a state to apply its criminal laws beyond state borders to criminalize activity that is otherwise lawful in the other state. (*Bigelow v. Virginia* (1975) 421 U.S. 809.) *Bigelow* involved a Virginia newspaper editor who was convicted in Virginia for printing an advertisement for an abortion referral service in New York. The Supreme Court overturned the conviction stating:

"The Virginia Legislature could not have regulated the advertiser's activity in New York, and obviously could not have proscribed the activity in that State. Neither could Virginia prevent its residents from traveling to New York to obtain those services, or as the state conceded, prosecute them for going there. Virginia possessed no authority to regulate the services provided in New York . . ." (*Id.* at p. 822-824.)

However, other cases do not follow a strict prohibition on the application of one state's laws on another state. The Supreme Court has also held that even when criminal conduct takes place outside of the state, extraterritorial jurisdiction may be property when the conduct was intended to produce or did produce harmful effects within the state. (*Strassheim v. Daily* (1911) 221 U.S. 280.)

The Supreme Court has also made a distinction between the strength of the Full Faith and Credit Clause's applications to judgments versus state law.

"The Full Faith and Credit Clause does not compel "a state to substitute the statutes of other states for its own statutes dealing with a subject matter concerning which it is competent to

legislate. Regarding judgments, however, the full faith and credit obligation is exacting. A final judgment in one State, if rendered by a court with adjudicatory authority over the subject matter and persons governed by the judgment, qualifies for recognition throughout the land.” (*Baker v. General Motors Co.*, *supra*, 522 U.S. at 232-233.)

This concept is often referred to as the “public policy exception” meaning statutes in one state is given effect only if they do not contravene the public policy of the other state. If this bill were challenged based on the Full Faith and Credit Clause, California would argue that enforcing the anti-reproductive criminal statutes of other states is contrary to the public policy of the State which is supported by case law.

- 4) **Argument in Support:** According to *Office of Attorney General Rob Bonta*, “After the overturn of *Roe v. Wade*, California passed several shield laws to protect people who provide, receive, or help others obtain health care that is legal in California, including abortion and gender-affirming care. These laws prohibit California agencies and certain companies from helping other states enforce laws that punish this care.

“Since California’s shield laws took effect, anti-abortion states have increased efforts to investigate and prosecute California providers, and some states have tried to extradite or take adverse legal actions against California doctors. For example, Louisiana has sought to extradite a California abortion provider for allegedly sending abortion medication to a Louisiana resident.⁷

“AB 1854 would address these issues by 1) expanding shield law coverage to more California businesses and individuals who receive legal demands, 2) creating a notification process so the Attorney General can intervene and stop improper disclosures, 3) giving the Attorney General stronger authority to take legal action and enforce the law, and 4) clarifying that law enforcement cannot arrest someone if the Governor refuses an extradition request.

“These clarifications are essential to ensuring that California’s protections remain effective in practice and continue to provide certainty to patients, providers, and support networks. They also help safeguard sensitive personal information from being used in out-of-state proceedings that seek to penalize lawful care. As the legal landscape continues to shift nationwide, AB 1854 ensures California will remain a safe haven for those seeking and providing reproductive health care.”

- 5) **Argument in Opposition:** According to the *California Hospital Association*, “Hospitals are deeply committed to protecting patient privacy and safeguarding the confidentiality of personal health information. Every day, patients place their trust in hospitals — often during their most vulnerable moments — and hospitals take these responsibilities seriously. This is especially true for sensitive services such as reproductive and gender-affirming care, where privacy is essential to patient safety, dignity, and access to treatment.

⁷ <https://apnews.com/article/louisiana-california-abortion-pill-extradite-doctor-f99a0f638daa6996bf2affd9194b2809>
[last visited April 7, 2026.]

“Despite hospitals’ deep commitment to protecting sensitive patient information, Assembly Bill (AB) 1854 (Krell, D- Sacramento) would significantly alter how hospitals must respond to requests for information related to health care activities. AB 1854 would prohibit a hospital or other entity from responding to a “civil, criminal, or regulatory inquiry, investigation, subpoena, or summons for information regarding legally protected health care activity” unless the requesting party provides a specified affidavit, the hospital notifies the California attorney general and the affected patients, and the hospital waits 30 days before responding.

“While the California Hospital Association (CHA), on behalf of nearly 400 hospitals and health systems, understands the intent of AB 1854, the bill as drafted is overly broad and presents significant operational challenges, as described below.

