

AMENDED IN ASSEMBLY MARCH 2, 2026

CALIFORNIA LEGISLATURE—2025–26 REGULAR SESSION

**ASSEMBLY BILL**

**No. 1843**

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**Introduced by Assembly Member Elhawary**

February 11, 2026

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An act to add ~~Sections 1342.76 and 121027~~ *Section 1342.76* to the Health and Safety Code, and to add Section 10123.1936 to the Insurance Code, relating to public health.

LEGISLATIVE COUNSEL'S DIGEST

AB 1843, as amended, Elhawary. Communicable diseases: hepatitis B and C.

Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care and makes a willful violation of the act a crime. Existing law also provides for the regulation of health insurers by the Department of Insurance. *Existing law generally prohibits a health care service plan or health insurer from subjecting antiretroviral drugs that are medically necessary for the prevention of HIV/AIDS to prior authorization or step therapy.*

This bill would prohibit a health care service plan and health insurer from subjecting direct-acting antiviral drugs that are medically necessary for the treatment of hepatitis C to prior authorization. The bill would specify that these provisions do not require a health care service plan or health insurer to cover all therapeutically equivalent versions without prior authorization. The bill would prohibit a health care service plan and health insurer from imposing prior authorization requirements, as specified, and would require a health care service plan and health insurer's clinical criteria for hepatitis C treatment to align with current

guidelines and the standard of care consistent with the standards of the ~~American Liver Foundation and Association for the Study of Liver Diseases and the~~ Infectious Diseases Society of America. Because a violation of these provisions by a health care service plan would be a crime, this bill would impose a state-mandated local program.

~~Existing law requires public health records related to human immunodeficiency virus or acquired immunodeficiency syndrome, containing personally identifying information, that were developed or acquired by a state or local public health agency, or an agent of that agency, to be confidential and not disclosed, except as otherwise provided by law for public health purposes or pursuant to a written authorization by the person who is the subject of the record or by their guardian or conservator. Existing law additionally authorizes disclosure when the confidential information is necessary for the coordination of, linkage to, or reengagement in care for a person. Existing law makes disclosure of confidential public health records punishable by various civil penalties or as a misdemeanor, as specified.~~

~~This bill would make public health records relating to hepatitis B and hepatitis C, containing personally identifying information, that were developed or acquired by a local health agency, or an agent of that agency, to be confidential and not disclosed, except as otherwise provided by law or with the written consent of the person who is the subject of the record or by their legal representative. The bill would authorize a local health officer to disclose any information when necessary to facilitate clinical management, treatment coordination, and prevent the spread of disease or occurrence of additional cases. The bill would apply existing civil and criminal penalties to unauthorized disclosures of confidential public health records covered by these provisions. By expanding the scope of an existing crime, this bill would impose a state-mandated local program.~~

~~Existing constitutional provisions require that a statute that limits the right of access to the meetings of public bodies or the writings of public officials and agencies be adopted with findings demonstrating the interest protected by the limitation and the need for protecting that interest.~~

~~This bill would make legislative findings to that effect.~~

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 1342.76 is added to the Health and Safety  
2 Code, to read:

3 1342.76. (a) (1) A health care service plan shall not subject  
4 direct-acting antiviral drugs that are medically necessary for the  
5 treatment of hepatitis C, including, but not limited to,  
6 sofosbuvir/velpatasvir, sofosbuvir/ledipasvir,  
7 glecaprevir/pibrentasvir, or elbasvir/grazoprevir, to prior  
8 authorization, except as provided in paragraph (2).

9 (2) If the United States Food and Drug Administration has  
10 approved one or more therapeutic equivalents of a drug, device,  
11 or product for the treatment of hepatitis C, this section does not  
12 require a health care service plan to cover all of the therapeutically  
13 equivalent versions without prior authorization, if at least one  
14 therapeutically equivalent version is covered without prior  
15 authorization.

