

SENATE JUDICIARY COMMITTEE
Senator Thomas Umberg, Chair
2025-2026 Regular Session

AB 82 (Ward)
Version: June 19, 2025
Hearing Date: July 8, 2025
Fiscal: Yes
Urgency: No
AM

SUBJECT

Health care: legally protected health care activity

DIGEST

This bill enacts various safeguards for healthcare providers and patients of gender-affirming care, including expanding the Safe at Home program to include health care professionals who provide gender-affirming health care, and expanding existing civil and criminal liability for online violations of their and their patient’s privacy. The bill also prohibits the reporting of testosterone and mifepristone to California’s Prescription Drug Monitoring Program (CURES), and requires bail to be set at zero dollars for an individual who has been arrested in connection with a proceeding in another state regarding the individual performing, supporting, or aiding in the performance of “a legally protected health care activity.” The bill also prohibits a state or local law enforcement agency from assisting another state’s prosecution of a provider of a legally protected health care activity, including gender-affirming health care, and enacts other protections from criminal prosecution for those activities

EXECUTIVE SUMMARY

In the past few years, numerous states have introduced legislation targeting transgender individuals in an attempt to prohibit or limit their ability to obtain gender-affirming care. According to GLAAD, transgender and non-conforming persons were the target of over half of all anti-LGBTQ+ incidents tracked by them over the last year.¹ Most recently, a slew of executive orders were issued by the Trump administration attacking the rights of transgender individuals.² This bill seeks to build upon existing protections under California law by, among other things, expanding the existing “Safe at Home” address confidentiality program for reproductive health care providers, employees, volunteers, and patients to providers and patients of gender-affirming health care services. The bill is sponsored by the Alliance for Trans Youth

¹ Avery Lotz, *Trans community most targeted in anti-LGBTQ+ incidents*, GLAAD data shows, Axios (June 2, 2025), available at <https://www.axios.com/2025/06/02/anti-lgbtq-incidents-glaad-data-transgender>.

² See Comment 2)c), below.

Rights, Equality California, Planned Parenthood Affiliates of California, and TransFamily Support Services The bill is supported by numerous civil rights, health care rights, youth, and LGBTQ+ advocacy organizations. The bill is opposed by Californians United for Sex-based Evidence in Policy and Law and Our Duty. This analysis will focus on the provisions of the bill in this Committee’s jurisdiction. The bill passed the Senate Public Safety Committee on a vote of 5 to 1.

PROPOSED CHANGES TO THE LAW

Existing federal law:

- 1) Provides that each state shall give full faith and credit to the public acts, records, and judicial proceedings of every other state, and that Congress may prescribe the manner in which such acts, records, and proceedings shall be proved and the effect thereof. (U.S. Const., art. IV, § 1.)
- 2) Provides that persons in the United States may travel freely throughout the United States. (*E.g., U.S. v. Guest* (1966) 383 U.S. 745, 758 (“freedom to travel throughout the United States has long been recognized as a basic right under the Constitution”).)³
- 3) Provides that records and judicial proceedings of any court of any state, territory or possession, or copies thereof, must be proved or admitted in other courts within the United States and its territories and possessions by the attestation of the clerk and seal of the court annexed, if a seal exists, together with a certificate of a judge of the court that the said attestation is in proper form; and that such acts, records, and judicial proceedings, or copies thereof, once authenticated, have the same full faith and credit in every court within the United States and its territories and possessions as they have by law or usage in the courts of such State, territory or possession from which they are taken. (28 U.S.C. § 1738.)

Existing state law:

- 1) Establishes an address confidentiality (or “Safe at Home”) program within the Office of the Secretary of State (SOS) in order to enable state and local agencies to both accept and respond to requests for public records without disclosing the changed name or address of a victim of domestic violence, sexual assault, or stalking. Existing law permits any such adult victim, or parent or guardian acting on behalf of a minor or incapacitated person, to apply through a community-based victims’ assistance program to have an address designated by the SOS as their substitute mailing address. (Gov. Code § 6205 et seq.)

³ Although the right to travel is not expressly set forth in the Constitution, it has been recognized as emanating from both the Interstate Commerce Clause (*e.g., Edwards v. People of State of California* (1941) 314 U.S. 160, 174) and the Privileges and Immunities Clause (*e.g., Saenz v. Roe* (1999) 526 U.S. 501-502).

- 2) Existing law similarly allows reproductive health care providers, employees, volunteers, and patients to apply to the address confidentiality program through a community-based victims' assistance program, as specified. (Gov. Code §§ 6215 et seq.) The application is required to contain certain things, including a certified statement signed by a person authorized by the reproductive health care services facility stating that the facility or any of its providers, employees, volunteers, or patients is or was the target of threats or acts of violence or harassment within one year of the date of the application. (Gov. Code § 6215.2(a)(1)(B).)
- 3) Provides that if the applicant alleges that the basis for the application is that the applicant is a reproductive health care services facility volunteer, the application must include, in addition to the documents specified in 2), above, be accompanied by reproductive health care services facility documentation showing the length of time the volunteer has committed to working at the facility. (Gov. Code § 6215.2(a)(2).)
- 4) Requires that the SOS certify a successful applicant as a program participant for four years following the date of filing, unless the certification is withdrawn or invalidated before that date, except reproductive health care services facilities volunteers are to be certified until six months from the last date of volunteering with the facility. Requires the SOS to establish a renewal procedure. (Gov. Code §§ 6206(c) & 6215.2(e).)
- 5) Allows a participant to withdraw from the Safe at Home program. Provides the SOS with the authority to cancel a program participant's certification for specified reasons. (See Gov. Code §§ 6206.5, 6206.7, 6215.3, & 6215.4.)
- 6) Prohibits a person, business, or association from soliciting, selling, or trading on the internet or social media the personal information or image of a reproductive health care services patient, provider, or assistant with the intent to do either of the following:
 - a) Incite a third person to cause imminent great bodily harm to the person identified in the posting or display, or to a coresident of that person, where the third person is likely to commit this harm.
 - b) Threaten the person identified in the posting or display, or a coresident of that person, in a manner that places the person identified or the coresident in objectively reasonable fear for their personal safety. (Gov. Code § 6218(a)(1).)
- 7) Authorizes a person whose personal information as result of a violation of 6), above, may seek injunctive relief and be awarded damages, as specified. (Gov. Code § 6218(a)(2)-(3).)

