AMENDED IN ASSEMBLY MAY 1, 2025

CALIFORNIA LEGISLATURE—2025–26 REGULAR SESSION

ASSEMBLY BILL

No. 302

Introduced by Assembly Member Bauer-Kahan

January 23, 2025

An act to amend Section 56.10 of the Civil Code, relating to medical information.

LEGISLATIVE COUNSEL'S DIGEST

AB 302, as amended, Bauer-Kahan. Confidentiality of Medical Information Act.

Existing law, the Confidentiality of Medical Information Act, prohibits a provider of health care, a health care service plan, or a contractor from disclosing medical information, as defined, regarding a patient of the provider of health care or an enrollee or subscriber of the health care service plan without first obtaining an authorization, except as prescribed. The act punishes a violation of its provisions that results in economic loss or personal injury to a patient as a misdemeanor.

Existing law requires a provider of health care, a health care service plan, or a contractor to disclose medical information when specifically required by law or if the disclosure is compelled by, among other things, a court order or a search warrant lawfully issued to a governmental law enforcement agency.

This bill would instead require a provider of health care, a health care service plan, or a contractor to disclose medical information when specifically required by California law. The

This bill would revise the disclosure requirement relating to a court order to *instead* require disclosure if compelled by a *court order issued* by a California state-court pursuant to an order of that court or a court

order from another state based on another state's law so long as that law does not interfere with California law, as specified. *court, including California state court orders relating to foreign subpoenas, as defined.* The bill would revise the disclosure requirement relating to a search warrant to require disclosure if compelled by a warrant from another state based on another state's law so long as that law does not interfere with California law. law, and execution of the search warrant would not violate specified prohibitions against enforcement actions regarding lawful abortions. By narrowing the exceptions for disclosing medical information, and thereby expanding the crime of violating the act, this bill would impose a state-mandated local program.

Existing law, the Interstate and International Depositions and Discovery Act, requires a California state court to issue a subpoena if a foreign subpoena has been sought in this state and the requesting party satisfies specified requirements. Existing law prohibits a subpoena from being issued pursuant to those provisions if the submitted foreign subpoena (1) is based on a violation of another state's laws that interfere with a person's right to allow a child to receive gender-affirming health care, as specified, or (2) relates to a foreign penal civil action and would require disclosure of information related to sensitive services, as defined.

This bill would prohibit a provider of health care, health care service plan, or contractor from complying with a court order that constitutes a foreign subpoena, absent a court order issued pursuant to the Interstate and International Depositions and Discovery Act, as specified. Because a violation of this prohibition that results in economic loss or personal injury would be a misdemeanor under the Confidentiality of Medical Information Act, this bill would impose a state-mandated local program.

Existing law prohibits a provider of health care, health care service plan, contractor, or corporation and its subsidiaries and affiliates from intentionally sharing, selling, using for marketing, or otherwise using medical information for a purpose not necessary to provide health care services to the patient, except to the extent expressly authorized by a patient, enrollee, or subscriber, or if compelled pursuant to the above-described requirements. Existing law prohibits a contractor or corporation and its subsidiaries and affiliates from further disclosing medical information received under these provisions to a person or entity that is not engaged in providing direct health care services to the patient or the patient's provider of health care or health care service

plan or insurer or self-insured employer, except to the extent expressly authorized by a patient, enrollee, or subscriber, or if compelled pursuant to the above-described requirements.

3

This bill would delete the exceptions above-described exception allowing disclosure pursuant to an express authorization by a patient, enrollee, or subscriber. subscriber, and would instead prohibit a provider of health care, health care service plan, contractor, or corporation and its subsidiaries and affiliates from intentionally selling medical information or using medical information for marketing. By expanding prohibitions against disclosing medical information, and thereby expanding the crime of violating the act, this bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: yes.

