Office of Senate Floor Analyses
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UNFINISHED BUSINESS

Bill No: SB 81
Author: Arreguín (D), et al.
Amended: 9/20/25
Vote: 27- Urgency

SENATE HEALTH COMMITTEE: 9-1, 4/23/25
AYES: Menjivar, Durazo, Gonzalez, Limón, Padilla, Richardson, Rubio, Weber Pierson, Wiener
NOES: Grove
NO VOTE RECORDED: Valladares

SENATE JUDICIARY COMMITTEE: 11-0, 4/29/25
AYES: Umberg, Allen, Arreguín, Ashby, Caballero, Durazo, Laird, Stern, Wahab, Weber Pierson, Wiener
NO VOTE RECORDED: Niello, Valladares

SENATE APPROPRIATIONS COMMITTEE: 5-1, 5/23/25
AYES: Caballero, Cabaldon, Grayson, Richardson, Wahab
NOES: Seyarto
NO VOTE RECORDED: Dahle

SENATE FLOOR: 28-7, 6/2/25
AYES: Allen, Archuleta, Arreguín, Ashby, Becker, Blakespear, Cabaldon, Caballero, Cervantes, Cortese, Durazo, Gonzalez, Grayson, Laird, Limón, McGuire, McNerney, Menjivar, Padilla, Pérez, Richardson, Rubio, Smallwood-Cuevas, Stern, Umberg, Wahab, Weber Pierson, Wiener
NOES: Choi, Dahle, Grove, Jones, Ochoa Bogh, Seyarto, Strickland
NO VOTE RECORDED: Alvarado-Gil, Hurtado, Niello, Reyes, Valladares

ASSEMBLY FLOOR: 58-11, 9/2/25 - See last page for vote

SUBJECT: Health and care facilities: information sharing

SOURCE: California Immigrant Policy Center
Service Employees International Union California

California Nurses Association
Latino Coalition for Healthy California

DIGEST: This bill prohibits a health care provider entity and its personnel, unless required by state and federal law, from granting access to the nonpublic areas of the facility for immigration enforcement without a valid judicial warrant or court order.

Assembly Amendments of 9/2/25 revise the conditions, under the Confidentiality of Medical Information Act, under which medical information can be compelled by a court order to be disclosed to specify that it must be a court order issued by a court of this state or a federal court, clarified that nothing in this bill prohibits individuals who are in lawful custody from being accompanied to access health care services or to prohibit any person from entering nonpublic areas of a hospital to receive care for themselves or someone in their care or custody, and made other changes.

ANALYSIS:

Existing law:

1) Establishes the Confidentiality of Medical Information Act (CMIA), which prohibits a health care provider, health care service plan, or contractor from disclosing medical information regarding a patient without first obtaining authorization. [Civil Code (CIV) §56, et. seq.]

2) Defines "medical information," for purposes of the CMIA, as any individually identifiable information, in electronic or physical form, in possession of or derived from a provider of health care, health care service plan, pharmaceutical company, or contractor regarding a patient's medical history, mental or physical condition, or treatment. [CIV §56.05(j)]

3) Defines "provider of health care," for purposes of the CMIA, as a person licensed as a health care professional, as specified, or a clinic, health dispensary, or health facility licensed by the California Department of Public Health (CDPH), as specified. [CIV §56.05(p)]

4) Requires a health care provider, health plan, or contractor to disclose medical information, if the disclosure is compelled by certain official actions, including a court order, a board or administrative agency for purposes of adjudication pursuant to its lawful authority, or a search warrant lawfully issued to a governmental law enforcement agency. [CIV §56.10(b)]

5) Establishes the California Values Act (CVA), which prohibits California law enforcement agencies from using agency or department moneys or personnel to investigate, interrogate, detain, detect, or arrest persons for immigration enforcement purposes, among other provisions. [Government Code (GOV) §7284, et seq.]