- 8) Prohibits a person, business, or association from publicly posting or publicly displaying, disclosing, or distributing, on websites or social media, the personal information or image of a reproductive health care services patient, provider, or assistant if that individual, or any individual, entity, or organization authorized to act on their behalf, has made a written demand of that person, business, or association to not disclose the personal information or image. (Gov. Code § 6218 (b)(1).)
 - a) Requires that any written demand made is to include a statement declaring that the individual is subject to the protection of these provisions and describing a reasonable fear for the safety of that individual or of any person residing at the individual's home address. (*Ibid.*)
 - b) Specifies that a demand is to be effective for four years, regardless of whether or not the individual's affiliation with a reproductive health care services facility has expired prior to the end of the four-year period. (*Ibid.*)
 - c) Provides that a reproductive health care services patient, provider, or assistant whose personal information or image is made public as a result of a failure to honor a demand, or any individual, entity, or organization authorized to act on their behalf, may bring an action seeking injunctive or declarative relief in any court of competent jurisdiction. If a jury or court finds that a violation has occurred, it may grant injunctive or declarative relief and shall award the successful plaintiff court costs and reasonable attorney's fees. (Gov. Code § 6218(b)(2).)
 - d) Clarifies that these provisions do not apply to a person or entity defined in Section 1070 of the Evidence Code (a publisher, editor, reporter, or other person connected with or employed upon a newspaper, magazine, or other periodical publication, etc.) (*Id.*, at (b)(3).)

- 9) Prohibits a person, business, or association from soliciting, selling, or trading on the internet or social media the personal information or image of a reproductive health care services patient, provider, or assistant with the intent to do either of the following:
 - a) incite a third person to cause imminent great bodily harm to the person identified in the posting or display, or to a coresident of that person, where the third person is likely to commit this harm; or
 - b) threaten the person identified in the posting or display, or a coresident of that person, in a manner that places the person identified or the coresident in objectively reasonable fear for their personal safety. (Gov. Code § 6218(c)(1).)
 - c) A reproductive health care services patient, provider, or assistant whose personal information or image is solicited, sold, or traded in violation of paragraph 9), above, or any individual, entity, or organization authorized to act on their behalf, may bring an action in any court of competent jurisdiction. In addition to any other legal rights and remedies, if a jury or

court finds that a violation has occurred, it shall award damages to that individual in an amount up to a maximum of three times the actual damages, but in no case less than \$4,000. (Gov. Code § 6218(c)(2).)

- 10) Clarifies that an interactive computer service or access software provider that is exempt from liability for third party content under Section 230(f) of Title 47 of the United States Code), is liable under 6) through 9), above, unless the service or provider intends to abet or cause bodily harm that is likely to occur or threatens to cause bodily harm to a reproductive health care services patient, provider, or assistant, or any person residing at the same home address. (Gov. Code § 6218(d).)
- 11) Prohibits a person from posting on the internet or social media, with the intent that another person imminently use that information to commit a crime involving violence or a threat of violence against a reproductive health care services patient, provider, or assistant, or other individuals residing at the same home address, the personal information or image of a reproductive health care services patient, provider, or assistant, or other individuals residing at the same home address. (Gov. Code § 6218.01(a)(1).)
 - a) A violation of 11), above is punishable by a fine or imprisonment, or both. (Gov. Code § 6218.01(a)(2).)
 - b) If a violation leads to the bodily injury of a reproductive health care services patient, provider, or assistant, or other individuals residing at the same home address, it is a felony punishable by a fine of up to \$50,000, imprisonment, or by both that fine and imprisonment. (Gov. Code § 6218.01(a)(3).)
- 12) Establishes the Controlled Substance Utilization Review and Evaluation System (CURES), for the purposes of collecting records of dispensed Schedule II, III, IV, and V controlled substances. (Health & Saf. Code § 11165.)
- 13) Requires health care practitioners in receipt of a federal Drug Enforcement Administration (DEA) registration providing authorization to prescribe controlled substances, as well as pharmacists, to register for access to the CURES database. (Health & Saf. Code § 11165.1.)
- 14) Provides that CURES data may be disclosed to public or private entities, as approved by the Department of Justice, for educational, peer review, statistical, or research purposes, if patient information, including information that may identify the patient, is not compromised. (Health & Saf. Code § 11165(c)(2).)
- 15) Requires any out-of-state subpoena, warrant, wiretap order, pen register trap and trace order, legal process, or request from any law enforcement agent or entity to include an affidavit or declaration under penalty of perjury that the discovery is not

in connection with an out-of-state proceeding relating to any legally protected health care activity, with limited exceptions. (Pen. Code § 13778.3(d).)

16) Provides that a law of another state law which imposes civil or criminal penalties related to an individual performing, supporting, or aiding in the performance of an abortion in this state, or an individual obtain an abortion in this state, if the abortion is lawful under the laws of California, is against the public policy of this state. (Pen. Code § 13778.2(c)(1).)

a) Prohibits a state court, judicial officer, or court employee or clerk, or authorized attorney from issuing a subpoena pursuant to any state law in connection with a proceeding in another state regarding an individual performing, supporting, or aiding in the performance of an abortion that is lawful under the laws of California. (Pen. Code § 13778.2(c)(2).)

