

Date of Hearing: August 20, 2025

ASSEMBLY COMMITTEE ON APPROPRIATIONS

Buffy Wicks, Chair

SB 504 (Laird) – As Amended June 26, 2025

Policy Committee:	Health	Vote:	15 - 0
	Privacy and Consumer Protection		15 - 0

Urgency: No State Mandated Local Program: No Reimbursable: No

SUMMARY:

This bill authorizes a health care provider to disclose confidential and identifying information to public health officials (1) to complete or supplement an HIV case report, or (2) if the disclosure is needed for disease investigation, control, or surveillance, or to provide care for a person.

Specifically, this bill:

- 1) Authorizes, notwithstanding existing penalties and prohibitions on disclosure of HIV test results, a health care provider of a patient diagnosed with an HIV infection that has already been reported to disclose personally identifying confidential information to a local health officer (LHO) or the California Department of Public Health (CDPH) provide additional information required by law or public health guidelines to complete or supplement a confidential HIV case report.
- 2) Allows a health care provider to disclose personally identifying confidential information about a patient to a local health jurisdiction (LHJ) or CDPH if the disclosure is necessary for the LHJ or CDPH to carry out its duties in the investigation, control, or surveillance of disease, or the coordination of, linkage to, or reengagement in care for a person, as determined by the health care provider, LHJ or CDPH.
- 3) Makes other technical and conforming changes.

FISCAL EFFECT:

No state costs.

COMMENTS:

- 1) **Purpose.** According to the author:

Senate Bill 504 allows health care providers to share personally identifying information about previously reported HIV infections with local health departments and California Department of Public Health, but only when necessary for specified public health purposes.

While existing law permits local and state public health officials to share confidential data regarding HIV infections for disease surveillance and surveillance or care coordination, this authorization does not extend to

health care providers. This limitation can create barriers to connecting patients with treatment and ensuring continuity of care. Senate Bill 504 enhances coordination between health care providers and public health officials while maintaining strict confidentiality protections.

- 2) **Background.** Federal and state medical privacy and confidentiality laws, including HIV-specific laws, provide protection against undesired disclosure of a person's HIV status. Existing law authorizes CDPH and LHOs to disclose personally identifying information regarding patients diagnosed with HIV to other local, state, or federal public health agencies or to medical researchers when necessary for disease investigation, control, or surveillance or coordination of, linkage to, or reengagement in care for a person. However, this authorization does not explicitly extend to health care providers, which the author contends leads to several challenges with regards to HIV care coordination and disease control, including:
 - a) Incomplete public health records: If a laboratory provides the initial HIV case report, health care providers are not authorized to provide public health officials with other information such as comorbidities to supplement the initial case report
 - b) Health care providers are limited in their ability to place referrals for patients to state-provided clinical or preventative services, especially HIV care.
 - c) If a patient moves to another jurisdiction, or a health care provider closes or suspends their practice, the provider may not initiate disclosure of personally identifying information to health officials to ensure continuous care.
- 3) **Related Legislation.** SB 278 (Cabaldon) authorizes the disclosure of a Medi-Cal managed care (MCMC) beneficiary's HIV test result that includes identifying information to their MCMC plan, without the beneficiary's authorization, for the purpose of administering quality improvement programs.

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