6) Requires the Attorney General, as part of the CVA, to publish model policies limiting assistance with immigration enforcement to the fullest extent possible consistent with federal and state law at public schools, public libraries, health facilities operated by the state or a political subdivision of the state, and other state facilities, as specified, and requires all public schools, health facilities operated by the state or a political subdivision of the state, and courthouses to implement the model policy, or an equivalent policy. [GOV §7284.8]

7) Permits a law enforcement official to have discretion to cooperate with immigration authorities only if doing so would not violate any federal, state, or local law, or local policy, and where permitted by the CVA. [GOV §7282.5]

This bill:

1) Prohibits a health care provider entity and its personnel, unless required by state and federal law, from allowing any person access to the nonpublic areas of the facility for immigration enforcement purposes, unless that person has a valid judicial warrant or court order specifically grants access to the nonpublic areas of the facility.

2) Defines "health care provider entity," for purposes of this bill, as including the following:

   a) Public hospitals, defined as a hospital that is licensed to a county, a city, the State of California, the University of California, a local health care district, a local health authority, or any other political subdivision of the state.
   b) Nonpublic hospital, defined as a hospital that does not meet the definition of a public hospital, and is licensed as a general acute care hospitals.
   c) Clinics, as defined, including clinics exempt from licensure, as specified;
   d) A physician organization, as defined;
   e) Providers, as defined in the California Health Care Quality and Affordability Act, which includes physician organizations and various health care settings;
   f) Integrated health care delivery systems; and,

   g) Other providers that deliver or furnish services related to physical or mental health and wellness, education, or access to justice.

3) Requires a health care provider entity and its personnel, to the extent possible, to have the denial of permission for access to nonpublic areas of the facility witnessed and documented by at least one health care provider entity personnel.

4) Requires health care provider entities to inform staff and relevant volunteers on how to respond to requests relating to immigration enforcement that grants access to its sites or to patients.

5) Requires a health care provider entity, to the extent possible, to establish or amend procedures for monitoring, documenting, and receiving visitors to be consistent with the provisions of this bill. Encourages health care provider entities to post a "notice to authorities" at facility entrances.

6) Requires health care provider entity personnel to immediately notify their management, administration, or legal counsel of any request for access to a health care provider entity site or patient for immigration enforcement, and to immediately provide any requests for review of their documents, including through a lawfully issued subpoena, warrant, or court order to health care provider entity management, administration, or legal counsel.

7) Requires health care provider entity personnel, if a request is made to access its site or patient, including to obtain information about a patient or their family for immigration enforcement, to direct such request to the designated management, administrator, or legal counsel.

8) Requires a health care provider entity, in order to enhance privacy and promote a safe environment, to designate areas where patients are receiving treatment or care, where a patient is discussing protected health information as nonpublic, and to designate these areas through mapping, signage, key entry, policy, or a combination.

9) Makes this bill applicable to all health care provider entities that receive public funding, and encourages healthcare facilities that are not covered by this requirement to adopt the provisions of this bill.

10) Requires health care provider entities to have 45 days from the effective date of this bill to comply with its requirements.

11) Defines "immigration enforcement," for purposes of the CMIA, as any and all efforts to investigate, enforce, or assist in the investigation or enforcement of any federal civil immigration law, and also includes any and all efforts to investigate, enforce, or assist in the investigation or enforcement of any federal

criminal immigration law that penalizes a person's presence in, entry or reentry to, or employment in, the United States. Specifies that nothing in this bill prohibits individuals who are in lawful custody from being accompanied to access health care services and for their transportation and arrangement to health care provider entities, or to prohibit any person from entering nonpublic areas of a hospital to receive care for themselves or someone in their care or custody.

12) Revises the definition of "medical information," for purposes of the CMIA, to include individually identifiable information regarding immigration status, including current and prior immigration status, and place of birth, if that information is known or collected by a provider of healthcare regarding a patient's medical history.

13) Prohibits, under the CMIA, a provider of health care, health care service plan, contractor, or corporation from disclosing medical information for immigration enforcement, except to the extent expressly authorized by a patient, or if the disclosure is compelled, including by a court order or a search warrant.

14) Specifies that disclosure of medical information compelled by a court order, for purposes of the CMIA, must be issued by a court of this state or a federal court, and can include a court order issued by a court of this state pursuant to a specified provision of law relating to a foreign subpoena.