This bill:

1) Expands the Safe at Home program administered by the California Secretary of State that currently applies to providers, employees, volunteers, and patients of reproductive health care so it also applies to providers, employees, volunteers, and patients of gender-affirming health care services, who collectively are defined as “covered health care services provider, employee, volunteer, or patient.” All existing requirements to qualify for, or enroll in, the program still apply.

2) Defines the following terms:

- a) “Covered health care services” means gender-affirming health care services or reproductive health care services.
- b) “Covered health care services provider, employee, volunteer, or patient” means a gender-affirming health care or a gender-affirming mental health care provider, employee, volunteer, or patient, or a reproductive health care services provider, employee, volunteer, or patient.
- c) “Covered health care services facility” means a gender-affirming health care services facility or a reproductive health care services facility.
- d) “Gender-affirming health care” and “gender-affirming mental health care” have the same meaning as provided in Section 16010.2 of the Welfare and Institutions Code.
- e) “Gender-affirming health care and gender-affirming mental health care provider, employee, volunteer, or patient” means a person who obtains, provides, or assists, at the request of another person, in obtaining or providing gender-affirming health care services, or a person who owns or operates a gender-affirming health care services facility.
- f) “Gender-affirming health care services facility” includes a hospital, an office operated by a licensed physician and surgeon, a licensed clinic, or other licensed health care facility that provides gender-affirming health care services.

- 3) Expands the existing prohibition that a person, business, or association not publicly post or publicly display, disclose, or distribute, on websites or social media, the personal information or image of a reproductive health care services patient, provider, or assistant to apply to a gender-affirming health care and gender-affirming mental health care provider, employee, volunteer, or patient.
- 4) Provides that a prescription for or the dispensing of testosterone or mifepristone is not to be reported to CURES or a contracted prescription data processing vendor.
- 5) Authorizes the Department of Justice, in consultation with the California Health and Human Services Agency, health care providers, and clinicians, to add medications for legally protected health care activity, as defined, to the list of medications prohibited from being reported CURES or a contracted prescription data processing vendor.
- 6) Provides that a law of another state which authorizes the imposition of civil or criminal penalties related to an individual performing, supporting, or aiding in the performance of a legally protected health care activity in this state, or an individual obtaining a legally protected health care activity in this state, if lawful in this state, is against the public policy of this state.
- 7) Prohibits a state court, judicial officer, court employee or clerk, or authorized attorney from issuing a subpoena pursuant to any state law in connection with a proceeding in another state regarding an individual performing, supporting, or aiding in the performance of a legally protected health care activity in this state, or an individual obtaining a legally protected health care activity in this state, if lawful under the laws of this state.
- 8) Provides that an investigation of any criminal activity in this state that may involve the performance of a legally protected health care activity is not prohibited, provided that information relating to any medical procedure performed on a specific individual is not shared with an agency or individual from another state for the purpose of enforcing another state's law involving a legally protected health care activity.
- 9) Expands the requirement that a countywide bail schedule set \$0 bail for any person arrested in connection with a proceeding in another state regarding an individual performing, supporting, or aiding in the performance of abortion specifically to reproductive health care services, gender-affirming health care services, and gender-affirming mental health care services.
- 10) Contains a severability clause.

COMMENTS

1. Stated need for the bill

The author writes:

It is imperative that we support the privacy and safety of patients and their families – whose basic obligation is to ensure the utmost health for themselves and loved ones – as well as the safety of health professionals – whose basic obligation is to provide necessary care for their patients as they were trained to do. Reports not only highlight hostile entities utilizing our data systems to target those who are accessing legal health care services, but also illuminate a rise in harassment and violence directed towards those who work in health care settings or seek necessary health services for themselves or their loved ones. As such, AB 82 shores up existing state law by protecting the privacy of Californians’ health data and expanding existing protections to uphold the safety of patients, their families, and health professionals.

2. This bill seeks to build upon existing protections in light of recent actions at the federal level and across other states targeting transgender persons

a. Other state laws targeting transgender persons

Conservative hysteria over transgender individuals reached new heights in 2022. According to Human Rights Watch, as of March 2022, legislatures nationwide had introduced over 300 anti-LGBTQ+ bills, over 130 of which specifically targeted transgender people.⁴ The ACLU reports that it tracked over 500 anti-LGBTQ pieces of legislation in the U.S. in 2024.⁵ As Utah Governor Spencer Cox said in his veto message for a bill that would ban transgender youth from high school sports – a bill functionally targeting the *four* transgender youths playing high school sports in the state – “[r]arely has so much fear and anger been directed at so few.”⁶ One particularly pernicious type of anti-transgender legislation that several states have passed is legislation to prevent gender-affirming medical care. Many of these laws and orders impose civil and/or criminal liability on transgender youth and the adults who assist them in obtaining gender-affirming care, putting parents and doctors in the position of risking sentences

⁴ Human Rights Watch, Press Release, ICYMI: As Lawmakers Escalate Attacks on Transgender Youth Across the Country, Some GOP Leaders Stand Up for Transgender Youth (Mar. 24, 2022), <https://www.hrc.org/press-releases/icymi-as-lawmakers-escalate-attacks-on-transgender-youth-across-the-country-some-gop-leaders-stand-up-for-transgender-youth>.

⁵ ACLU, *In 2024, the ACLU tracked 533 Anti-LGBTQ bills in the U.S.*, (Dec. 6, 2024), available at <https://www.aclu.org/legislative-attacks-on-lgbtq-rights-2024>.