The people of the State of California do enact as follows:

1 SECTION 1. Section 56.10 of the Civil Code is amended to 2 read:

3 56.10. (a) A provider of health care, health care service plan,
4 or contractor shall not disclose medical information regarding a

5 patient of the provider of health care or an enrollee or subscriber 6 of a health care service plan without first obtaining an

7 authorization, except as provided in subdivision (b) or (c).

8 (b) A provider of health care, a health care service plan, or a 9 contractor shall disclose medical information if the disclosure is 10 compelled by any of the following:

11 (1) (A) A court order issued by a California state court pursuant

12 to an order of that court or a court order from another state based

13 on another state's law so long as that law does not interfere with

14 California law, including, but not limited to, the Reproductive

15 Privacy Act (Article 2.5 (commencing with Section 123460) of

16 Chapter 2 of Part 2 of Division 106 of the Health and Safety Code).

17 court, including a court order issued by a California state court

1 pursuant to Section 2029.300 of the Code of Civil Procedure 2 relating to a foreign subpoena.

3 (B) A provider of health care, health care service plan, or

4 contractor shall not comply with a court order that constitutes a

5 foreign subpoena, absent a court order issued pursuant to Section

6 2029.300 of the Code of Civil Procedure.

7 (2) A board, commission, or administrative agency for purposes8 of adjudication pursuant to its lawful authority.

9 (3) A party to a proceeding before a court or administrative 10 agency pursuant to a subpoena, subpoena duces tecum, notice to

appear served pursuant to Section 1987 of the Code of Civil

Procedure, or any provision authorizing discovery in a proceeding

13 before a court or administrative agency.

14 (4) A board, commission, or administrative agency pursuant to

an investigative subpoena issued under Article 2 (commencingwith Section 11180) of Chapter 2 of Part 1 of Division 3 of Title

17 2 of the Government Code.

(5) An arbitrator or arbitration panel, when arbitration is lawfully
requested by either party, pursuant to a subpoena duces tecum
issued under Section 1282.6 of the Code of Civil Procedure, or
another provision authorizing discovery in a proceeding before an
arbitrator or arbitration panel.

(6) A search warrant lawfully issued to a governmental law
enforcement agency, including a warrant from another state based
on another state's law so long as that law does not interfere with
California law, including, but not limited to, the Reproductive
Privacy Act (Article 2.5 (commencing with Section 123460) of
Chapter 2 of Part 2 of Division 106 of the Health and Safety-Code).

29 Code), and execution of the search warrant would not constitute

30 *a violation of Section 13778.2 of the Penal Code.*

31 (7) The patient or the patient's representative pursuant to
32 Chapter 1 (commencing with Section 123100) of Part 1 of Division
33 106 of the Health and Safety Code.

34 (8) A medical examiner, forensic pathologist, or coroner, when 35 requested in the course of an investigation by a medical examiner, 36 forensic pathologist, or coroner's office for the purpose of 37 identifying the decedent or locating next of kin, or when 38 investigating deaths that may involve public health concerns, organ 39 or tissue donation, child abuse, elder abuse, suicides, poisonings, 40 accidents, sudden infant deaths, suspicious deaths, unknown deaths,

1 or criminal deaths, or upon notification of, or investigation of, 2 imminent deaths that may involve organ or tissue donation pursuant 3 to Section 7151.15 of the Health and Safety Code, or when 4 otherwise authorized by the decedent's representative. Medical 5 information requested by a medical examiner, forensic pathologist, 6 or coroner under this paragraph shall be limited to information 7 regarding the patient who is the decedent and who is the subject 8 of the investigation or who is the prospective donor and shall be 9 disclosed to a medical examiner, forensic pathologist, or coroner 10 without delay upon request. A medical examiner, forensic 11 pathologist, or coroner shall not disclose the information contained 12 in the medical record obtained pursuant to this paragraph to a third 13 party without a court order or authorization pursuant to paragraph 14 (4) of subdivision (c) of Section 56.11.

15 (9) When otherwise specifically required by California law.