15) Specifies, for purposes disclosure of information under the CMIA, that a search warrant must be valid and issued by a judicial officer, including a search warrant from another state that is based on either of the following and execution of the search warrant would not constitute a violation of a provision of law prohibiting the participation in the arrest of any person performing or aiding in the performance of an abortion, or obtaining an abortion:

   a) Another state's law, as long as that law does not interfere with California law, as specified; or,
   b) A foreign penal civil action, as defined.

16) Contains a severability clause, so that if any provision of this bill is held invalid, the invalidity does not affect other provisions that can be given effect without the invalid provision.

17) Contains an urgency clause that will make this bill effective upon enactment.

Comments

According to the author of this bill:

> Every Californian should be able to see a doctor or go to a hospital in the case of an emergency without fear of being arrested for their immigration status. Recently, the federal government rescinded previous policy guidance which restricted immigration officials from visiting so-called "sensitive areas" - such as hospitals, schools and churches - for the purposes of federal immigration enforcement. As a result, hospitals, clinics, and reproductive health clinics throughout California could be the target of immigration enforcement, and some immigration enforcement has already occurred. This already has had a chilling effect on undocumented Californians seeking medical care. The impact of people forgoing medical treatment is significant not only on the individual but on the broader health of our state. This bill would enshrine into law critical protections to ensure that health facilities are safe and accessible. This bill would codify existing policy guidance from the Attorney General prohibiting the sharing of information about the citizenship status of patients, and also restricting access to federal immigration officials to the non-public areas of health facilities and prohibiting their ability to question or detain a patient while they are actively receiving care from a medical professional.

Background

Immigrants in California. According to a January 2025 Fact Sheet on Immigrants in California published by the Public Policy Institute of California (PPIC), California is home to 10.6 million immigrants, comprising 22% of the foreign-born population nationwide. In 2023, the most current year of data, 27% of California's population was foreign born, the highest share of any state and more than double the share in the rest of the country. Almost half of California children have at least one immigrant parent. The vast majority of immigrants in California are documented residents. PPIC cited estimates from the Pew Research Center that 1.8 million immigrants in California were undocumented in 2022, which is down from 2.8 million in 2007. In 2022, 83% of immigrants were either citizens or had some other legal residency status.

Repeal of Biden-era memorandum and new guidance from Immigrations and Customs Enforcement. In October of 2021, the United States Department of Homeland Security (US DHS) issued a memorandum to Immigrations and Customs Enforcement (ICE) and United States Customs and Border Protection (CBP) providing guidance on ICE and CBP enforcement actions in or near areas that "require special protection." This memo directed that to the fullest extent

possible, enforcement action should not be taken "in or near a location that would restrain people's access to essential services or engagement in essential activities." These protected areas included, but were not limited to, schools, health care facilities, places of worship, places where children gather, social services establishments such as shelters, or a place where disaster or emergency response and relief is provided. On January 20, 2025, the new Acting Secretary of US DHS issued a memorandum rescinding the previous memorandum, stating that it is not necessary to "create bright line rules regarding where our immigration laws are permitted to be enforced." Instead, law enforcement officers should use discretion and common sense, and suggested that the Director of ICE and the Commissioner of the CBP issue further guidance to assist officers in exercising enforcement discretion.

Related to the above memos on protected areas, in April 2021, the Biden-era US DHS had also issued a memorandum on civil immigration enforcement actions in or near courthouses, outlining when it was appropriate to take enforcement action in or near a courthouse. This memorandum generally limited these actions to national security threats, imminent risk of death or physical harm to any person, or when it involved a hot pursuit of an individual who poses a threat to public safety. The new Trump-appointed Acting Director of US DHS also rescinded this memorandum, and issued new interim guidance permitting civil immigration enforcement actions in or near courthouses when they have credible information that leads them to believe an undocumented person is or will be present at a specific location, and where such action is not precluded by laws imposed by the jurisdiction in which the civil immigration enforcement action will take place. The guidance stated that civil immigration enforcement actions in or near courthouses should, to the extent practicable, continue to take place in non-public areas of the courthouse, be conducted in collaboration with court security staff, and use the court building's non-public entrances and exits.

