

SB 81 Requirements: A Hospital Compliance Primer

On Sept. 20, Gov. Gavin Newsom signed into law Senate Bill (SB) 81, which reaffirms existing protections against unlawful immigration enforcement actions at health care facilities. Although the bill took effect immediately, hospitals had 45 days (until Nov. 4, 2025) to review and update existing policies and procedures, as well as to train staff in properly responding to immigration enforcement activity.

Key Provisions

Protecting Patient Privacy and Safety

- SB 81 reaffirms existing state and federal law, which prohibits hospitals from disclosing patient information or providing access to nonpublic areas of a hospital without a valid judicial warrant.
- When access to nonpublic areas is denied, the law requires that hospitals — to the extent possible — have at least one personnel witness and document that access was not allowed.
- To the extent possible, hospitals must establish or update procedures related to immigration enforcement activity response, including monitoring, documenting, and receiving visitors.
- The new law requires hospitals establish internal processes for notifying a person in management, administration, or legal counsel about immigration enforcement inquiries and/or requests for access.
- It also requires that hospitals designate areas where patients are receiving treatment or care, or where a patient is discussing protected health information, as “nonpublic.” This can be achieved through mapping, signage, key entry, policy, or a combination thereof.
- SB 81 encourages, but does not require, hospitals to post a “notice to authorities” at facility entrances.

Enhanced Medical Information Protection

- SB 81 updates the definition of “medical information” under the California Medical Information Act to include individually identifiable information regarding immigration status or place of birth, if that information is known or collected by a hospital in relation to a patient’s medical history.

Because SB 81 is specific to immigration enforcement activity, it does not impact how hospitals should currently respond to patients in lawful custody who require medical care, including access to nonpublic areas.

For a look at how federal immigration enforcement intersects with California law, refer to CHA’s [analysis](#) and the attorney general’s SB 81 [compliance bulletin](#).

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