⁶ Utah Gov. Spencer Cox, Veto Message to HB 11 (Mar. 22, 2022), reprinted in the St. Louis Tribune, available at <https://www.slttrib.com/news/politics/2022/03/22/gov-spencer-coxs/>. The Utah Legislature overrode the veto. (Medina, *Utah Legislature Overrides Governor’s Veto of Transgender Athlete Bill*, NY Times (Mar. 25, 2022), available at <https://www.nytimes.com/2022/03/25/us/utah-transgender-athlete-ban-override.html>).

of up to ten years in prison for simply getting their child the medical care they need. Worse, many of these laws and orders are not limited in geographic scope, meaning the state could attempt to penalize a transgender youth or other person for obtaining gender-affirming care in a state where that care is legal, such as California. The U.S. Supreme Court just recently upheld a Tennessee law banning gender-affirming medical care for minors.⁷ This ruling will likely have a broad affect as 25 other states have similar laws.⁸

Despite claims by opposition to this bill and the states banning gender-affirming care for minors, there is evidence to support gender-affirming surgeries and treatments. The Trevor Project, which provides a text and call hotline for LGBTQ youth considering suicide, reported in a 2020 study that gender-affirming care can save lives. They explain:

Medical affirming care can include treatments that postpone physical changes as well as treatments that lead to changes that would affirm one's gender identity. Pubertal suppression, commonly known as "puberty blockers," is used to delay the onset of puberty, and hormone therapy is used to promote gender-affirming physical changes. Pubertal suppression and hormone therapy are two components of patient-centered care for youth that have been supported by empirical evidence (WPATH, 2012).

Pubertal suppression may be used for youth currently in the early stages of puberty who are experiencing distress over their sex assigned at birth and their gender identity. Delaying puberty can provide youth more time to explore their gender identity without the development of unwanted physiological changes and may also serve as a precursor to gender-affirming hormone therapy (GAHT). GAHT allows TGNB youth to develop physical characteristics that align with their gender identity. GAHT is specifically appropriate for TGNB youth who have already entered puberty or following a period of pubertal suppression.

Pubertal suppression is associated with decreased behavioral and emotional problems as well as decreased depressive symptoms (de Vries et al., 2011). Prior to pubertal suppression, 44% of youth experienced clinically significant behavioral problems; however, after an average of two years of pubertal suppression only 22% experienced them. And 30% experienced clinically significant emotional problems prior to pubertal suppression compared to 11% after two years of care. Pubertal suppression has also been shown to significantly improve overall psychological functioning after only six months of care (Costa et al., 2015). Additionally, transgender individuals who desired and received pubertal suppression as

⁷ *U.S. v. Skremetti*, et. al. 605 U.S. _ (2025).

⁸ Andrew Chung, *US Supreme Court upholds Tennessee law banning youth transgender care*, (June 19, 2025), available at <https://www.reuters.com/world/us/us-supreme-court-rules-against-challenge-youth-transgender-care-ban-2025-06-18/>.

adolescents have significantly lower lifetime suicidal ideation compared to those who desired but did not receive it (Turban et al., 2020).

Research on GAHT for youth demonstrates positive effects on body image and overall psychological well-being as well as reduced suicidality. GAHT decreases both emotional and behavioral problems (de Vries et al., 2014), similar to what is seen in pubertal suppression. Recent research has also shown that GAHT decreases suicidality, with one study of transgender youth demonstrating that after approximately 1 year of treatment the average level of suicidality was 1/4th what it was before treatment (Allen et al., 2019).⁹

Additionally, the American Association of Pediatrics has reaffirmed its support of gender-affirming care for young people and stated it opposes any laws or regulations that discriminate against transgender and gender-diverse persons or that interferes in the doctor-patient relationship.¹⁰

b. SB 107 (Wiener, Ch. 810, Stats, 2022), California transgender shield law

In 2022, SB 107 (Wiener, Ch. 810, Stats, 2022) was enacted in response to these anti-transgender statutes. Governor Newsom's signing message of SB 107 stated "[i]n California we believe in equality and acceptance. We believe that no one should be prosecuted or persecuted for getting the care they need – including gender-affirming care."¹¹ SB 107 did several things, including: prohibiting the sharing of medical records regarding the receipt of gender-affirming care related to a child receiving such care; prohibiting the enforcement of out-of-state subpoenas seeking information regarding the receipt of gender-affirming medical care of a child in California; revised the Uniform Child Custody Jurisdiction and Enforcement Act to provide California courts jurisdictional guidance on family law matters arising as a result of a minor receiving gender-affirming care; and made several reforms to California's criminal laws regarding the enforcement of out-of-state criminal statutes related to gender-affirming health care.

c. Recent federal action targeting transgender persons

This hysteria over the very existence of transgender people continues as evidenced by a slew of federal executive orders issued during the first week of the Trump

⁹ The Trevor Project, Gender-Affirming Care for Youth, (Jan. 29, 2020), available at <https://www.thetrevorproject.org/research-briefs/gender-affirming-care-for-youth/>.

¹⁰ Amer. Academy of Pediatrics, *AAP reaffirms gender-affirming care policy, authorizes systematic review of evidence to guide update*, (Aug. 4, 2023), available at <https://publications.aap.org/aapnews/news/25340/AAP-reaffirms-gender-affirming-care-policy?autologincheck=redirected>.

¹¹ Governor's signing message on Sen. Bill No. 107 (Sep. 29, 2022), available at <https://www.gov.ca.gov/wp-content/uploads/2022/09/SB-107-SIGNING.pdf?emrc=1a80c5>.

Administration. On January 20, 2025, a federal executive order was issued stating that the federal government would only recognize two biological sexes,¹² even though this is biologically incorrect.¹³ This executive order completely ignores the existence of intersex individuals, many of whom have had harmful surgeries forced on them in infancy by the medical community in an effort to conform to a “normal healthy body.”¹⁴ Additionally, an order was issued banning transgender girls and women from participating in women’s sports.¹⁵ Another executive order banned all federal funding for youth gender affirming care, including the removal of any funding from medical and educational institutions for research on gender affirming care,¹⁶ while another banned transgender individuals from serving in the U.S. Military.¹⁷ Some of these orders are currently being challenged in court; however, it is unclear what their ultimate fate will be. In response to these executive orders the Trump Administration has taken several actions, including: rescinding all existing federal policies protecting transgender people from sex and disability discrimination; revoking the ability to obtain passports and federal documents reflecting their gender identity; denying transition-related healthcare to federal employees; and ordering law enforcement to prosecute school officials who recognize transgender students.¹⁸ These actions elucidate a general hostility towards the transgender community from the current federal administration.