The CVA and guidance from California Department of Justice. The CVA was enacted in 2017 following the first Trump Administration's executive orders outlining a deportation strategy that planned to rely on local law enforcement as "force multipliers' of immigration agents. The CVA prohibited California law enforcement agencies from using their resources to investigate, interrogate, detain, detect, or arrest persons for immigration purposes, including inquiring into an individual's immigration status, or detaining an individual on the basis of a hold request issued by an immigration authority, with certain exceptions. Additionally, the CVA directed the Attorney General to prepare and publish model policies limiting assistance with immigration enforcement to the fullest extent possible consistent with federal and state law at public schools, libraries, health facilities

operated by the state or a political subdivision of the state, and "all other organizations and entities that provide services related to physical or mental health and wellness," among other locations.

In compliance with the CVA, then-Attorney General Xavier Becerra issued a guide to California's health care facilities in 2018, and Attorney General Bonta published a new edition in December of 2024, entitled "Promoting Safe and Secure Healthcare Access for All: Guidance and Model Policies to Assist California's Healthcare Facilities in Responding to Immigration Issues." This guide issued policy recommendations in the following topics: gathering and handling patient and family health information; sharing patient and family health information; and, responding to requests for physical access to facilities for immigration enforcement purposes. On gathering information, the policy recommendations including limiting collection of information about immigration status and national origin to only that which facilities are required by law to collect, such as when required for health insurance coverage, and to avoid including that information in the patient's medical and billing records. On sharing information, the guide notes that health care facilities and their providers are required to protect patient information, and in most circumstances must obtain consent from the patient before any information is disclosed. Still, the guide recommends that health care facilities have policies and procedures in place regarding disclosure of protected health information in response to court orders, warrants, subpoenas, summonses, and administrative requests, and the procedures should provide sufficient details to help employees determine how to respond. The guide includes model policies for these procedures. With regard to responding requests for physical access to health facilities, the guide recommended establishing procedures for monitoring and receiving visitors and designating restricted-access areas. The guide recommends considering which areas of their facilities can benefit from restricted access and clearly designate those areas through mapping, signage, key-entry or a combination, and that policies applying to visitors should apply to immigration enforcement officers. There are a number of other recommendations regarding how to respond to an immigration officer's physical presence at a facility, parental notification of immigration enforcement actions, and training programs for facility staff.

FISCAL EFFECT: Appropriation: No Fiscal Com.: Yes Local: Yes

According to the Assembly Appropriations Committee, costs of approximately $150,000 annually for CDPH staff to review health facility immigration policies and procedures. CDPH estimates these costs at $111,000 starting in fiscal year (FY) 2026-27 to cover a 0.5 full-time equivalent high-travel position to review

health facilities' immigration policies and procedures (CDPH Licensing and Certification Program Fund).

The Department of Justice anticipates no significant fiscal impact.

SUPPORT: (Verified 9/2/25)

California Immigrant Policy Center (co-source)
Service Employees International Union California (co-source)
California Nurses Association (co-source)
Latino Coalition for Healthy California (co-source)
Alameda County Board of Supervisors
Aliados Health
Alliance San Diego
American Civil Liberties Union California Action
American Federation of State, County, and Municipal Employees
Asian Americans Advancing Justice Southern California
Asian Resources
Black Alliance for Just Immigration
Buen Vecino
California Alliance for Retired Americans
California Chapter of the American College of Emergency Physicians
California Dental Association
California Faculty Association
California Hospital Association
California Latino Legislative Caucus
California Pan-Ethnic Health Network
California Primary Care Association Advocates
Ceres Community Project
City of San Jose
Coalition for Humane Immigrant Rights
Communities United for Restorative Youth Justice
Community Clinic Association of Los Angeles County
Courage California
DeafHope
Disability Rights California
Employee Rights Center
Ensuring Opportunity Campaign
Esperanza Community Housing Corporation
Farm2People
First 5 Contra Costa