(c) A provider of health care or a health care service plan maydisclose medical information as follows:

18 (1) The information may be disclosed to providers of health 19 care, health care service plans, contractors, or other health care 20 professionals or facilities for purposes of diagnosis or treatment 21 of the patient. This includes, in an emergency situation, the 22 communication of patient information by radio transmission or 23 other means between emergency medical personnel at the scene 24 of an emergency, or in an emergency medical transport vehicle, 25 and emergency medical personnel at a health facility licensed 26 pursuant to Chapter 2 (commencing with Section 1250) of Division 27 2 of the Health and Safety Code.

28 (2) The information may be disclosed to an insurer, employer, 29 health care service plan, hospital service plan, employee benefit 30 plan, governmental authority, contractor, or other person or entity 31 responsible for paying for health care services rendered to the 32 patient, to the extent necessary to allow responsibility for payment 33 to be determined and payment to be made. If (A) the patient is, by 34 reason of a comatose or other disabling medical condition, unable 35 to consent to the disclosure of medical information and (B) no 36 other arrangements have been made to pay for the health care 37 services being rendered to the patient, the information may be 38 disclosed to a governmental authority to the extent necessary to 39 determine the patient's eligibility for, and to obtain, payment under 40 a governmental program for health care services provided to the 1 patient. The information may also be disclosed to another provider

2 of health care or health care service plan as necessary to assist the

3 other provider or health care service plan in obtaining payment

4 for health care services rendered by that provider of health care or

5 health care service plan to the patient.

6 (3) The information may be disclosed to a person or entity that

provides billing, claims management, medical data processing, orother administrative services for providers of health care or health

9 care service plans or for any of the persons or entities specified in

10 paragraph (2). However, that disclosed information shall not be

11 further disclosed by the recipient in a way that would violate this 12 part.

13 (4) The information may be disclosed to organized committees 14 and agents of professional societies or of medical staffs of licensed 15 hospitals, licensed health care service plans, professional standards 16 review organizations, independent medical review organizations 17 and their selected reviewers, utilization and quality control peer 18 review organizations as established by Congress in Public Law 19 97-248 in 1982, contractors, or persons or organizations insuring, 20 responsible for, or defending professional liability that a provider 21 may incur, if the committees, agents, health care service plans, 22 organizations, reviewers, contractors, or persons are engaged in 23 reviewing the competence or qualifications of health care professionals or in reviewing health care services with respect to 24 25 medical necessity, level of care, quality of care, or justification of

26 charges.

27 (5) The information in the possession of a provider of health 28 care or a health care service plan may be reviewed by a private or 29 public body responsible for licensing or accrediting the provider 30 of health care or a health care service plan. However, no 31 patient-identifying medical information may be removed from the 32 premises except as expressly permitted or required elsewhere by law, nor shall that information be further disclosed by the recipient 33 34 in a way that would violate this part.

(6) The information may be disclosed to a medical examiner,
forensic pathologist, or county coroner in the course of an
investigation by a medical examiner, forensic pathologist, or
coroner's office when requested for all purposes not included in
paragraph (8) of subdivision (b). A medical examiner, forensic
pathologist, or coroner shall not disclose the information contained

1 in the medical record obtained pursuant to this paragraph to a third

2 party without a court order or authorization pursuant to paragraph
3 (4) of subdivision (c) of Section 56.11.

(4) Of subdivision (c) of Beetion 50.11.
(7) The information may be disclosed to public agencies, clinical investigators, including investigators conducting epidemiologic
studies, health care research organizations, and accredited public
or private nonprofit educational or health care institutions for bona
fide research purposes. However, no information so disclosed shall
be further disclosed by the recipient in a way that would disclose

10 the identity of a patient or violate this part.