3. This bill expands the existing Safe at Home program for reproductive health care providers, employees, volunteers, and patients to providers and patients of gender-affirming health care services

With the passage of SB 489 (Alpert, Ch. 1005, Stats. 1998), the California State Legislature established the Safe at Home program within the Office of the SOS to allow victims of domestic violence to apply for a substitute address to be used in public records in order to prevent their assailants, or potential assailants, from finding their work or home address. Through subsequent legislation, the program has been

¹² Exec. Order No. 14168, 90 Fed. Reg. 8615 (Jan. 20, 2025).

¹³ Claire Ainsworth & Nature Magazine, Scientific American, *Sex Redefined: The Idea of 2 Sexes Is Overly Simplistic* (Oct. 22, 2018) available at <https://www.scientificamerican.com/article/sex-redefined-the-idea-of-2-sexes-is-overly-simplistic1/#:~:text=According%20to%20the%20simple%20scenario,or%20sexual%20anatomy%20say%20another.>

¹⁴ Human Rights Campaign, *Understanding the Intersex Community*, available at <https://www.hrc.org/resources/understanding-the-intersex-community> (“Most intersex surgeries are performed on children under 2 years old, denying them the opportunity to make important choices about their own bodies. This can leave intersex people with serious lifelong emotional and physical consequences that affect fertility, sexual function, and emotional well-being.”)

¹⁵ Exec. Order No. 14168, 90 Fed. Reg. 9279 (January 20, 2025).

¹⁶ Exec. Order No. 14187, 90 Fed. Reg. 8771 (Jan. 28, 2025).

¹⁷ Exec. Order No. 14004, 90 Fed. Reg. 8757 (Jan. 27, 2025).

¹⁸ Jennifer Levi, GLADD, *From the Front Lines: The Fight for Transgender Rights Is a Fight for Democracy*, (Feb. 10, 2025), available at <https://www.glad.org/the-fight-for-transgender-rights-is-a-fight-for-democracy/>.

expanded to include victims of sexual assault, stalking, and reproductive health care service providers, employees, volunteers, and patients. (*See* SB 1318 (Alpert, Ch. 562, Stats. 2000) and AB 797 (Shelley, Ch. 380, Stats. 2002).)

Upon successful application, a program participant is certified to remain in the program for four years, subject to early termination or withdrawal, and must re-certify pursuant to the SOS's renewal process if the participant wishes to continue in the program beyond the four-year enrollment period. For victims not yet of the age of majority or incapacitated persons, a parent or guardian may apply to enroll the victim into the program. Program participants may seek confidential voter status and have their residence address, telephone number, and email address declared confidential upon presentation of certification to the county elections official that the person is a participant in the Safe at Home program. This provision makes certain public records confidential; however, as the program has strict parameters around enrollment and the purpose of the program is to provide confidentiality to its participants. California generally recognizes that public access to information concerning the conduct of the people's business is a fundamental and necessary right.¹⁹ At the same time, the state recognizes that this right must be balanced against the right to privacy.²⁰ The general right of access to public records may, therefore, be limited when other important public policy considerations warrant such limitation.

4. This bill expands existing statutes prohibiting posting information on the internet with the intent to incite violence or intent to threaten to also apply to gender-affirming health care service providers, employees, volunteers, and patients

a. Speech, threats, and the First Amendment

The First Amendment of the United States Constitution provides that "Congress shall make no law . . . abridging the freedom of speech."²¹ The California Constitution also protects free speech: "Every person may freely speak, write and publish his or her sentiments on all subjects, being responsible for the abuse of this right. A law may not restrain or abridge liberty of speech or press."²² "[A]s a general matter, the First Amendment means that government has no power to restrict expression because of its message, its ideas, its subject matter, or its content."²³

"The First Amendment literally forbids the abridgement only of 'speech,' but [the United States Supreme Court has] long recognized that its protection does not end at the spoken or written word."²⁴ The First Amendment also protects certain forms of

¹⁹ Cal. Const., art. I, § 3; Gov. Code, § 7921.000.

²⁰ Cal. Const., art. I, § 1.

²¹ U.S. Const., 1st amend.

²² Cal. Const., art. I, § 2.

²³ *Ashcroft v. American Civil Liberties Union* (2002) 535 U.S. 564, 573.

²⁴ *Texas v. Johnson* (1989) 491 U.S. 397, 404.

conduct—not all conduct, but conduct that “may be ‘sufficiently imbued with elements of communication to fall within the scope of the First and Fourteenth Amendments.’”²⁵ To determine whether conduct is sufficiently expressive to warrant First Amendment protections, a court will ask “whether ‘[a]n intent to convey a particularized message was present, and [whether] the likelihood was great that the message would be understood by those who viewed it.’”²⁶

Legislation that regulates the content of protected speech is subject to strict scrutiny, sometimes referred to by the courts as “exacting scrutiny” in this context.²⁷ To survive strict scrutiny, state action must be narrowly tailored to address a compelling government interest.²⁸

