
SENATE COMMITTEE ON HEALTH

Senator Akilah Weber Pierson, Chair

BILL NO: AB 2598
AUTHOR: Krell
VERSION: June 16, 2026
HEARING DATE: June 24, 2026
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SUBJECT: Health care facilities: notification of next of kin

SUMMARY: Requires a hospital or a skilled nursing facility, if a person dies while in the facility, to make a reasonable attempt to notify any known next of kin, or if next of kin cannot be located, to notify the public administrator of the county within two business days. Makes a violation of this requirement punishable by a civil penalty of \$200 per day, up to \$50,000, measured until the actual knowledge by the next of kin or the county public administrator of the decedent's death.

Existing law:

- 1) Licenses and regulates health care facilities, including general acute care hospitals and skilled nursing facilities (SNF), under the California Department of Public Health (CDPH). [HSC §1250]
- 2) Requires the person in charge of a hospital, convalescent hospital, or board and care facility, if a person dies in the facility without known next of kin, to give immediate notice of that fact to the public administrator of the county in which the hospital or facility is located. Makes a hospital or facility, if this notice is not given, liable for any cost of interment incurred by the estate or the county as a result of the failure, and any loss to the estate or beneficiaries caused by loss, injury, waste, or misappropriation of property of the decedent. [PROB §7600.5]

This bill:

- 1) Requires the person in charge of a general acute care hospital or SNF, if a person dies while in the facility, to make a reasonable attempt to notify any known next of kin that the person died in the facility.
- 2) Requires the person in charge of a hospital, if the body of a person is transferred to a hospital after death, to make a reasonable attempt to notify any known next of kin that the person's body is being held by the hospital.
- 3) Permits these requirements to be met by the hospital or SNF in either of the following ways:
 - a) The facility notifies the designated resident representative of the person who died in the facility or has their body transferred to a hospital after death; or,
 - b) The hospital or facility is informed by the person, prior to death and in writing, that they do not want their known next of kin to be notified of their presence or death.
- 4) Requires the person in charge of the facility, if they cannot locate any next of kin after a reasonable effort, to give notice within two business days of the fact that the person died in the facility or is being held by the hospital, to the public administrator of the county in which the facility is located.

- 5) Makes a hospital or SNF liable for both of the following if the notice to the next of kin or county public administrator is not given:
 - a) Any cost of interment incurred by the estate or the county as a result of the failure;
 - b) Any loss to the estate or beneficiaries caused by loss, injury, waste, or misappropriation of property of the decedent as a result of the failure.

- 6) Requires the hospital or facility, if it is required to notify the county public administrator, to provide the county public administrator with any identifying information they have available that may assist the county public administrator in identifying the decedent and their known next of kin, including the decedent’s full legal name, social security number, driver’s license, or other identification, residents at the time of death or last known address, and any available contact information for known next of kin.

- 7) Makes a general acute care hospital or an SNF that violates the above provisions of law by failing to make a reasonable attempt to notify any known next of kin, or to fail to notify the county public administrator, to be liable for a civil penalty in the amount of \$200 for each day of the violation, up to \$50,000, measured from the time it would take to make a reasonable attempt to notify next of kin until the actual knowledge by the next of kin or the county public administrator of the decedent’s death.

- 8) Permits CDPH, after notice and an opportunity to be heard, in accordance with specified provisions of existing law, to assess the penalties, and specifies that these penalties do not preclude the application of any other existing civil remedies provided by law.

- 9) Defines various terms for purposes of this bill, including “reasonable attempt” as a documented, good-faith effort by the hospital or facility to contact any known next of kin within 72 hours of a person’s death using any contact information available to the facility, including leaving a voicemail message and sending a text message or an email to the next of kin.

- 10) Makes technical changes to ensure that the new penalties established by this bill only apply to general acute care hospitals and SNFs, and that existing law as described in Existing Law 2) above continues to apply unchanged to hospitals that are not general acute care hospitals, convalescent hospitals that are not SNFs, and board and care facilities.