11 (8) A provider of health care or health care service plan that has

12 created medical information as a result of employment-related 13 health care services to an employee conducted at the specific prior

14 written request and expense of the employer may disclose to the

15 employee's employer that part of the information that:

16 (A) Is relevant in a lawsuit, arbitration, grievance, or other claim

or challenge to which the employer and the employee are parties
and in which the patient has placed in issue the patient's medical
history, mental or physical condition, or treatment, provided that
information may only be used or disclosed in connection with that

21 proceeding.

(B) Describes functional limitations of the patient that may
entitle the patient to leave from work for medical reasons or limit
the patient's fitness to perform the patient's present employment,
provided that no statement of medical cause is included in the
information disclosed.

27 (9) Unless the provider of health care or a health care service 28 plan is notified in writing of an agreement by the sponsor, insurer, 29 or administrator to the contrary, the information may be disclosed 30 to a sponsor, insurer, or administrator of a group or individual 31 insured or uninsured plan or policy that the patient seeks coverage 32 by or benefits from, if the information was created by the provider 33 of health care or health care service plan as the result of services 34 conducted at the specific prior written request and expense of the 35 sponsor, insurer, or administrator for the purpose of evaluating the 36 application for coverage or benefits.

(10) The information may be disclosed to a health care service
plan by providers of health care that contract with the health care
service plan and may be transferred between providers of health
care that contract with the health care service plan, for the purpose

1 of administering the health care service plan. Medical information

2 shall not otherwise be disclosed by a health care service plan except3 in accordance with this part.

4 (11) This part does not prevent the disclosure by a provider of 5 health care or a health care service plan to an insurance institution, 6 agent, or support organization, subject to Article 6.6 (commencing 7 with Section 791) of Chapter 1 of Part 2 of Division 1 of the 8 Insurance Code, of medical information if the insurance institution, 9 agent, or support organization has complied with all of the 10 requirements for obtaining the information pursuant to Article 6.6 11 (commencing with Section 791) of Chapter 1 of Part 2 of Division 12 1 of the Insurance Code.

13 (12) The information relevant to the patient's condition, care, 14 and treatment provided may be disclosed to a probate court 15 investigator in the course of an investigation required or authorized 16 in a conservatorship proceeding under the 17 Guardianship-Conservatorship Law as defined in Section 1400 of 18 the Probate Code, or to a probate court investigator, probation 19 officer, or domestic relations investigator engaged in determining 20 the need for an initial guardianship or continuation of an existing 21 guardianship.

(13) The information may be disclosed to an organ procurement organization or a tissue bank processing the tissue of a decedent for transplantation into the body of another person, but only with respect to the donating decedent, for the purpose of aiding the transplant. For the purpose of this paragraph, "tissue bank" and "tissue" have the same meanings as defined in Section 1635 of the Health and Safety Code.

29 (14) The information may be disclosed when the disclosure is 30 otherwise specifically authorized by law, including, but not limited 31 to, the voluntary reporting, either directly or indirectly, to the 32 federal Food and Drug Administration of adverse events related to drug products or medical device problems, or to disclosures 33 34 made pursuant to subdivisions (b) and (c) of Section 11167 of the 35 Penal Code by a person making a report pursuant to Sections 36 11165.9 and 11166 of the Penal Code, provided that those 37 disclosures concern a report made by that person. 38 (15) Basic information, including the patient's name, city of

residence, age, sex, and general condition, may be disclosed to a

state-recognized or federally recognized disaster relief organization
 for the purpose of responding to disaster welfare inquiries.

(16) The information may be disclosed to a third party for
purposes of encoding, encrypting, or otherwise anonymizing data.
However, no information so disclosed shall be further disclosed
by the recipient in a way that would violate this part, including the
unauthorized manipulation of coded or encrypted medical
information.