16 (b) A health care service plan’s clinical criteria for hepatitis C  
17 treatment and prior authorization shall align with the current  
18 guidelines and the standard of care consistent with the standards  
19 of the American Liver Foundation and Association for the Study  
20 of Liver Diseases and the Infectious Diseases Society of America,  
21 and shall not impose prior authorization requirements, including,  
22 but not limited to, all of the following:

- 23 (1) A liver biopsy.
- 24 (2) Genotype testing.
- 25 (3) Sobriety requirements.
- 26 (4) Fibrosis staging thresholds.
- 27 (5) Elastography or FibroScan documentation.
- 28 (6) Ultrasound documentation.
- 29 (7) A specialist referral or evaluation.

30 ~~SEC. 2. Section 121027 is added to the Health and Safety Code,~~  
31 ~~to read:~~

32 ~~121027. (a) Public health records relating to hepatitis B and~~  
33 ~~hepatitis C containing personally identifying information that were~~

1 developed or acquired by local health agencies or their agents shall  
2 be confidential and shall not be disclosed except as otherwise  
3 provided by law or with the written consent of the individual who  
4 is the subject of the record or by the legal representative of the  
5 individual.

6 ~~(b) A local health officer may, for the purposes of case~~  
7 ~~investigation and linkage to, or reengagement in care for, the person~~  
8 ~~with hepatitis B or hepatitis C, may request and disclose without~~  
9 ~~written consent of the individual any information, including~~  
10 ~~personally identifying information, in hepatitis B and hepatitis C~~  
11 ~~public health records from the person's health care provider or~~  
12 ~~health care facilities as may be necessary to facilitate clinical~~  
13 ~~management, treatment coordination, and the prevention of the~~  
14 ~~spread of disease or occurrence of additional cases.~~

15 ~~(c) A local health officer, for the purposes of facilitating~~  
16 ~~appropriate hepatitis B and hepatitis C medical care and treatment,~~  
17 ~~may further disclose the information to the person positive for~~  
18 ~~hepatitis B or hepatitis C who is the subject of the record, or the~~  
19 ~~health care provider who provides the person's hepatitis care, for~~  
20 ~~the purpose of proactively offering and coordinating care and~~  
21 ~~treatment services. Any personally identifying information received~~  
22 ~~pursuant to this subdivision by a health care provider or health~~  
23 ~~care facility shall be confidential and shall not be further disclosed~~  
24 ~~except as required by law or with the written consent of the~~  
25 ~~individual.~~

26 ~~(d) Any disclosures authorized by subdivision (a), (b), or (c)~~  
27 ~~shall include only the information necessary for the purpose of~~  
28 ~~that disclosure and shall be made only upon the agreement that~~  
29 ~~the information will be kept confidential as described in subdivision~~  
30 ~~(a). Any unauthorized further disclosure shall be subject to the~~  
31 ~~penalties described in subdivision (e).~~

32 ~~(e) (1) A person who negligently discloses the content of a~~  
33 ~~confidential public health record to a third party, except pursuant~~  
34 ~~to a written authorization, as described in subdivision (a), or as~~  
35 ~~otherwise authorized by law, shall be subject to a civil penalty in~~  
36 ~~an amount not to exceed five thousand dollars (\$5,000), plus court~~  
37 ~~costs, as determined by the court. The penalty and costs shall be~~  
38 ~~paid to the person whose record was disclosed.~~

39 ~~(2) A person who willfully or maliciously discloses the content~~  
40 ~~of any confidential public health record to a third party, except~~

1 pursuant to a written authorization, or as otherwise authorized by  
2 law, shall be subject to a civil penalty in an amount not less than  
3 five thousand dollars (\$5,000) and not more than twenty-five  
4 thousand dollars (\$25,000), plus court costs, as determined by the  
5 court. The penalty and costs shall be paid to the person whose  
6 confidential public health record was disclosed.