Additionally, “ ‘not all speech is of equal First Amendment importance.’”²⁹ “Speech on matters of public concern is at the heart of the First Amendment’s protection.”³⁰ On the other hand, “where matters of purely private significance are at issue, First Amendment protections are often less rigorous.”³¹ And some speech has so little value that it is not protected at all. A state may ban “true threats,” which are “statements where the speaker means to communicate a serious expression of an intent to commit an act of unlawful violence to a particular individual or group of individuals.”³² “Violence and threats of violence...fall outside the protection of the First Amendment because they coerce by unlawful conduct, rather than persuade by expression, and thus play no part in the ‘marketplace of ideas.’ As such, they are punishable because of the state’s interest in protecting individuals from the fear of violence, the disruption fear engenders and the possibility the threatened violence will occur.”³³

- b. Existing law prohibits posting specified personal information on the internet with the intent to incite violence or threaten the subject as it relates to reproductive health care services, patients, providers, or assistants.*

In 2006, the Legislature passed a law prohibiting posting specified personal information of a reproductive health care services provider, employee, volunteer, or patient, when the information was posted was to incite violence or threaten the subject.³⁴ No court has held these statutes to be unconstitutional or otherwise present an unwarranted barrier to protected activities. This law was updated in 2021 by AB 1356 (Bauer-Kahan, Ch. 191, Stats. 2021), to provide new definitions, update forums where information was not to be

²⁵ *Ibid.*

²⁶ *Ibid.*

²⁷ *Reed v. Town of Gilbert, Ariz.* (2015) 135 S.Ct. 2218, 2226.

²⁸ *Ibid.*

²⁹ *Snyder v. Phelps* (2011) 562 U.S. 443, 452.

³⁰ *Id.* at pp. 451-452 (internal quotation marks and alterations omitted).

³¹ *Id.* at p. 452.

³² *Black, supra*, 538 U.S. at 358-359.

³³ *In re M.S.* (1995) 10 Cal.4th 698, 710.)

³⁴ AB 2251 (Evans, Ch. 486, Stats. 2006); Gov. Code, §§ 6218-6218.05.

posted, and remove the requirement for a demand to remove the information to be done by a sworn affidavit.

This bill seeks to expand existing law and apply those same prohibitions to gender-affirming health care service providers, employees, volunteers, and patients. As was noted in this Committee's analysis of AB 1356, the statute prohibits posting personal information knowingly and with the specific intent to incite imminent great bodily harm against the subject or to threaten the subject. As this statute seeks to prevent the incitement of violence and threats, it regulates speech that lies outside the protections of the First Amendment. Existing law already specifies that these prohibitions do not apply to a person or entity defined in Section 1070 of the Evidence Code, which is a publisher, editor, reporter, or other person connected with or employed upon a newspaper, magazine, or other periodical publication.³⁵ Existing law also further provides that an interactive computer service or access software provider that is exempt from liability for third party content under Section 230(f) of Title 47 of the United States Code, is not liable under these provisions unless the service or provider intends to abet or cause bodily harm that is likely to occur or threatens to cause bodily harm to a reproductive health care services patient, provider, or assistant, or any person residing at the same home address.³⁶ As such, this expansion of this existing provision to cover providers and patients of gender-affirming health care services likely do not conflict with the Constitution.

5. Constitutional issues: the Full Faith and Credit Clause

Existing law declares that a law of another state law which imposes civil or criminal penalties related to an individual performing, supporting, or aiding in the performance of an abortion in this state, or an individual obtain an abortion in this state, if the abortion is lawful under the laws of California, is against the public policy of this state.³⁷ In furtherance of this state public policy, existing law prohibits a state court, judicial officer, or court employee or clerk, or authorized attorney from issuing a subpoena pursuant to any state law in connection with a proceeding in another state regarding an individual performing, supporting, or aiding in the performance of an abortion that is lawful under the laws of California.³⁸ This bill expands these provisions to apply to a legally protected health care activity. A legally protected healthcare activity is defined as any of the following:

- the exercise and enjoyment, or attempted exercise and enjoyment, by a person of rights to reproductive health care services, gender-affirming health care services, or gender-affirming mental health care services secured by the Constitution or

³⁵ Gov. Code § 6218(b)(3).

³⁶ Gov. Code § 6218(d).

³⁷ Pen. Code § 13778.2(c)(1).

³⁸ (Pen. Code § 13778.2(c)(2)).

- laws of California or the provision by a health care service plan contract or a policy, or a certificate of health insurance, that provides for such services;
- an act or omission undertaken to aid or encourage, or attempt to aid or encourage, a person in the exercise and enjoyment or attempted exercise and enjoyment of rights to reproductive health care services, gender-affirming health care services, or gender-affirming mental health care services secured by the Constitution or laws of California;
 - the provision of reproductive health care services, gender-affirming health care services, or gender-affirming mental health care services by a person duly licensed under the laws of California or the coverage of, and reimbursement for, those services or care by a health care service plan or a health insurer, if the service or care is lawful under the laws of California, regardless of the patient's location.

This bill, and the other states' laws this bill responds to, implicate the Constitution's Full Faith and Credit Clause. The Full Faith and Credit Clause states:

Full faith and credit shall be given in each state to the public acts, records, and judicial proceedings of every other state. And the Congress may by general laws prescribe the manner in which such acts, records, and proceedings shall be proved, and the effect thereof.³⁹

The primary function of the Clause, it is generally agreed, is to require states to recognize judgments from other state courts, so that "a cause of action merged in a judgment in one state is likewise merged in every other."⁴⁰ Less clear, however, is how the Clause's mandate that states recognize each other's "public acts" operates in cases like this one – when one state's public acts purport to penalize conduct taking place in another state which is legal in that other state.

As evidenced by SB 107 and the Governor's signing statement, this state has a public policy of protecting people receiving health care they need, including gender-affirming care. This bill may very well not run afoul of the Full Faith and Credit Clause as it would fall within the public policy exception for public acts. The Supreme Court upheld the application of California law to settle a dispute of conflicting workers compensation statutes holding "[a] rigid and literal enforcement of the Full Faith and

³⁹ U.S. Const., art. IV, § 1.