- Overly broad definition of covered services: The bill applies to “legally protected health care activity,” defined in Penal Code Section 1549.15 to include reproductive and gender-affirming services. In practice, this encompasses a wide range of routine care, such as prenatal visits, childbirth, hysterectomies, vasectomies, and commonly prescribed medications (many unrelated to gender dysphoria). It also includes psychotherapy, even though hospitals do not have visibility into the specific topics discussed between a therapist and patient. *Example: A hospital that does not provide abortion or gender-affirming care could still be required to obtain an affidavit, notify the attorney general and patient, and wait 30 days before responding to a basic request — such as a family member asking which room a maternity patient is in.*
- Applies to undefined and overly broad “inquiries”: The bill extends beyond formal subpoenas or investigations to any “civil, criminal, or regulatory inquiry,” a term that is not defined and could include routine emails, letters, or phone calls from state agencies and departments, health plans, and others as part of standard, necessary communication. *Example: A simple request from a health plan, physician’s office, or family member could trigger complex legal requirements, creating uncertainty and disrupting standard hospital communication workflows.*
- Conflict with federal law and timelines: The bill appears to require a 30-day delay before responding to requests, including federal subpoenas, which may require faster compliance. Under the Supremacy Clause of the U.S. Constitution, state law cannot impose conditions that make it impossible to timely comply with federal court orders or subpoenas — which are exercises of federal judicial authority.
- Interference with mandatory inspections and oversight: Hospitals that participate in Medicare or Medicaid (Medi-Cal in California) must provide immediate access to records for federal and state inspectors who are assessing quality of care. These reviews routinely involve services covered by AB 1854, including childbirth and other reproductive or gender-related care. *Example: Surveyors reviewing obstetric or surgical care must be granted prompt access to records; a 30-day delay or additional procedural requirements would conflict with these obligations and risk noncompliance.”*

6) Related Legislation:

- a) AB 1930 (Zbur) limits when a person or entity may provide information regarding another's legally protected health care activities in response to various types of inquiries. AB 1930 is pending hearing in this committee.
- b) AB 2164 (Bauer-Kahan) applies California Shield Laws related to protected healthcare activity to any person who has previously undertaken one or more protected healthcare activities, as specified, in another state to aid or encourage any other person in the exercise and enjoyment of their rights to reproductive health care services or gender affirming health care services that would have been protected by this state if they had been undertaken in this state, if the activity was permissible under the laws of the state where the person providing aid was located. AB 2164 is pending hearing today in this committee.

7) Prior Legislation:

- a) SB 497 (Weiner), Chapter 764, Statutes of 2025 enacted various safeguards against the enforcement of other states' laws that purport to penalize individuals from obtaining gender-affirming care that is legal in California.
- b) AB 82 (Ward), Chapter 679, Statutes of 2025, expanded safe haven protections against adverse action for aiding and assisting the access of legally protected health care activities in California, prohibits the reporting of testosterone and mifepristone to California's Prescription Drug Monitoring Program (PDMP), and required bail to be set at zero dollars for an individual who has been arrested in connection with a proceeding in another state regarding the individual performing, supporting, or aiding in the performance of "a legally protected health care activity."
- c) SB 107 (Wiener), Chapter 810, Statutes of 2022, enacted various safeguards against the enforcement of other states' laws that purport to penalize individuals from obtaining gender-affirming care that is legal in California.
- d) AB 2091 (Bonta), Chapter 628, statutes of 2022, prohibited providers, health care service plans, contractors, employers from releasing medical information related to abortion services or information related to a person allowing a minor to receive gender-affirming health care and gender-affirming mental health care in response to a subpoena/investigation-related request seeking to impose liability under another state's law for an abortion lawful in CA or for allowing minor to receive gender-affirming health care and gender-affirming mental health care, among other provisions.
- e) AB 1666 (Bauer-Kahan), Chapter 42, Statutes of 2022, prohibited California courts from applying another state's laws authorizing civil action for receiving, seeking, providing, and/or aiding abortion in deciding the cases before them or from enforcing civil judgments under those laws, and designating those laws as contrary to California public policy, among other provisions.

REGISTERED SUPPORT / OPPOSITION:

Support

19) Attorney General Rob Bonta (Sponsor)
Access Reproductive Justice
California Chapter of the American College of Emergency Physicians
Equality California
Reproductive Freedom for All California

Oppose

California Chamber of Commerce
California Hospital Association

Analysis Prepared by: Kimberly Horiuchi / PUB. S. / (916) 319-3744