

# ASSEMBLY BILL 1184 (CHIU)

## STRENGTHENING PATIENT CONFIDENTIALITY FOR SENSITIVE SERVICES

### SUMMARY

---

This bill strengthens confidentiality protections for patients receiving sensitive health services.

### BACKGROUND

---

The federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) allows patients to ask their insurers and providers to send communications of personal and sensitive health information by alternate means or to an alternate location. Insurers and providers are required to accommodate “reasonable requests” if the information could endanger the individual.

California further protects patients who access sensitive services by allowing a patient to opt in for confidential communications either verbally or in writing (SB 138 - Hernández). A patient provides an alternate address and/or preferred form of communications, and then the insurer has 7-14 days to implement.

### THE PROBLEM

---

When a patient accesses care for a sensitive service, including sexual and reproductive health care, confidentiality is of the utmost importance. Even with existing protections, communications are not always confidential. With the expansion of the Affordable Care Act, young people may be covered by a family member’s insurance plan up to age 26. These individuals, as well as people on their spouse’s insurance plan, may not feel safe or comfortable having their health information shared with the policy holder (their guardian or partner) through explanation of benefits letters (EOBs) and other methods of communication related to their insurance.

Patients with confidentiality concerns can protect their medical communications by requesting confidentiality, as established by SB 138. However, there has been no standard process for requesting confidentiality, and there have been inconsistencies in follow through for patient protection. If confidentiality is violated, it has been the patient’s

burden to navigate the complaint process with the Department of Managed Health Care.

Advocates have continued to work with hundreds of patients since the enactment of SB 138, and their stories highlight the administrative barriers that patients have to overcome to protect their private health information. Most cases were positively resolved only after consumer rights advocates and attorneys stepped in.

For example, a patient submitted a confidential communication request (CCR) to her health plan because she was going to start taking birth control. Her insurer disclosed her care to her parents. When she contacted the health plan, they told her that they rejected the CCR because she was a dependent and only the insurance policy owner could make such requests. It took an attorney to resolve her issues with the health plan, but the damage was done.

Another patient contacted her health plan to submit a CCR. The health plan advised that they could not block her information separate and apart from all beneficiaries on the health plan. This would have raised a red flag for her father who owned the insurance policy. It took an attorney stepping in to ensure her information was properly protected in accordance with the law.

### THE SOLUTION

---

AB 1184 will ensure patient information is protected by establishing automatic confidentiality when accessing sensitive services, putting the responsibility on the insurer rather than the patient. This bill will also expand the definition of sensitive services to include transgender health care and behavioral health care, to ensure more individuals are able to have their privacy protected.

AB 1184 will guarantee that patients can successfully and safely use their insurance to access needed care without confusion or fear that their privacy will be violated.

## **SUPPORT**

---

Planned Parenthood Affiliates of California  
(sponsor)

## **FOR MORE INFORMATION**

---

Riana King, Legislative Director  
Office of Assemblymember David Chiu  
[riana.king@asm.ca.gov](mailto:riana.king@asm.ca.gov)