⁴⁰ *Magnolia Petroleum Co. v. Hunt* (1943) 340 U.S. 430, 439; see *Underwriters National Assurance Co. v. North Carolina Life and Accident and Health Insurance Guaranty Assn.* (1982) 455 U.S. 691, 703-704 ("Ours is a union of States, each having its own judicial system capable of adjudicating the rights and responsibilities of the parties brought before it. Given this structure, there is always a risk that two or more States will exercise their power over the same case or controversy, with the uncertainty, confusion, and delay that necessarily accompany relitigation of the same issue. [Citations.] Recognizing that this risk of relitigation inheres in our federal system, the Framers provided that 'Full Faith and Credit shall be given in each State to the public Acts, Records, and judicial Proceedings of every other State.'").

Credit Clause, without regard to the statute of the forum, would lead to the absurd result that wherever a conflict arises, the statute of each state must be enforced in the courts of the other, but cannot be in its own.”⁴¹ The Court further stated: “Prima facie every state is entitled to enforce in its own courts its own statutes, lawfully enacted. One who challenges that right, because of the force given to a conflicting statute of another state by the full faith and credit clause, assumes the burden of showing, upon some rational basis, that of the conflicting interests involved those of the foreign state are superior to those of the forum.”⁴² A few years later, the Court noted that “the Full Faith and Credit Clause is not an inexorable and unqualified command. It leaves some scope for state control within its borders...”⁴³ These cases seem to indicate that states can uphold their public policies and apply their laws when a conflict of laws arises in a forum in that state and not run afoul of the Full Faith and Credit Clause. If California was compelled to enforce an out-of-state law denying a person the right to receive gender-affirming care, it would require California to deny individuals their rights under state law. This would lead to an “absurd result” as described by the Court in *Alaska Packers Association*.

With respect to whether a state must prioritize another state’s laws at the expense of its own, the Supreme Court has noted that a “rigid and literal enforcement of the Full Faith and Credit Clause, without regard to the statute of the forum, would lead to the absurd result that wherever a conflict arises, the statute of each state must be enforced in the courts of the other, but cannot be in its own.”⁴⁴ Thus, the law now acknowledges a preference to uphold the public policy of the forum state when a conflict of laws arises, recognizing that, “the Full Faith and Credit Clause is not an inexorable and unqualified command. It leaves some scope for state control within its borders[...].”⁴⁵ The Supreme Court has recognized similar policy limitations with respect to state records, holding “just as the mechanisms for enforcing a judgment do not travel with the judgment itself for the purposes of Full Faith and Credit ... similarly [a state] decree cannot determine the evidentiary issues in a lawsuit brought by parties who were not subject to the jurisdiction of the [that state’s court].”⁴⁶ As was also concluded in this Committee’s analysis of SB 107, this bill’s provisions appear to fall within California’s right to set its own policies and procedures.

⁴¹ *Alaska Packers Association v. Industrial Accident Commission* (1935) 294 U.S. 532, 547.

⁴² *Id.* at 547-48.

⁴³ *Pink v. AAA Highway Express, Inc.* (1941) 314 U.S. 201,210.

⁴⁴ *Alaska Packers*, *supra*, at 547.

⁴⁵ *Pink*, *supra*, at 210.

⁴⁶ *Baker v. General Motors Corp.* (1998) 522 U.S. 222, 239.

6. This bill imposes civil penalties against a person or entity that submits a false affidavit in connection with seeking an out-of-state subpoena, warrant, wiretap order, pen register trap and trace order, legal process, or request from any law enforcement agent or entity

Under existing law, any out-of-state subpoena, warrant, wiretap order, pen register trap and trace order, legal process, or request from any law enforcement agent or entity must include an affidavit or declaration under penalty of perjury that the discovery is not in connection with an out-of-state proceeding relating to any legally protected health care activity unless the out-of-state proceeding meets all of the following requirements: (a) is based in tort, contract, or on statute; (b) is actionable, in an equivalent or similar manner, under the laws of this state; and (c) was brought by the patient who received a legally protected health care activity or the patient's legal representative.⁴⁷ This bill provides that a person who submits a false affidavit in violation of these provisions is punishable by a civil penalty of \$15,000, and authorizes the penalty to be brought by the Attorney General. The bill provides a statute of limitation of six years to bring such an action. This civil penalty is in addition to any other penalties or remedies provided by law, such as penalty of perjury.

7. Amendments⁴⁸

The author has agreed to take technical amendments to clarify that a "gender-affirming health care services facility" includes an office operated by a "licensed" health care provider. The word "licensed" was inadvertently left out of prior amendments.

Additionally, the author has agreed to take technical amendments to clarify that Sections 6218 and 6218.01 of the Government Code apply to a "covered health care services provider, employee, volunteer, or patient," as that term is defined in the bill.

8. Statements in support

Equality California, one of the sponsors of the bill, writes in support:

[...] In recent years, we have witnessed an alarming rise in coordinated attacks on the rights of LGBTQ+ people, especially transgender individuals. More than 500 anti-LGBTQ+ bills have been introduced across the country in 2025 alone. Many of these harmful efforts specifically target access to health care for transgender people – including attempts to criminalize providers and restrict access to medically necessary, evidence-based care. At the federal level, the Trump administration has taken steps to block access to essential care for transgender youth and threaten

⁴⁷ Pen. Code § 13778.3(d).

⁴⁸ The amendments may also include technical, nonsubstantive changes recommended by the Office of Legislative Counsel.

providers with criminal penalties simply for delivering medically necessary treatment. [...] Although California leads the nation in protecting access to reproductive and gender-affirming care, more must be done to ensure the privacy and safety of all who seek and provide these services. [...] AB 82 ensures that individuals accessing and providing essential health care in California can do so without fear of surveillance, retaliation, or harassment.