FISCAL EFFECT: According to the Assembly Appropriations Committee, one-time costs to CDPH of an unknown amount, potentially in the low- to mid-hundreds of thousands of dollars, if CDPH needs to promulgate regulations (Licensing and Certification Fund).

PRIOR VOTES:

Assembly Floor:	78 - 0
Assembly Appropriations Committee:	14 - 0
Assembly Judiciary Committee	12 - 0
Assembly Health Committee:	16 - 0

COMMENTS:

- 1) *Author’s statement.* According to the author, no family should have to wait months or years to discover that a loved one has passed away while at a hospital. With clear notification requirements and an enforcement mechanism, this bill ensures that

compassion, dignity, and communication remain at the heart of California's healthcare system.

- 2) *Background from author.* This bill is responding to a series of reports by local television station KCRA into cases where Mercy San Juan Medical Center in Sacramento had failed to notify family members and next of kin of multiple deceased individuals. In these cases, there were no public records of the patients' deaths, and family members reported that they received no communication about their deceased family member. In at least four of these cases, the deceased's family contacted local law enforcement, where they ultimately discovered that their family member had passed away months prior. According to KCRA's reporting, the hospital held these individuals remains in an off-site cold storage facility. KCRA also reported that while the problem was most significant at Mercy San Juan Medical Center, the problem spanned across other Dignity Health facilities, including Mercy General Hospital and even one SNF. There were at least 179 patients at the off-site morgues with a delayed death certificate of at least one month. In the most extreme example, a deceased individual had their death certificate and family notification delayed by 3.5 years. According to the author, there are currently multiple lawsuits pending against Dignity Health from family members of the deceased.

CDPH investigated the incident at Mercy San Juan Medical Center and found that the hospital consistently failed to notify patients' families of their death, and issued a statement of deficiency, which requires a plan of correction. The initial state of deficiency for Mercy San Juan, issued in 2022, showed multiple failures to notify next of kin. Although Mercy San Juan subsequently completed a plan of correction, the hospital was issued two more statements of deficiencies in the following years, demonstrating repeated compliance failure. The author argues that this repetitive issue revealed gaps and insufficiencies in California law, and that CDPH needs clear authority to impose a penalty on facilities that have significant delays in notifying next of kin.

- 3) *Role of Public Administrators.* Public Administrators, along with Public Guardians and Public Conservators, are a type of county official who act under the authority granted by the California Superior Court. The Public Administrator handles the disposition of deceased estates of persons who die with no will or without an appropriate person willing or able to act as administrator. The Public Administrator's primary duties are to protect the decedent's property from waste, loss or theft; make appropriate burial arrangements; conduct thorough investigations to discover all assets; liquidate assets at public sale or distribute assets to heirs; pay the decedent's bills and taxes; and, locate persons entitled to inherit from the estate and ensure that these individuals receive their inheritance.

Under current law, if someone dies without known next of kin at a hospital, convalescent hospital (generally speaking, an outdated term for an SNF), or a board and care facility (typically an adult residential facility), the person in charge of these facilities is required to give immediate notice to the public administrator of the county in which the facility is located. The failure to give this notice makes the facility liable for the cost of interment and loss to the estate or beneficiaries as a result of the failure to notify. However, this requirement is in the Probate Code, and so CDPH does not have direct enforcement authority over this provision of law. Therefore, one of the provisions of this bill adds a provision to the Health and Safety Code giving CDPH the ability to assess penalties for failure to follow the Probate Code requirements when it comes to general acute care hospitals and SNFs.

- 4) *Double referral.* This bill is double referred. Should it pass out of this Committee, it will be referred to the Senate Judiciary Committee.
- 5) *Support.* California Advocates for Nursing Home Reform (CANHR) state in support that the recent KCRA news story reinforced sporadic accounts CANHR staff have heard over the years of health facilities failing to notify next of kin when a patient has died. This bill provides sensible and righteous requirements to ensure patient deaths are properly reported to the people who need and deserve to know about them.

SUPPORT AND OPPOSITION:

Support: California Advocates for Nursing Home Reform

Oppose: None received

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