Friends Committee on Legislation
Gender Justice LA
Greenfield Walking Group
Healthy Contra Costa
Healthy House Within a Match Coalition
Hijas Del Campo
Hispanas Organized for Political Equality
Indivisible CA: StateStrong
Initiate Justice Action
Inland Coalition for Immigrant Justice
Insurance Commissioner Ricardo Lara
Jewish Community Relations Council Bay Area
La Clinica de La Raza
Latino Legislative Caucus
Los Amigos de La Comunidad
Marin Interfaith Council
Multicultural Institute
National Union of Healthcare Workers
New Light Wellness
North East Medical Services
North East Valley Health Corporation
Oakland Privacy
Oasis Legal Services
Planned Parenthood Affiliates of California
Pre-Health Dreamers
Public Health Institute
RotaCare San Rafael
Santa Barbara Women's Political Committee
Secure Justice
Small Business Majority
Social Justice Collaborative
South Asian Network
Southeast Asia Resource Action Center
Thai Community Development Center
The Children's Partnership
The Latina Center
The Los Angeles Trust for Children's Health
UCLA Latino Policy and Politics Institute
United Domestic Workers/AFSCME Local 3930
United Food and Commercial Workers Western States Council

United Latino Voices of Contra Costa County
Venice Family Clinic
Western Center on Law & Poverty
67 Suenos
Two individuals

OPPOSITION: (Verified 9/2/25)

None received

ARGUMENTS IN SUPPORT: This bill is co-sponsored by the California Immigrant Policy Center, the California Nurses Association, the Latino Coalition for a Healthy California, and the Service Employees International Union California. The co-sponsors state that the federal administration's egregious attacks on immigrant children, workers, and families have stoked fear across California, deterring people from accessing the health care and essential services they need due to the possibility of arrest, surveillance, and family separation by immigration agents. The co-sponsors state that under the CVA, model policies developed by the Attorney General were issued for public schools, colleges, health care facilities, and other locations, and included components such as requiring a warrant from ICE agents before they enter or attempt to interrogate or arrest anyone. These model policies protect the rights of immigrants and their families to safely access public institutions and services without fear of arrest and family separation by immigration agents. The co-sponsors state that this bill seeks to extend existing state policies around disentanglement with ICE to all health care facilities, and would specifically prohibit a health care provider from disclosing people's immigration status and place of birth to immigration enforcement agencies and prohibit allowing access to private spaces of health care facilities unless they present a valid warrant signed by a judge. Numerous organizations write in support making similar arguments. The California Hospital Association states in support that this legislation would help reassure patients and their families that hospitals are safe and welcoming spaces for all who need care, regardless of immigration status.

ASSEMBLY FLOOR: 58-11, 9/2/25
Ayes: Addis, Aguiar-Curry, Ahrens, Alvarez, Arambula, Ávila Farías, Bains, Bauer-Kahan, Bennett, Boerner, Bonta, Bryan, Calderon, Caloza, Carrillo, Connolly, Fong, Gabriel, Garcia, Gipson, Mark González, Haney, Harabedian, Hart, Irwin, Jackson, Kalra, Krell, Lee, Lowenthal, McKinnor, Muratsuchi, Nguyen, Ortega, Pacheco, Papan, Patel, Pellerin, Petrie-Norris, Quirk-Silva, Ramos, Ransom, Celeste Rodriguez, Michelle Rodriguez, Rogers, Blanca

Rubio, Schiavo, Schultz, Sharp-Collins, Solache, Soria, Stefani, Valencia, Ward, Wicks, Wilson, Zbur, Rivas

Noes: Chen, DeMaio, Dixon, Ellis, Gallagher, Hadwick, Lackey, Macedo, Sanchez, Ta, Tangipa

No Vote Recorded: Alanis, Berman, Castillo, Davies, Elhawary, Flora, Jeff Gonzalez, Hoover, Patterson, Wallis

Prepared by: Vincent D. Marchand / HEALTH / (916) 651-4111
7/21/26 14:41:32

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