Planned Parenthood Affiliates of California, another sponsor of the bill, writes in support:

[...] The federal administration and state legislatures are actively targeting vulnerable communities – in particular transgender people and their families – by removing antidiscrimination protections for transgender people and restricting access to gender-affirming care and other support services. These actions not only cause uncertainty and harm for the transgender, gender-nonconforming, and intersex (TGI) community but threaten the safety of patients who seek gender-affirming health care and the people who provide and support this care. We know that the abortion rights and LGBTQ movements are intertwined – those who attack reproductive rights also target the LGBTQ community. California must build on the progress it has made to improve access to health care and serve as a safe haven for people who seek care here.

AB 82 protects the health data of patients receiving gender-affirming care and extends California's landmark Safe at Home Program to include gender-affirming care providers, ensuring that people who provide or are affiliated with gender-affirming care facilities can keep certain personal information confidential in public records. The bill also puts into place additional privacy protections in California's Controlled Substances Utilization Review and Evaluation System (CURES).[...]

9. Statements in opposition

CAUSE: Californians United for Sex-based Evidence in Policy and Law, writes in opposition, stating:

[...]AB 82 extends extraordinary legal protections – originally intended for abortion providers – to those providing “gender-affirming care.” This is an untenable overreach. It is illogical and dangerous to extend far-reaching and unique legal shields to providers of medical interventions the purpose of which is to effect extreme changes in the appearance of a person's normal and healthy body. Puberty blockers, cross-sex hormones, and surgeries all pose significant risks to patients. Proponents of these treatments have not demonstrated measurable efficacy, safety, or improvements in mental health outcomes.

AB 82 does not protect patients; it undermines their ability to access essential information required for informed medical decisions. It also severely restricts the

ability of harmed individuals – even legal residents of other states – to seek legal redress.

All patients and families have a right to clear, comprehensive information about treatment options, risks, potential long-term consequences, and the likely outcomes of any medical intervention. They must also retain the legal ability to seek recourse if harmed. [...]

SUPPORT

Alliance for TransYouth Rights (sponsor)

Equality California (sponsor)

Planned Parenthood Affiliates of California (sponsor)

Transfamily Support Services (sponsor)

American College of Obstetricians and Gynecologists - District IX

APLA Health

Asian Americans Advancing Justice-Southern California

CFT – a Union of Educators and Classified Professionals, AFT, AFL-CIO

California Legislative LGBTQ Caucus

California LGTBQ Health and Human Services Network

California Psychological Association

California Public Defenders Association (CPDA)

California Women's Law Center

Central Coast Coalition for Inclusive Schools

Children's Hospital Los Angeles

Courage California

East Bay Community Law Center

Easterseals Northern California

El/La Para TransLatinas

Electronic Frontier Foundation

Ella Baker Center for Human Rights

Essential Access Health

Los Angeles LGBT Center

PFLAG Clayton-concord

PFLAG Fresno

PFLAG Los Angeles

PFLAG Oakland-east Bay

PFLAG Sacramento

Public Counsel – Transition Age Youth Team

Rainbow Families Action Bay Area

Sacramento LGBT Community Center

The Fresno Collective for Inclusive Medicine

The San Diego LGBT Community Center

The Source LGBT+ Center

The Translatin@ Coalition

Viet Rainbow of Orange County
Western Center on Law & Poverty
Youth Leadership Institute
2 Individuals

OPPOSITION

California Family Council
CAUSE: Californians United for Sex-based Evidence in Policy and Law
Our Duty

RELATED LEGISLATION

Pending Legislation:

SB 497 (Wiener, 2025), among other things, prohibits a state or local agency or employee, appointee, officer, contractor, or official or any other person acting on behalf of a public agency from knowingly providing any CURES data or knowingly expending or using time, money, facilities, property, equipment, personnel, or other resources in furtherance of any interstate investigation or proceeding seeking to impose civil, criminal, or disciplinary liability upon the provision or receipt of legally protected health care activity. SB 497 is currently pending in the Assembly Public Safety Committee.

AB 54 (Krell, 2025), among other things, reaffirms that it has been, and continues to be, lawful to cause the delivery of, or mail, ship, take, receive, or otherwise transport, any drug, medicine, or instrument that can be designed or adapted to produce an abortion that is lawful in this state. AB 54 is currently pending in this Committee.

Prior Legislation:

SB 1131 (Newman, Ch. 554, Stats. 2022), among other things, expanded eligibility in the state's address confidentiality program to include individuals who face threats of violence or violence or harassment from the public because of their work for a public entity and provided that participants in the program are eligible for confidential voter status.

SB 636 (Corbett, Ch. 200, Stats. 2011), among other things, specified that a participant's personal address may be revealed after termination of certification if the participant's termination resulted from the program manager determining that false information was used in the application process or the program was used as subterfuge.

AB 2251 (Evans, Ch. 486, Stats. 2006) prohibited the public posting or display of the home address or telephone number of specified individuals who are associated with a reproductive health care service provider on the Internet.

AB 797 (Shelley, Ch. 380, Stats. 2002) expanded eligibility in the state's address confidentiality program to reproductive health care service providers, their employees and patients.

SB 1318 (Alpert, Ch. 562, Stats. 2000) expanded the Safe at Home Program to victims of stalking.

SB 489 (Alpert, Ch. 1005, Stats. 1998) established the Safe at Home program within the Office of the Secretary of State to allow victims of domestic violence to apply for a substitute address to be used in public records in order to prevent their assailants, or potential assailants, from finding their work or home address.

PRIOR VOTES

Senate Public Safety Committee (Ayes 5, Noes 1)
Assembly Floor (Ayes 62, Noes 5)
Assembly Appropriations Committee (Ayes 11, Noes 0)
Assembly Judiciary Committee (Ayes 9, Noes 0)
Assembly Public Safety Committee (Ayes 8, Noes 0)