10 (17) For purposes of disease management programs and services 11 as defined in Section 1399.901 of the Health and Safety Code, 12 information may be disclosed as follows: (A) to an entity 13 contracting with a health care service plan or the health care service 14 plan's contractors to monitor or administer care of enrollees for a 15 covered benefit, if the disease management services and care are 16 authorized by a treating physician, or (B) to a disease management 17 organization, as defined in Section 1399.900 of the Health and 18 Safety Code, that complies fully with the physician authorization 19 requirements of Section 1399.902 of the Health and Safety Code, 20 if the health care service plan or its contractor provides or has 21 provided a description of the disease management services to a 22 treating physician or to the health care service plan's or contractor's 23 network of physicians. This paragraph does not require physician 24 authorization for the care or treatment of the adherents of a 25 well-recognized church or religious denomination who depend 26 solely upon prayer or spiritual means for healing in the practice 27 of the religion of that church or denomination. 28 (18) The information may be disclosed, as permitted by state

and federal law or regulation, to a local health department for the purpose of preventing or controlling disease, injury, or disability, including, but not limited to, the reporting of disease, injury, vital events, including, but not limited to, birth or death, and the conduct of public health surveillance, public health investigations, and public health interventions, as authorized or required by state or federal law or regulation.

(19) The information may be disclosed, consistent with
applicable law and standards of ethical conduct, by a
psychotherapist, as defined in Section 1010 of the Evidence Code,
if the psychotherapist, in good faith, believes the disclosure is
necessary to prevent or lessen a serious and imminent threat to the

1 health or safety of a reasonably foreseeable victim or victims, and

2 the disclosure is made to a person or persons reasonably able to

3 prevent or lessen the threat, including the target of the threat.

4 (20) The information may be disclosed as described in Section 5 56.103.

6 (21) (A) The information may be disclosed to an employee
7 welfare benefit plan, as defined under Section 3(1) of the Employee
8 Retirement Income Security Act of 1974 (29 U.S.C. Sec. 1002(1)),
9 which is formed under Section 302(c)(5) of the Taft-Hartley Act

10 (29 U.S.C. Sec. 186(c)(5)), to the extent that the employee welfare 11 benefit plan provides medical care, and may also be disclosed to 12 an entity contracting with the employee welfare benefit plan for 13 billing, claims management, medical data processing, or other 14 administrative services related to the provision of medical care to 15 persons enrolled in the employee welfare benefit plan for health

16 care coverage, if all of the following conditions are met:

(i) The disclosure is for the purpose of determining eligibility,
coordinating benefits, or allowing the employee welfare benefit
plan or the contracting entity to advocate on the behalf of a patient
or enrollee with a provider, a health care service plan, or a state
or federal regulatory agency.

(ii) The request for the information is accompanied by a written
authorization for the release of the information submitted in a
manner consistent with subdivision (a) and Section 56.11.

(iii) The disclosure is authorized by and made in a manner
consistent with the federal Health Insurance Portability and
Accountability Act of 1996 (Public Law 104-191).

(iv) Any information disclosed is not further used or disclosed
by the recipient in any way that would directly or indirectly violate
this part or the restrictions imposed by Part 164 of Title 45 of the
Code of Federal Regulations, including the manipulation of the
information in any way that might reveal individually identifiable

information in any way that might reveal individually identifiable
medical information.

34 (B) For purposes of this paragraph, Section 1374.8 of the Health35 and Safety Code shall not apply.

36 (22) Information may be disclosed pursuant to subdivision (a)
37 of Section 15633.5 of the Welfare and Institutions Code by a person
38 required to make a report pursuant to Section 15630 of the Welfare
39 and Institutions Code, provided that the disclosure under
40 subdivision (a) of Section 15633.5 concerns a report made by that

1 person. Covered entities, as they are defined in Section 160.103

2 of Title 45 of the Code of Federal Regulations, shall comply with

3 the requirements of the federal Health Insurance Portability and

4 Accountability Act of 1996 (HIPAA) privacy rule pursuant to

5 subsection (c) of Section 164.512 of Title 45 of the Code of Federal

6 Regulations if the disclosure is not for the purpose of public health7 surveillance, investigation, intervention, or reporting an injury or

8 death.