7 (3) A person who willfully, maliciously, or negligently discloses  
8 the content of a confidential public health record to a third party,  
9 except pursuant to a written authorization, or as otherwise  
10 authorized by law, that results in economic, bodily, or  
11 psychological harm to the person whose confidential public health  
12 record was disclosed, is guilty of a misdemeanor, punishable by  
13 imprisonment in a county jail for a period not to exceed one year,  
14 or a fine not to exceed twenty-five thousand dollars (\$25,000), or  
15 both, plus court costs, as determined by the court. The penalty and  
16 costs shall be paid to the person whose confidential public health  
17 record was disclosed.

18 (4) A person who commits an act described in paragraph (1),  
19 (2), or (3) is liable to the person whose confidential public health  
20 record was disclosed for all actual damages for economic, bodily,  
21 or psychological harm that is a proximate result of the act.

22 (5) Each violation of this section is a separate and actionable  
23 offense.

24 (6) This section does not limit or expand the right of an injured  
25 person whose confidential public health record was disclosed to  
26 recover damages under any other applicable law.

27 (7) For the purposes of this section, a confidential public health  
28 record means the same as defined in subdivision (c) of Section  
29 121035.

30 ~~SEC. 3.~~

31 *SEC. 2.* Section 10123.1936 is added to the Insurance Code,  
32 to read:

33 10123.1936. (a) (1) A health insurer shall not subject  
34 direct-acting antiviral drugs that are medically necessary for the  
35 treatment of hepatitis C, including, but not limited to,  
36 sofosbuvir/velpatasvir, sofosbuvir/ledipasvir,  
37 glecaprevir/pibrentasvir, or elbasvir/grazoprevir, to prior  
38 authorization, except as provided in paragraph (2).

39 (2) If the United States Food and Drug Administration has  
40 approved one or more therapeutic equivalents of a drug, device,

1 or product for the treatment of hepatitis C, this section does not  
2 require a health insurer to cover all of the therapeutically equivalent  
3 versions without prior authorization, if at least one therapeutically  
4 equivalent version is covered without prior authorization.

5 (b) A health insurer’s clinical criteria for hepatitis C treatment  
6 and prior authorization shall align with the current guidelines and  
7 the standard of care consistent with the standards of the American  
8 ~~Liver Foundation and Association for the Study of Liver Diseases~~  
9 ~~and the Infectious Diseases Society of America~~, and shall not  
10 impose prior authorization requirements, including, but not limited  
11 to, all of the following:

- 12 (1) A liver biopsy.
- 13 (2) Genotype testing.
- 14 (3) Sobriety requirements.
- 15 (4) Fibrosis staging thresholds.
- 16 (5) Elastography or FibroScan documentation.
- 17 (6) Ultrasound documentation.
- 18 (7) A specialist referral or evaluation.

19 ~~SEC. 4. The Legislature finds and declares that Section 2 of~~  
20 ~~this act, which adds Section 121027 to the Health and Safety Code,~~  
21 ~~imposes a limitation on the public’s right of access to the meetings~~  
22 ~~of public bodies or the writings of public officials and agencies~~  
23 ~~within the meaning of Section 3 of Article I of the California~~  
24 ~~Constitution. Pursuant to that constitutional provision, the~~  
25 ~~Legislature makes the following findings to demonstrate the interest~~  
26 ~~protected by this limitation and the need for protecting that interest:~~

27 ~~In order to protect confidential and personal medical information,~~  
28 ~~it is necessary that the public health records relating to hepatitis~~  
29 ~~B and hepatitis C, as described in this act, remain confidential.~~

30 ~~SEC. 5.~~

31 *SEC. 3.* No reimbursement is required by this act pursuant to  
32 Section 6 of Article XIII B of the California Constitution because  
33 the only costs that may be incurred by a local agency or school  
34 district will be incurred because this act creates a new crime or  
35 infraction, eliminates a crime or infraction, or changes the penalty  
36 for a crime or infraction, within the meaning of Section 17556 of  
37 the Government Code, or changes the definition of a crime within

1 the meaning of Section 6 of Article XIII B of the California  
2 Constitution.

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