9 (23) The information may be disclosed to a school-linked 10 services coordinator pursuant to a written authorization between

11 the health provider and the patient or client that complies with the

12 federal Health Insurance Portability and Accountability Act of

13 1996.

14 (24) Mental health records, as defined in subdivision (c) of

15 Section 5073 of the Penal Code, may be disclosed by a county 16 correctional facility, county medical facility, state correctional

facility, or state hospital, as required by Section 5073 of the PenalCode.

19 (d) Except as provided by subdivisions (b) and (c), a A provider

20 of health care, health care service plan, contractor, or corporation

21 and its subsidiaries and affiliates shall not intentionally share, sell,

22 use for marketing, or otherwise use medical information for a

23 purpose not necessary to provide health care services to the patient.

24 sell medical information or use medical information for marketing.

25 (e) Except to the extent expressly authorized by a patient, 26 enrollee, or subscriber or as provided by subdivisions (b) and (c),

27 a contractor or corporation and its subsidiaries and affiliates shall

28 not further disclose medical information regarding a patient of the

29 provider of health care or an enrollee or subscriber of a health care

30 service plan or insurer or self-insured employer received under

31 this section to a person or entity that is not engaged in providing

32 direct health care services to the patient or the patient's provider

33 of health care or health care service plan or insurer or self-insured

34 employer.

35 (f) For purposes of this section, the following definitions apply:

36 (1) "Court order" means a document, however denominated,

37 including a subpoena, issued under authority of a court of record

38 requiring a person to do any of the following:

39 (A) Attend and give testimony at a deposition.

1 (B) Produce and permit inspection, copying, testing, or sampling

2 of designated books, documents, records, electronically stored
3 information, or tangible things in the possession, custody, or
4 control of the person.

5 (C) Permit inspection of premises under the control of the 6 person.

7 (2) "Foreign subpoena" means both of the following:

8 (A) A foreign subpoena, as defined in Section 2029.200 of the
9 Code of Civil Procedure.

10 (B) A court order issued under authority of a court of record 11 of a foreign jurisdiction.

12 (1)

(3) "Medical examiner, forensic pathologist, or coroner" means
a coroner or deputy coroner, as described in subdivision (c) of
Section 830.35 of the Penal Code, or a licensed physician who
currently performs official autopsies on behalf of a county
coroner's office or a medical examiner's office, whether as a
government employee or under contract to that office.

19 (2)

(4) "School-linked services coordinator" means an individual
located on a school campus or under contract by a county
behavioral health provider agency for the treatment and health
care operations and referrals of students and their families that
holds any of the following:

25 (A) A services credential with a specialization in pupil personnel 26 services, as described in Section 44266 of the Education Code.

(B) A services credential with a specialization in health
authorizing service as a school nurse, as described in Section 44877
of the Education Code.

30 (C) A license to engage in the practice of marriage and family
31 therapy issued pursuant to Chapter 13 (commencing with Section
32 4980) of Division 2 of the Business and Professions Code.

33 (D) A license to engage in the practice of educational
34 psychology issued pursuant to Chapter 13.5 (commencing with
35 Section 4989.10) of Division 2 of the Business and Professions
36 Code.

37 (E) A license to engage in the practice of professional clinical38 counseling issued pursuant to Chapter 16 (commencing with

39 Section 4999.10) of Division 2 of the Business and Professions

40 Code.

SEC. 2. No reimbursement is required by this act pursuant to
 Section 6 of Article XIIIB of the California Constitution because
 the only costs that may be incurred by a local agency or school

4 district will be incurred because this act creates a new crime or

5 infraction, eliminates a crime or infraction, or changes the penalty

6 for a crime or infraction, within the meaning of Section 17556 of

7 the Government Code, or changes the definition of a crime within

8 the meaning of Section 6 of Article XIII B of the California

9 Constitution.

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